

SnoreHookSplint™

Instructions for Fabrication
U.S. Patent Pending



Visit www.SnoreHookSplint.com for videos and trouble-shooting. For additional assistance, email Help.ChairsideSplint@gmail.com with questions or to schedule a phone conversation.

1. **Prepare Models.** Place block out putty into the deeper posterior embrasures (found on the more senior patients). Soak models in water and set aside.
2. **Assemble SnoreHook Splint Components.** Insert and snap-in secure the Hooking Mechanism into the pre-engineered portal of the maxillary polycarbonate tray. Place the CrossPlate into the slots of the mandibular tray (hint: one heated bead of Thermo-Acrylic can be used to tack and secure the CrossPlate. See image at Step 9)



3. **Conform Trays to Model Widths.** Set each tray over the corresponding occlusal surface of the models, and if necessary, expand or contract their width at their expansion slots to conform with the width of the arch.

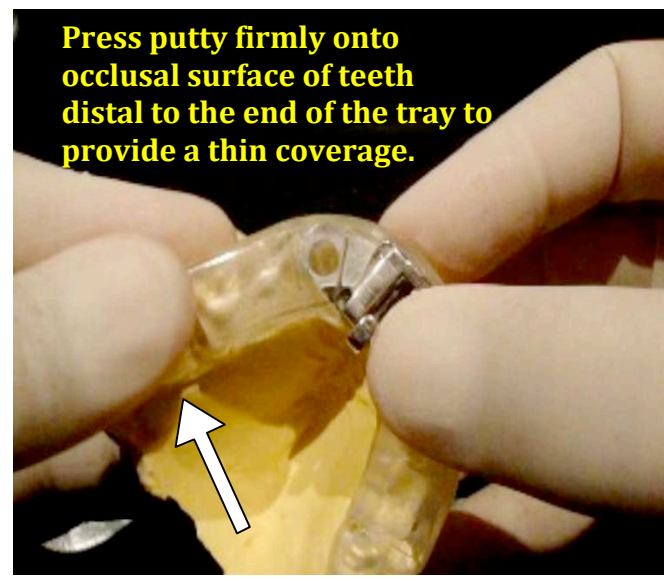
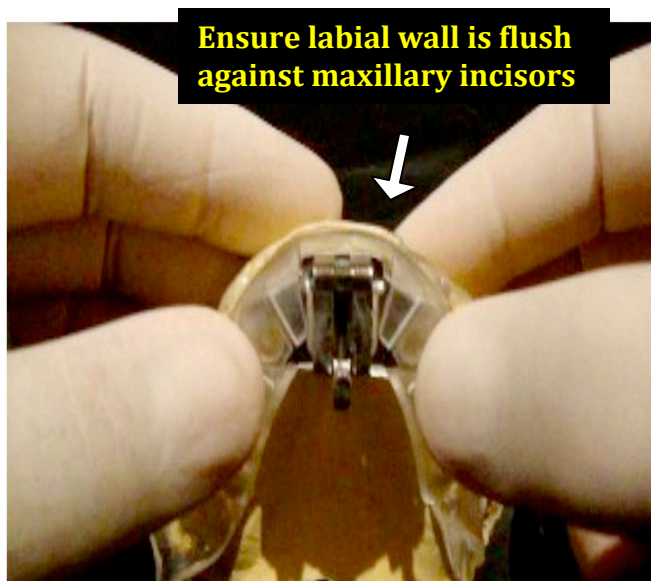
4. **Prepare Thermo-Acrylic-Beads.** Immerse 3 teaspoons of TAB's into a glass bowl of recently boiled water and allow to coalesce into a clear, colorless putty.



5. **Apply Thermo-Acrylic-Putty to Maxillary Tray.** With dampened latex gloves (**not** nitrile, which bonds to the Thermo-Acrylic) form clear putty into a rope the width of the tray and adapt to the dentition-facing surface of the maxillary tray. The putty will adhere to the tray.

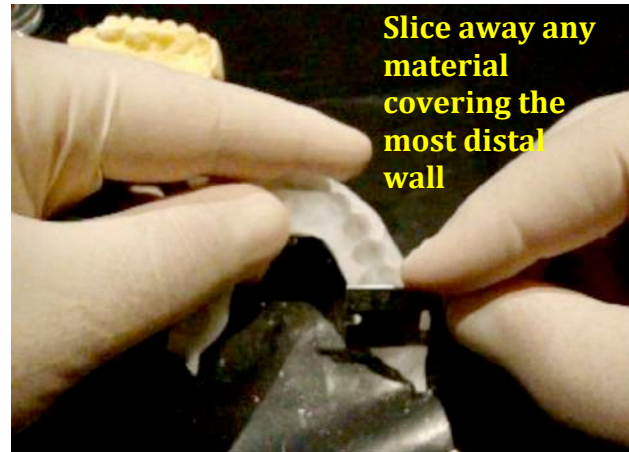


6. **Adapt Maxillary Tray-with-Putty to Maxillary Model.** With the anterior labial wall flush against the labial surface of the maxillary incisors, press the tray down firmly so as to contact with the occlusal surfaces of the teeth. Provide only a thin occlusal surface coverage (not buccal, lingual or distal) to the teeth distal to the ends of the tray.



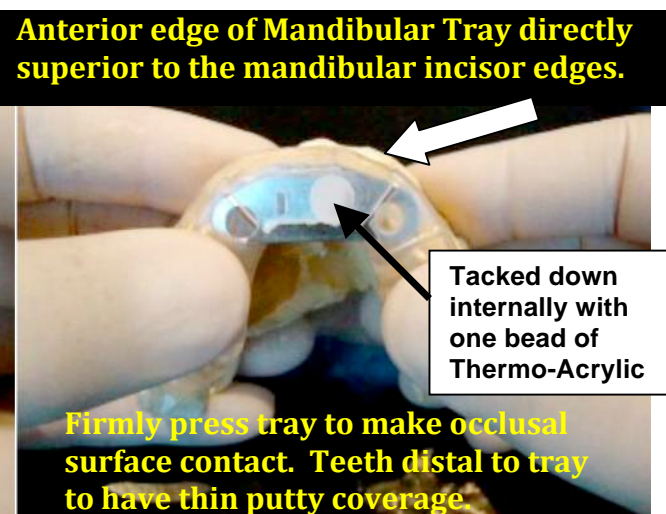
7. **Assure non-binding fit on model.** Adapt the extruded putty to engulf both labial and lingual surfaces (except those distal to the tray). **As soon as the putty acquires a grayish opacity, “tease” off, remove and replace the complete splint several times while the putty is firming.** Although it may seem as though the final device will be too loose by doing so, the material will ultimately shrink slightly as the material cools and hardens.

8. **Trim Excess.** While still in the grayish opaque stage (it’s almost too late in the photo below!), score the excess material along the gingival margins with a safety razor, indicating where to cut away excess material as it is hardening. Cut away material residing around the most distal wall of the most distal tooth (it’s not required for retention and only makes for more difficult insertion and removal).



HELPFUL HINT! If the putty is “shy” of the gingival margins anywhere, or more needs to be adding for any reason, its surface can be “flame brushed” with an alcohol torch to create a sticky surface, allowing an additional blob of hot putty to be directly added!

9. **Adapt Mandibular Tray-with-Putty to the Mandibular Model.** Repeat steps 4,5,7,8. **Do not cover the distal half of the CrossPlate with putty, so as to not inhibit the hooking mechanism.** Ensure that the leading anterior edge of the tray is directly superior to the incisal edges of the incisor teeth with only enough putty to capture the incisor’s edges (excess putty on the labial surfaces can be easily trimmed away).



10. **Secure the Security Bar in the Mandibular Splint.** Using a rotary instrument cut two slots (or “ports”) into the occlusal/lingual edge of the finished mandibular splint (one on each side), 4mm distal from the edge of the CrossPlate. Cut to length, and place the Security Bar into the ports, with each end seated firmly within each port. Prepare heated Thermo-Acrylic to embed and secure the ends of the Security Bar within the ports. The provision of the Security Bar is essential to ensure that the hooking mechanism cannot become disengaged from the distal side of the CrossPlate during it’s use.



11. **Ensure Individual Splint Comfort.** Each splint should first be assessed individually to ensure proper fit and comfort on the patient. If the splint’s fit is too tight or binding, gently “flame-brush” the internals with an alcohol torch (only a couple of passes is necessary) and then re-try-in the device. The slightly softened Thermo-Acrylic will allow the splint to “glide” in. Remove and replace the splint several times as the material re-hardens.
12. **Couple the Splints.** Prior to inserting the splints, the devices are aligned together, with the maxillary splint rotated 45 degrees from the mandibular splint. The hooking mechanism is then inserted between the CrossPlate and Security Bar, and then the maxillary splint is rotated to be back in parallel alignment with the mandibular splint. The patient then inserts the devices together in their coupled configuration.



13. **Mandibular Advancement.** When the Hook is at it’s most distal position, the default jaw relationship dictated by the coupled SnoreHook Splint is with the opposing incisors at edge-to-edge. Turning the Advancing Key one full revolution will advance the Hook .5 mm with a maximum advancement of 10mm beyond edge-to-edge.