ProSomnus® MicrO$_2$® Combined Rx

FDA CLEARED · PATENTED · CE

ENGINEERED FOR: Comfort, Simplicity, Biocompatibility, Durability, Predictability

Leader In Precision OAT®

Case Info

Note: Turnaround time is 7 days + shipping. Call for a rush request. Rush fee will apply. Incomplete Rx information or technical evaluations may result in an increased turnaround time.

DR. NAME (Required) _____ **CASE DUE DATE** _____

SIGNATURE OF DENTIST (Required) _____ DENTIST LICENSE# (Required) _____

Person signing this authorization accepts sole responsibility for payment and agrees to pay all legal and collection costs in the event of suit, including reasonable fees. Dentist's signature will authorize ProSomnus® Sleep Technologies to construct, alter or repair the device described on this requisition.

ACCOUNT# _____

DR. ADDRESS _____

DR. PHONE _____ DR. EMAIL _____

PATIENT NAME (Required) _____

1 Sleep Device or Orthotic

ProSomnus MicrO$_2$ Sleep Device Options

Select advancement option Sleep Device.
Default Includes: Lingualess; Dual 90° Non-Radius Posts; Flat Plane Splint Design; Without Clasps; Device made at bite position, plus choice of advancement option.

- ❑ Series A Advancements 0.0, 1.0, 2.0, 3.0 (mm)
- ❑ Series B Advancements 0.0, 1.5, 2.5, 4.0 (mm)
- ❑ Series C Advancements 0.0, 0.5, 1.0, 1.5, 2.0, 2.5, 3.0, 3.5, 4.0 (mm)
- ❑ Series D Advancements 0.0, 1.0, 2.0, 3.0, 4.0, 5.0, 6.0 (mm)
- ❑ Custom _____

Morning Occlusal Guide [MOG] with Device

- ❑ [MOG]: Design includes an anterior bite ramp.
  - ❍ Qty. 1 ❍ Qty. 2 (default)
- ❑ [MOG] MIP: Design includes labial lingual splint that allows for posterior contact.
  - ❍ Qty. 1 ❍ Qty. 2 (default)

ProSomnus MicrO$_2$ Night Time Orthotic

- ❑ MicrO$_2$ Night Time Orthotic*
  Includes Upper and Lower arches
- ❑ Optional Mounting on Stratos Articulator
  Additional cost

*This product is not FDA cleared or designed to treat Sleep Apnea.

See back for descriptions, terms and conditions.

2 Special Instructions

_____

_____

_____

_____

_____

_____

S Supplies

- ❑ BluePro® Temp Device
- ❑ MicrO$_2$ Sample Model
- ❑ [MOG] Sample Model
- ❑ [MOG] MIP Sample Model
- ❑ ProSomnus MicrO$_2$ Rx's
- ❑ Shipping Boxes & Labels
- ❑ Patient Education Brochures
- ❑ George Gauge Kit
- ❑ 3.0mm Bite Forks
- ❑ 3.0mm Digital Bite Forks
- ❑ Extra Carrying Case

5860 West Las Positas Blvd., Ste. 25
Pleasanton, CA 94588
F925 558 4003

844 537 5337
Digital@ProSomnus.com
ProSomnus.com

PROSOMNUS® SLEEP TECHNOLOGIES

ProSomnus® MicrO$_2$® Sleep and Snore Device Series Advancement Guide

SERIES A: Range = 3.0mm

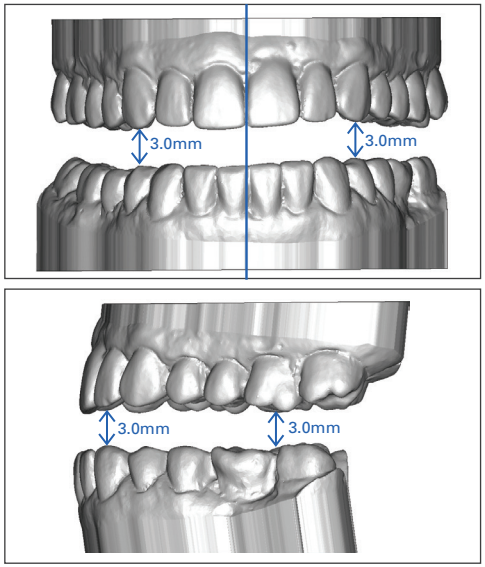
COMBINATION	ADVANCEMENTS
Upper 0 + Lower 0	0mm
Upper 0 + Lower 1	1.0mm
Upper 2 + Lower 0	2.0mm
Upper 2 + Lower 1	3.0mm

SERIES B: Range = 4.0mm

COMBINATION	ADVANCEMENTS
Upper 0 + Lower 0	0mm
Upper 0 + Lower 1.5	1.5mm
Upper 2.5 + Lower 0	2.5mm
Upper 2.5 + Lower 1.5	4.0mm

ProSomnus Sleep Device Bite Requirement

ProSomnus devices require 3.0mm of clearance at the lowest cusp point. The diagram below shows how to visualize the amount of space required.



Doctors have been reported using several additional techniques when issues arise to make sure they have enough clearance:

- Moving the bite fork to include dangling cusps.
- Modifying the bite fork to capture dangling cusps.
- Adding material to the incisal guide area to open the vertical more.
- Measuring with a caliper in the bicuspid and molar areas.
- Shortening the device when there is an excessive Curve of Spee.

Policy Guidelines

DIGITAL IMPRESSION POLICY: ProSomnus® Sleep Technologies receives digital impressions. For quality assurance purposes, sleep devices made from digital impressions are fit against a 3D printed model of the digital impression. We strongly recommend if sending digital impressions to also send a digital bite, rather than physical to avoid manufacturing delays. If sending a physical bite with digital impressions, please notify Digital@ProSomnus.com or notate when submitting files.

WARRANTY: ProSomnus 100% guarantees the workmanship and materials of this device. ProSomnus' service warranty can be found at ProSomnus.com (Terms and Conditions section).

DISCLAIMER: ProSomnus cannot warrant against customer dissatisfaction due to diagnosis, treatment decisions, style, or brand of device chosen. We're happy to assist you with any device adjustments and/or modifications, and to provide you with any information you may need to learn about the use of these devices.

OUR PROMISE TO YOU: Upon incoming examination of your case, if the ProSomnus manufacturing team determines that there is not enough bite clearance, nor enough retention to accommodate the standard design, we will NOT make changes without your knowledge or authorization unless noted in your preferences. Our manufacturing process will be temporarily stopped until we are able to contact you for a consultation regarding design alternatives that you prefer and prescribe.

The ProSomnus MicrO$_2$ Sleep & Snore Device is an FDA cleared and registered Medical Device.