

Mail To: _____

GERGEN'S
SLEEP APPLIANCE LAB
623-533-3202

DR. _____

PATIENT _____

Date Sent _____ Date Wanted _____
2-3 days prior to insertion

Sleep Herbst Snap-Fit (Hard Acrylic Only)
 Hard Acrylic Soft Liner Anterior Hooks: Yes No

Dorsal
 Hard Acrylic Soft Liner Anterior Hooks: Yes No

TAP Appliance: TAP1 TAP3 TAP3 Elite
 Hard Acrylic Soft Liner

EMA with buccal elastic straps

Silencer

Gergen's Original Snore Guard

Deprogramming Splint AM Aligner Bite Tab

Comments: _____

1745 W. Deer Valley Road • Building 1, Suite 112 • Phoenix, AZ 85027

gergensortho.com