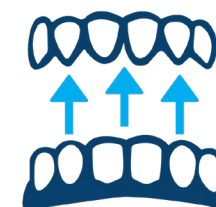


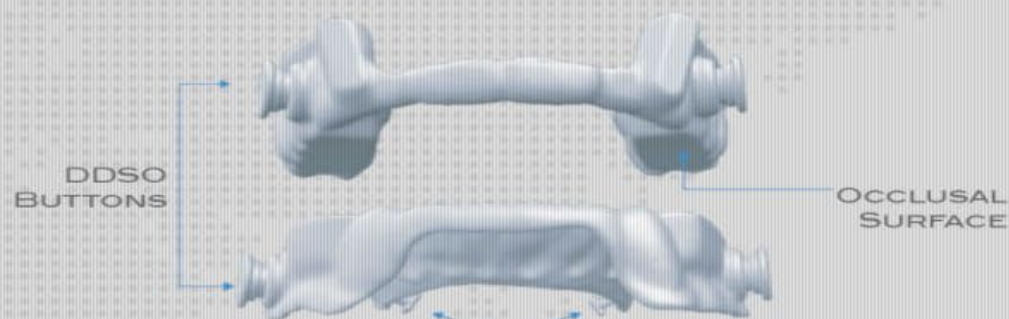


Digital Submission Instructions

By Diamond Orthotic Laboratory



DDSO — DIAMOND DIGITAL SLEEP ORTHOTIC



OCCLUSAL CONTACT

- ◆ Posterior
- ◆ Anterior
- ◆ Tripod
- ◆ ON Loop

REMOVABLE ATTACHMENTS

- ◆ Modular Tongue Positioners
(Small & Large included with every case)

Diamond is Proud to Announce the DDSO

The thinnest, most comfortable and durable orthotic on the market!

To submit a case to Diamond Orthotic Lab, please visit:

WWW.DIAMONDORTHOTICLAB.COM

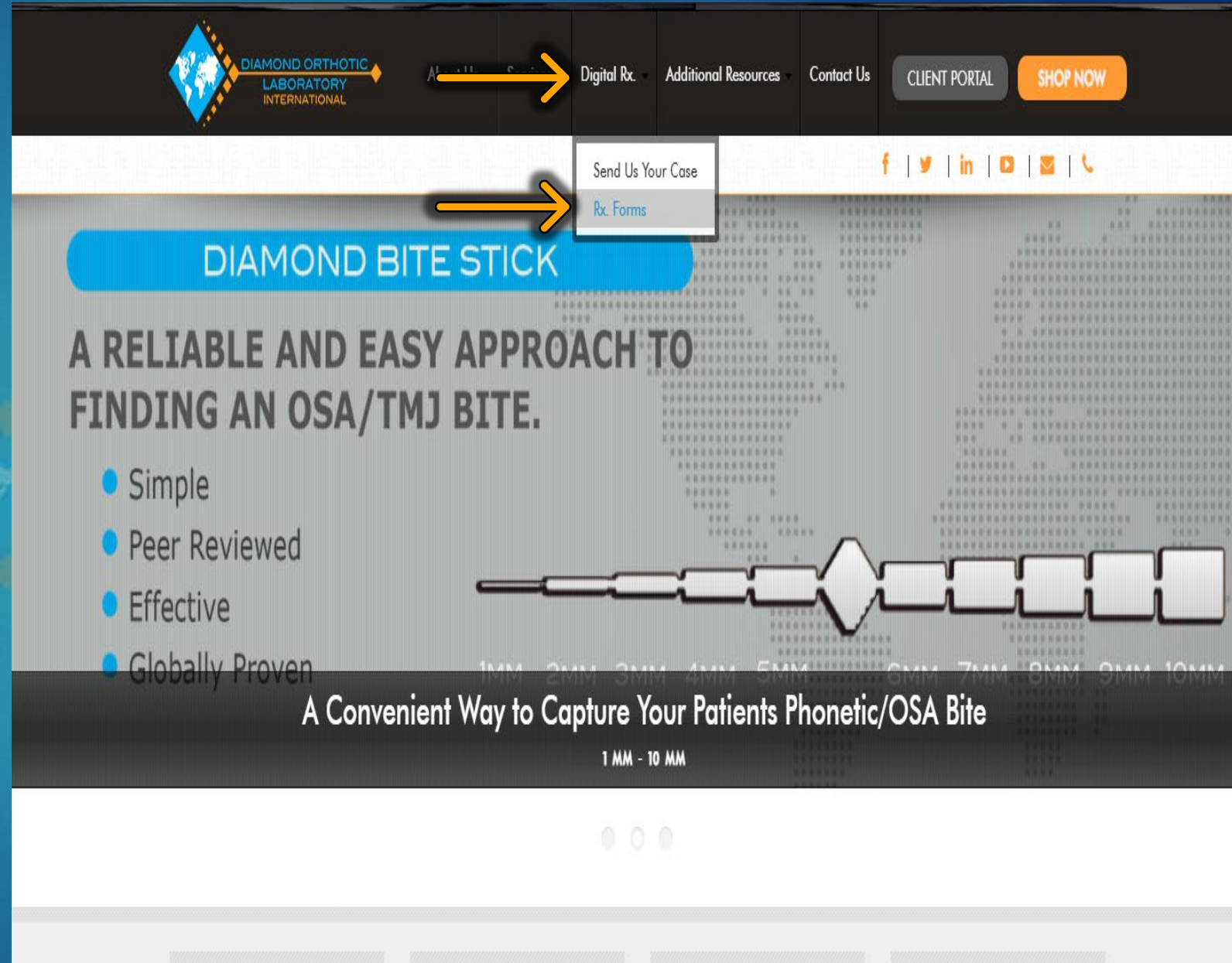
NOTE:

IF YOU ARE HAVING TROUBLE ACCESSING OUR WEBSITE, PLEASE TRY USING A DIFFERENT INTERNET BROWSER.

Step 2: Select Digital Rx

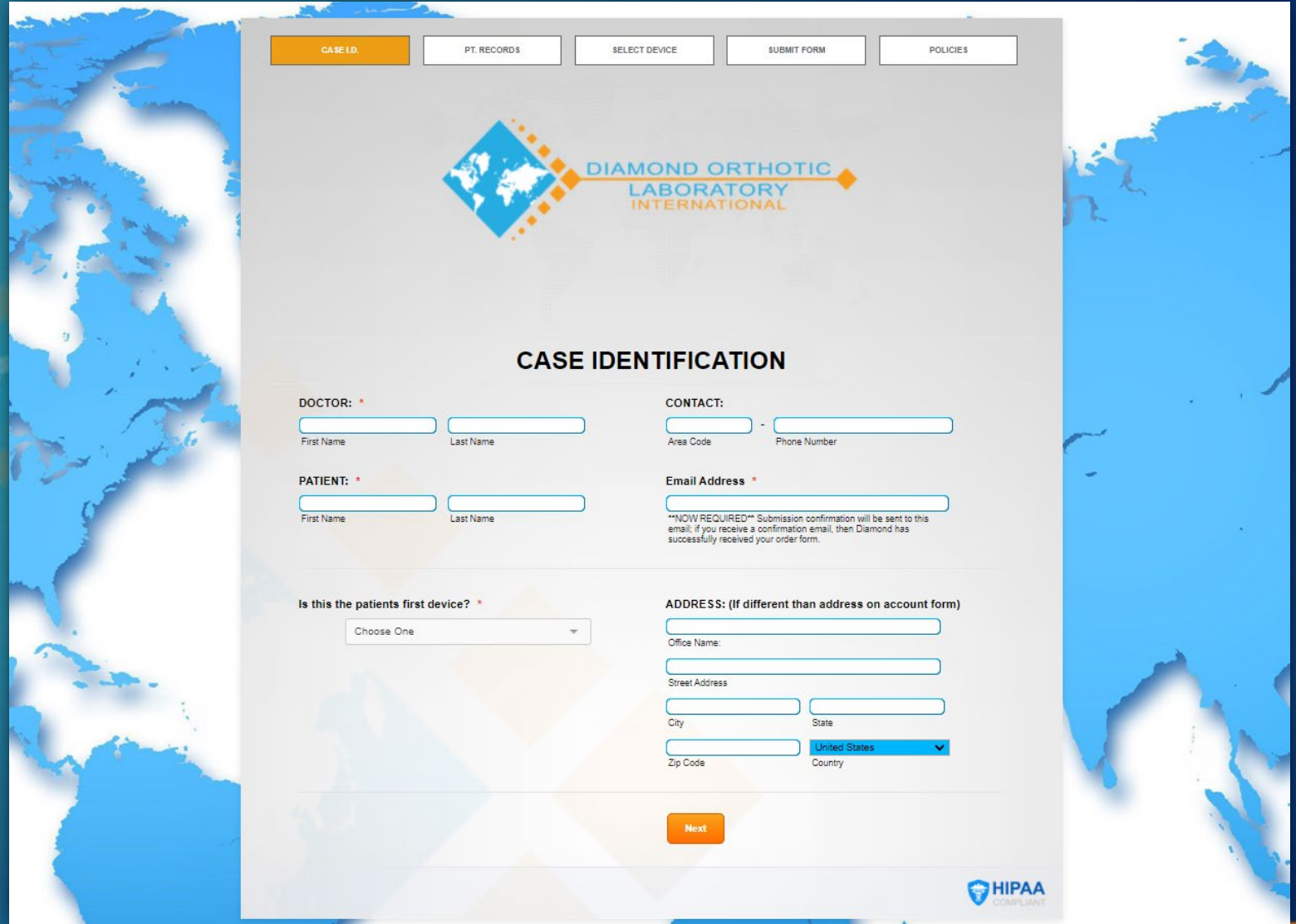
At the top of the main page you will see a MENU bar.

1. Click on the tab that reads: '**Digital Rx**' - or
2. Hover your mouse over **Digital Rx** and select **Rx. Forms** from the dropdown menu.



Step 3: Case identification

- After clicking the Rx. form tab, the page will redirect you to the **CASE IDENTIFICATION** page.
- **STEP 3.** If you are a new client, fill this page in **COMPLETELY**.
 - For returning clients, you only need to fill out *sections with a red asterisk ** - these fields are required to successfully submit your order form.
- **Note:** If you have multiple offices, please specify correct address for each case.



The screenshot displays the 'CASE IDENTIFICATION' form on the Diamond Orthotic Laboratory International website. The form is set against a light gray background with a faint world map. At the top, a navigation bar includes tabs for 'CASE I.D.' (highlighted in orange), 'PT. RECORDS', 'SELECT DEVICE', 'SUBMIT FORM', and 'POLICIES'. The Diamond Orthotic Laboratory International logo, featuring a blue diamond with a white world map, is centered above the form title. The form itself is divided into several sections: 'DOCTOR: *' with fields for First Name and Last Name; 'CONTACT:' with fields for Area Code and Phone Number; 'PATIENT: *' with fields for First Name and Last Name; 'Email Address *' with a single text field and a note about submission confirmation; 'Is this the patients first device? *' with a dropdown menu; and 'ADDRESS: (If different than address on account form)' with fields for Office Name, Street Address, City, State, Zip Code, and Country (a dropdown menu with 'United States' selected). An orange 'Next' button is positioned at the bottom right of the form. A 'HIPAA COMPLIANT' logo is visible in the bottom right corner of the page.

CASE IDENTIFICATION

DOCTOR: *

First Name Last Name

CONTACT:

Area Code Phone Number

PATIENT: *

First Name Last Name

Email Address *

NOW REQUIRED Submission confirmation will be sent to this email; if you receive a confirmation email, then Diamond has successfully received your order form.

Is this the patients first device? *

Choose One

ADDRESS: (If different than address on account form)

Office Name:

Street Address

City State

Zip Code Country










United States

Next

HIPAA COMPLIANT

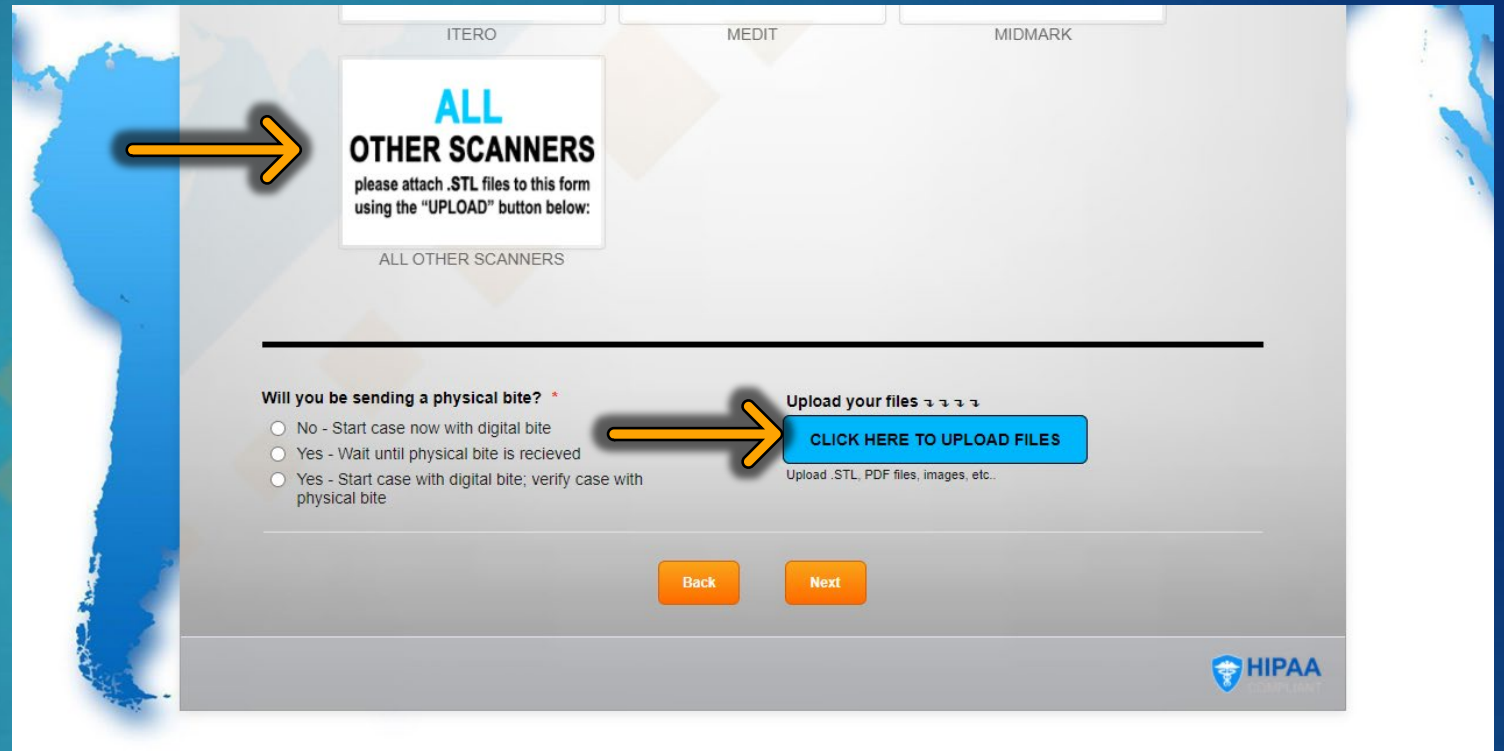
Step 4: Patient Records/ Case Submission

- The next page indicates by which method you will be sending patient records to Diamond. We accept PVS impressions, stone models, and digital scans from the platforms listed.

CASE I.D.	PT. RECORDS	SELECT DEVICE	SUBMIT FORM	POLICIES
CASE SUBMISSION PLEASE SELECT HOW YOU WILL BE SENDING RECORDS FOR THIS PATIENT				
PHYSICAL AND/OR DIGITAL RECORDS *				
 Physical Bite Registration	 PVS Impressions	 Stone/Resin Models		
 3SHAPE	 CARESTREAM	 CEREC		
 ITERO	 MEDIT	 MIDMARK		
ALL OTHER SCANNERS please attach .STL files to this form using the "UPLOAD" button below:				

Step 4: Patient Records/ Case Submission

- If you are digital, but do not have one of the listed scanners, you can upload your .STL files by clicking on the “all other scanners” and the “Upload” files button.
- Please select the proper option depending on how your records are being sent to Diamond.



The screenshot shows a web form for patient record submission. At the top, there are three tabs: ITERO, MEDIT, and MIDMARK. Below the tabs, a box labeled "ALL OTHER SCANNERS" contains the text "please attach .STL files to this form using the 'UPLOAD' button below:". An orange arrow points from the left margin to this box. Below this, a section titled "Will you be sending a physical bite? *" contains three radio button options: "No - Start case now with digital bite", "Yes - Wait until physical bite is recieved", and "Yes - Start case with digital bite; verify case with physical bite". An orange arrow points from the "Yes - Start case with digital bite; verify case with physical bite" option to a blue button labeled "CLICK HERE TO UPLOAD FILES". Above this button is the text "Upload your files" and below it is "Upload .STL, PDF files, images, etc..". At the bottom of the form are two orange buttons: "Back" and "Next". In the bottom right corner, there is a "HIPAA" logo.

Step 5: Select a Device

- On this page you will select your device(s), the base material(s), occlusal specifications and any patient-specific changes.
- You may also select additional modifications to add to the device such as vertical titration, hooks for elastics, etc...
- All Olmos series TMD orthotics are found in the OD and ON section.
- DDSO, and Shirazi Hybrid can be found under the Diamond Digital Tab.

CASE I.D.

PT. RECORDS

SELECT DEVICE

SUBMIT FORM

POLICIES

Please Select the device(s) you would like to order:

OD - Day-time Orthotics

ON - Night-time Orthotics

Diamond Digital (CAD/CAM) Devices

Nightguards - Mouthguards - Essix Trays


ORTHO APPLIANCES

Somnodent ♦ TAP Devices ♦ SnoreHook

Click here for additional retention

Back

Next



Step 5. Select a Device Continued

- A. Click on the desired style of appliance you would like to order **(REQUIRED)**
- B. Select the base material **(REQUIRED)**
- C. If you would like additional titration, here is where you can request additional advancement.

For Example: The DDSO comes standard with 20 & 21mm bands. If you would like 17mm, 18mm, and 19mm bands, you would select those options in the circled area to the right.

Diamond Digital (CAD/CAM) Devices

Please select a device:

DDS0

Shirazi Hybrid

Please select base material:

☐ NYLON ☐ BIOMED

Additional Options

☐ Wrap distal of last molars

☐ Keep last molars uncovered

☐ Create holes for cusps (minimum vertical)

☐ Other

Additional Titration (if needed):

	17	18	19	20	21	Quantity
White (Rigid)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Blue (Medium)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>
Orange (Soft)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>

Changes to Articulation

☐ As Needed (see Decision)

☐ Increase for clearance

☐ Decrease as much as possible

☐ Call if change is required

Specific changes to Articulation

mm

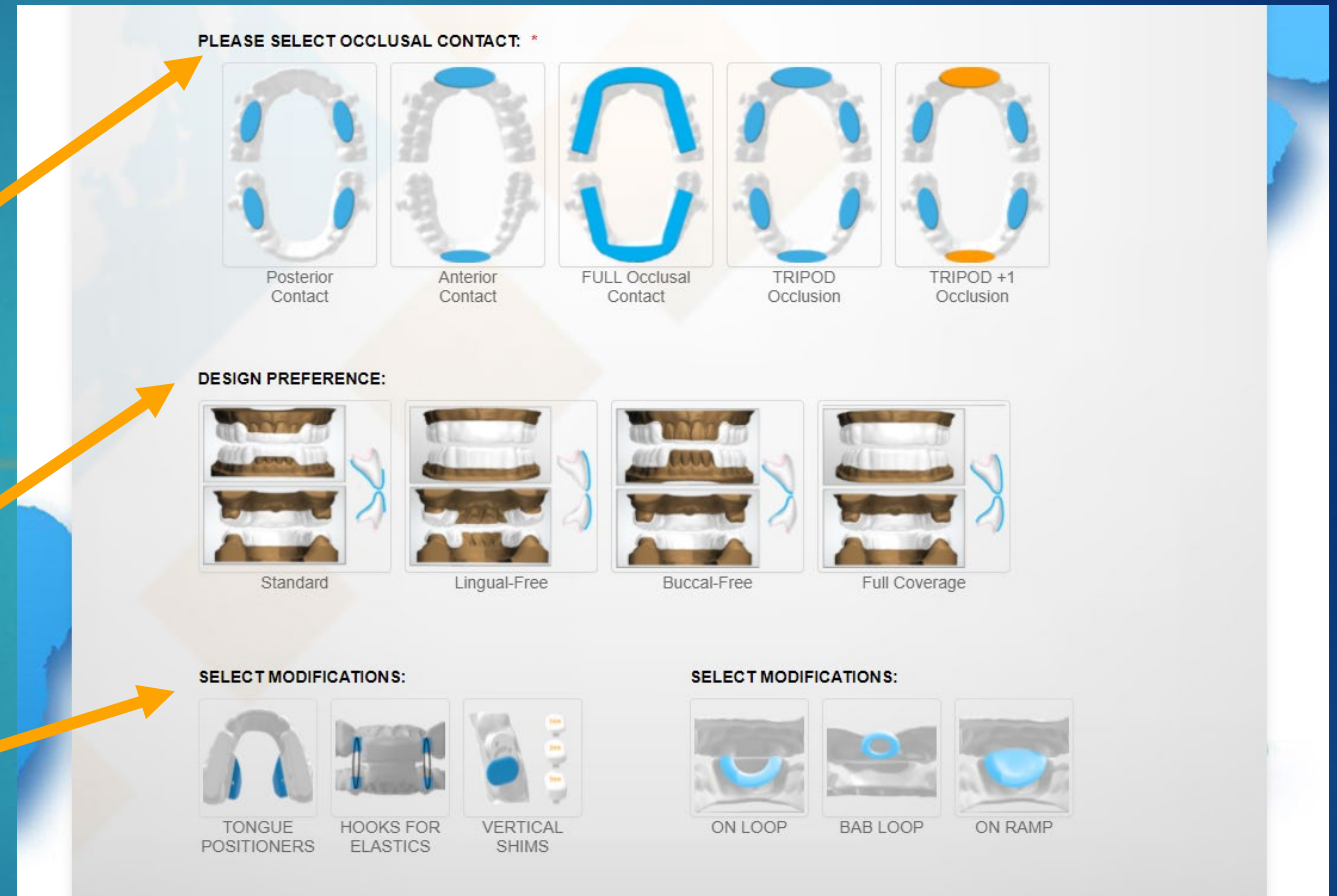
PLEASE SELECT OCCLUSAL CONTACT:

Step 5. Select a Device Continued

D. For devices with optional occlusal contacts, it is **REQUIRED** that you select which contact for each device.

E. Design preference is not required. We suggest standard design, but if you have a preference, you can select that option here. The images show the different design-types.

F. Add attachments or select modifications for the device.



Step 6. Case Submission/ Policies

- The final step is to sign the prescription form, verifying all information provided is correct. Please remember that these are prescription medical devices, and this form is the only communication between your office and our technicians. If you have any questions, please feel free to call us at 619.724.6400 and a Diamond team member will happily assist you.

PLEASE NOTE: All cases will be manufactured according to Diamond's production calendar. (available for download on our website)

The screenshot displays the 'Step 6. Case Submission/ Policies' form. At the top, there are five tabs: 'CASE I.D.', 'PT. RECORDS', 'SELECT DEVICE', 'SUBMIT FORM' (highlighted in orange), and 'POLICIES'. The main content area is divided into two columns. The left column features a 'Doctor Signature' section with a large red rectangular box for the signature. Below this box is a red error message: 'This field is required.' with a small 'Clear' link. The right column contains a question: 'Would you like to rush this case?' with a 'Yes' checkbox. Below this, there is an 'Additional Comments' section with a note: '**Note** Writing device selection in this area will delay your case! This area is not for device selection.' and a text input field. At the bottom of the form, there are two large blue buttons: 'SUBMIT' and 'Print Rx. Form'. At the very bottom, there are two orange buttons: 'Back' and 'Next'.

Step 6. Case Submission/ Policies

Please Note: Manufacturing begins when Diamond receives **ALL** items required for production; **NOT** the date the case is sent to the lab.

- If you would like to request a rush, please select the proper selections according to the devices you are ordering, and the date you wish to receive the case back in your office.
- To submit your case, select the 'SUBMIT' button on the bottom of the page. If everything is filled in correctly, you will be redirected to a submission confirmation page that will verify Diamond has received your form.

Note: Rush cases are not guaranteed unless Diamond is contacted for approval prior to submission.

The screenshot shows the 'Case Submission' form with several tabs at the top: CASE I.D., PT. RECORDS, SELECT DEVICE, SUBMIT FORM (highlighted in orange), and POLICIES. The form includes a 'Due Date Requested' field with a blue arrow pointing to it. Below this is a 'PLEASE NOTE' section. A 'Doctor Signature' field is highlighted in red with a 'Clear' button and a red error message 'This field is required.' Below the signature field is a 'RUSH case request:' section with two options: 'BIOMED - PMT - ACRYLIC' (selected) and 'Standard', and 'NYLON DEVICES' (selected) and 'Expedited'. The additional rush charge for the selected options is 150 USD. A large red 'ATTENTION: RUSH CASE SLECETED' message is displayed. At the bottom, there is an 'Additional Comments' field and a 'SUBMIT' button (highlighted in orange) and a 'Print Rx. Form' button. An orange arrow points from the text 'select the proper selections according to the devices you are ordering' to the 'BIOMED - PMT - ACRYLIC' and 'NYLON DEVICES' options. Another orange arrow points from the text 'the date you wish to receive the case back in your office.' to the 'Due Date Requested' field.

CASE I.D. PT. RECORDS SELECT DEVICE **SUBMIT FORM** POLICIES

Due Date Requested *

PLEASE NOTE: All cases will be manufactured according to the production calendar (available for download on our website). Turnaround times can be viewed on page 5 of this form. Manufacturing begins when Diamond receives ALL items required for production; NOT the date the case is sent to the lab.

Doctor Signature *

This field is required.

RUSH case request:

BIOMED - PMT - ACRYLIC ☒ Standard

The additional rush charge is 75 USD

RUSH case request:

NYLON DEVICES ☒ Expedited

The additional rush charge is 150 USD

ATTENTION: RUSH CASE SLECETED

Additional Comments **Note** Writing device selection in this area will delay your case! This area is not for device selection.

SUBMIT

Print Rx. Form

Step 6. Case Submission/ Policies

- Turnaround times and Diamond Policies can be viewed on page 5 of this form.

REMEMBER! It is important that your case is registered in our data base. You should receive a confirmation email that your case has been received within 24 hours. If not, then the form has **NOT** been submitted correctly and will NOT be acknowledged by our system. **Do not** copy the Rx form then email it or send it with a physical case unless your form has been **submitted successfully via our digital order form**. Should you have any questions, please don't hesitate to contact us. We are here to help.

CASE I.D.

PT. RECORDS

SELECT DEVICE

SUBMIT FORM

POLICIES

Diamond Orthotic TMD Order ...

1 / 1

- 50% +

1

Diamond Policies

IN-LAB PRODUCTION

Manufactured in the United States

TMD Orthotic	
Single Appliances (SD, CND, CNP, High Guard)	3-7 days
Two Appliances (SD + CND, CNP)	10 days
Standard Guard (HVS)	3 days
Expanded Full (HVS)	4 days

Pressor (Hydra) Devices

All Night Devices	10 days
Standard Guard (HVS)	4 days
Expanded Guard (HVS)	4 days
One Night (HVS)	10 days

Sleep Devices

Standard	10 days
TAP (Sleep/TAP)	10 days

Mouthguards & Esics

Turbine	3-5 days
Standard Performance (SDP) Sportguard	7 days

SELLING INFORMATION

As Devices - All rights reserved. We make available to the client printout upon completing manufacturing.

As Devices - At the end of each month, you will receive a statement of manufacturing.

TERMS OF PAYMENT

All accounts are payable within 30 days of the invoice date. Accounts due more than 30 days past due will be subject to 5% Cash on Delivery. A late charge of 1.5% of the original balance will be charged per day after 30 days past due.

Send a Case

DRGTEL Scan/Upload

DRGTEL

1. Click on the "Send Case" button.
2. Click on the "Send Case" button.
3. Select "New Case" and type in the "Send Case" button.

CaseNotes

1. You can click on the "Add" button by clicking "CaseNotes" button.
2. Click on the "Add" button.
3. Click on the "Add" button.
4. Click on the "Add" button.
5. Click on the "Add" button.

DRGTEL

1. Select your patient's device, select TMD or HVS/SDP and type in Diamond.
2. Click on the "Add" button.
3. Click on the "Add" button.

DRGTEL

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3. Click on the "Add" button.

DRGTEL

1. Select your patient's device, select TMD or HVS/SDP and type in Diamond.
2. Click on the "Add" button.
3. Click on the "Add" button.

CASE CANCELLATION

We understand your efforts may be subject to non-payment by patient and/or other individuals (circumstances under which the patient cases are cancelled). Diamond Orthotic will be subject to our policy. The patient's work is progress cannot be cancelled for full price. For the cases in production the charge will appear according to the amount of work completed at the time of cancellation. The case of non-payment may not be applied.

WARRANTY

Diamond Orthotic Laboratory warrants all devices supplied for five (5) years defect in materials and workmanship during the warranty period defined in the table to the right. All devices are guaranteed to be in the provided representation and construction to the specifications in the production files.

To be entitled to this warranty, the device must have been used and stored in accordance with the instructions for use. This warranty does not cover damage caused by normal wear and use, including any change in color that may occur over time. Diamond Orthotic will warrant the suitability of any device