

Informed Consent

Custom Oral Appliance--Snoring

You are receiving a custom oral appliance. The purpose of the appliance is to reduce and/or eliminate night time snoring by advancing your mandible. It is understood that there is no guarantee of success due to the variations in patient response. Some patients will adjust immediately to wearing the appliance at bedtime, and others will require a few attempts until they are comfortable. It is not uncommon to have some muscle soreness the first few nights of wearing the device. Individuals with prior TMJ discomfort are more likely to experience this side effect, but all patients are susceptible. If this does not improve, please discontinue use and contact the office. It is understood that there is no guarantee that you will become comfortable wearing the appliance.

The fee for the custom oral appliance for snoring is \$500. This fee is due in full at the appliance impression appointment. We do not handle submission to your medical insurance, and have found that the appliance is not covered by medical insurance. The appliance is guaranteed for material and workmanship for 6 months from date of delivery. It is understood that any dental work resulting in a change in tooth anatomy will adversely affect the fit of the appliance. It is recommended that all major dental work (crowns, bridges, implants, fillings, etc.) be addressed before fabrication of the appliance. Any desired orthodontic treatment should be done before fabricating the appliance. If the appliance needs to be replaced outside of the warranty period, the replacement fee will be the going cost at the time the replacement is needed.

The custom oral appliance does not cure snoring and can only be effective when worn. Because of the long-term wear of the appliance, it is reasonable to assume that it will need replacing every 3-5 years. This schedule will vary between patients. Also, as a possible result of the long-term wear, it is possible to have changes in the bite (occlusion) over time necessitating orthodontic treatment to correct the occlusion with associated costs. The baseline set of records taken at the start of appliance fabrication will be used to assess bite changes if needed.

When not being worn, the appliance should be stored in the protective case provided at the time of appliance delivery. The appliance should be brushed and/or soaked in a clear antibacterial rinse to keep it hygienic. Make sure the teeth are clean prior to seating the appliance each night. Trapping sugar against the teeth while wearing the appliance can lead to dental decay and gum disease.

Your signature below indicates that you have read and agree to the terms stated above and that you have had the opportunity to have any questions or concerns resolved to your satisfaction.

Patient signature

Date