## DESIGN FEATURES

<table>
<thead>
<tr>
<th>Ultrapositioner™</th>
<th>Somnodent® Standard and FLEX</th>
<th>Somnodent® Fusion™ and Herbst Advanced™</th>
<th>Thornton Adjustable Positioner® (TAP) Appliance</th>
<th>EMA®</th>
</tr>
</thead>
</table>
| **Description**  | • U/L full-coverage bite splints, permanently connected with buccal-placed advancing screws  
  • No clasps for retention  
  • Separate U/L full-coverage bite splints with side ramps and buccal-placed advancing screws  
  • Clasp retained (Except FLEX)  
  • Separate U/L full-coverage bite splints with side ramps and buccal-placed interchangeable wing for advancement (Fusion)  
  • Clasp retained (Herbst)  
  • Calibrated screw for adjustments on Herbst Adv.  
  • Separate U/L full-coverage bite splints with side ramps and buccal-placed interchangeable wing for advancement  
  • Elite has variable positioning hooks with lingual bar  
  • Attached adjustment knob  
  • Separate U/L full-coverage bite splints  
  • Hardware or anterior + labial, leaving more room for patients with large tongue  
  • 3 hook sizes  
  • Separate U/L full-coverage bite splints  
  • Long coverage for retention  
  • Attached adjustment knob  
  • Separate U/L full-coverage bite splints  
  • Long coverage for retention  
  • Long coverage for retention  
  • Attached adjustment knob  
  • Clasp retained (except FLEX)  
  • Separate U/L full-coverage bite splints  
  • Long coverage for retention  
  • Long coverage for retention  
  • Separate key  
  • Calibrated screw for adjustments  
  • Separate U/L full-coverage bite splints  
  • Long coverage for retention  
  | **Adjustment Capability**  | • 10 mm protrusive/retrusive  
  | • 5-6 mm protrusive/retrusive  
  | • 8.5 mm protrusive/retrusive  
  | • 10 mm protrusive/retrusive  
  | • 12-15 mm protrusive/retrusive  
  | • 6 mm protrusive/retrusive  
  | • Rear position adds 5 mm  
  | • 14 mm protrusive/retrusive  
  | **Lateral Ability**  | • 2-4 mm  
  | • 2-6 mm  
  | • 7-8 mm  
  | • 4-5 mm  
  | • Ample lateral movement  
  | **Facial Design**  | • Buccal screw mechanisms  
  | • Long coverage for retention  
  | • Smooth labial  
  | • Buccal screw mechanisms  
  | • Standard short coverage with ball clasps for retention  
  | • FLEX: Long coverage for retention  
  | • Smooth labial  
  | • Buccal advancement mechanism  
  | • Standard short coverage with ball clasps for retention  
  | • FLEX: Long coverage for retention  
  | • Smooth labial  
  | • Smooth buccal  
  | • Long coverage for retention  
  | • Attached adjustment knob  
  | • Labial screw mechanism  
  | • Long coverage for retention  
  | • Incisal screw port  
  | • Separate key  
  | • Smooth buccal  
  | • Long coverage for retention  
  | • Incisal screw port  
  | • Separate key  
  | • Buccal button attachment and interchangeable straps  
  | • Long coverage for retention  
  | **Tongue Space**  | • No tongue encroachment  
  | • Contoured lingual flanges  
  | • Hook-and-bar in anterior lingual region  
  | • More room for tongue  
  | • Hook and slot in anterior lingual region  
  | • No tongue encroachment  
  | **Material Choices**  | • Brux-eze®  
  | • Rem-e-deze®  
  | • Hard acrylic with clasps  
  | • FLEX  
  | • Plus = Brux-eze®  
  | • TL = Pressure-formed Triple Laminate  
  | • Pressure-formed Biocryl  
  | **SELECTION**  | **Use Indicators**  
  | • No tongue interference for patients with narrow arches, lingual tori, or large tongue  
  | • Stable posterior support  
  | • Limited lateral movement  
  | • Easily titratable during sleep  
  | • Patient needs good range of motion to seat U/L arch appliances as one piece  
  | • No clasps to adjust  
  | • Not recommended for heavy bruxers  
  | • No tongue interference for patients with narrow arches, lingual tori, or large tongue  
  | • Stable posterior support  
  | • Separate appliances make seating easier  
  | • Patients can open and close mouths during sleep  
  | • Patients feel less confined  
  | • Easily titratable during sleep  
  | • Limited lateral movement  
  | • Clasp retained (except FLEX)  
  | • TAP 1 bar-and-hook mechanism offers the most lateral ability for heavy bruxers  
  | • Patients feel less confined  
  | • Separate appliances make seating easier  
  | • Easily titratable in the mouth during sleep  
  | • Hardware is in the anterior tongue space  
  | • TAP 3 has smaller screw mechanism, but less protrusive or lateral ability than TAP 1  
  | • No clasps to adjust  
  | • dreamTAP® - more room for tongue  
  | • No tongue interference for patients with narrow arches, lingual tori, or large tongue  
  | • Not recommended for heavy bruxers  

*Attached adjustment knob can be removed after adjustments are complete.*
### Seating and Adjustment

<table>
<thead>
<tr>
<th>Adjustable PM Positioner™</th>
<th>SomnoDent®</th>
<th>TAP® Appliance</th>
<th>EMA®</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Heat in hot water (175°F) until flexible, as needed to seat fully (fits tighter as it cools)</td>
<td>• May need to adjust clasps for retention</td>
<td>• CPAP attachment</td>
<td>• Do not heat to seat</td>
</tr>
<tr>
<td>• Adjust screws: 1 turn (in direction of arrows) = 0.25 mm protrusive</td>
<td>• Adjust screws: 1 turn (in direction of arrows) = 0.10 mm protrusive. 1 mm = 10 turns</td>
<td>• If TAP TL: do not heat to seat</td>
<td></td>
</tr>
</tbody>
</table>

### REQUIREMENTS

#### Lab Requirements

- • U/L accurate models
- • Protrusive bite is required: 60% of measured protrusive ability and 4-5 mm clearance between U/L anterior incisal edges
- • George Gauge bite fork is recommended
- • Pro Gauge bite fork is recommended
- • SOMgauge bite fork is recommended
- • CPAP attachment
- • Anterior disclude block
- • Elastic hooks for vertical ligation
- • Anterior airway vent
- • CPAP attachment
- • Anterior disclude block
- • Anterior airway vent
- • CPAP attachment
- • Add posterior block (arbitrarily placed)
- • Additional bands can be ordered in 1 mm increments

#### Design Options

- • CPAP attachment
- • Anterior disclude block
- • Elastic hooks for vertical ligation
- • Anterior airway vent
- • CPAP attachment
- • Anterior disclude block
- • Anterior airway vent
- • CPAP attachment
- • Additional bands can be ordered in 1 mm increments

#### Repair Instructions

1. When appliances require relining for better fit, acrylic or clasp repair, screws replaced, screws reset, or other alterations, please send appliances along with upper and lower models in good condition.
2. When appliances require U/L bite changes, include a new correct bite registration along with upper and lower models in good condition.

**Important!** Appliances made of TL material cannot be repaired or relined.

### MATERIAL PROPERTIES

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<tbody>
<tr>
<td>APM Positioner™ and TAP®</td>
<td>APM Positioner™</td>
<td>TAP®</td>
<td>SomnoDent®</td>
<td>SomnoDent®</td>
<td>EMA®</td>
</tr>
<tr>
<td>• Standard material</td>
<td>• Available by special request only</td>
<td>• Consists of 3 layers of EVA material</td>
<td>• Standard material</td>
<td>• Special order</td>
<td>• Does not require hot water</td>
</tr>
<tr>
<td>• Heat-processed acrylic</td>
<td>• Stranger hybrid design has traditional hard acrylic on the occlusal and Brux-eze on lingual and facial</td>
<td>• Tooth layer is soft, 2 outer layers are hard</td>
<td>• Requires ball clasps</td>
<td>• No clasp required</td>
<td>• Standard material</td>
</tr>
<tr>
<td>• Customized fit</td>
<td>• Only the sides flex in hot water</td>
<td>• Does not require hot water</td>
<td>• Heat-processed acrylic</td>
<td>• Durable</td>
<td>• Not repairable</td>
</tr>
<tr>
<td>• Comfortable</td>
<td>• Maintains fit</td>
<td>• Thin, soft lining</td>
<td>• Customized fit</td>
<td>• Maintain fit</td>
<td>• Not relineable</td>
</tr>
<tr>
<td>• Flexibility in hot water ensures retention</td>
<td>• Repairable and relineable</td>
<td>• Comfortable, flexible gasket retention</td>
<td>• Durable</td>
<td>• Repairable</td>
<td>• Reversible</td>
</tr>
<tr>
<td>• Fits, even if not worn regularly</td>
<td>• Available by special request only</td>
<td>• Very durable</td>
<td>• Maintains fit</td>
<td>• Repairable</td>
<td>• Reversible</td>
</tr>
<tr>
<td>• On-call flexibility</td>
<td>• 20% hard acrylic on occlusal surface</td>
<td>• Not repairable</td>
<td>• Repairable</td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Material memory</td>
<td></td>
<td>• Not relineable</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Maintains fit</td>
<td></td>
<td>• TL does not allow for in-lab articulation: no occlusal blocks or pre-set adjustment</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>• Repairable and relineable</td>
<td></td>
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**IMPORTANT INFORMATION CONCERNING DSG ORAL SLEEP APPLIANCES**

Product Assurance: Dental Services Group oral sleep appliances are FDA cleared. They have been thoroughly researched, tested, and found to be highly effective in providing and maintaining oral airway patency during sleep. Warranty: Dental Services Group laboratories fully guarantee the quality of our oral sleep appliances. The EMA appliance is guaranteed for a period of 30 days against fabrication errors or material defects. All other oral sleep appliances are guaranteed for 90 days against fabrication errors or material defects. Disclaimer: Dental Services Group laboratories cannot warrant against dissatisfaction due to diagnosis or style of appliance chosen. We're happy to assist you with any appliance adjustments and/or modifications, and to provide you with any information you may need to learn about the dental treatment of sleep disorders. DSG advises a thorough patient consultation and the use of informed consent documentation. We strongly recommend a medical evaluation and diagnosis prior to the treatment of sleep apnea with oral appliances. Statement of Conformity: Available upon request. Rev. 07/16