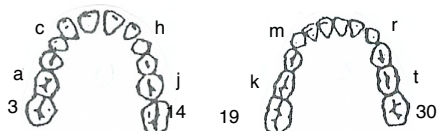


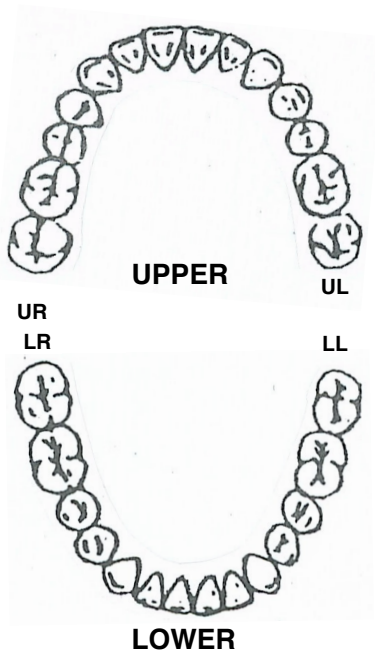
DOCTOR: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____

PATIENT'S NAME: _____ DATE OF RX: _____ DUE DATE: _____

Case turnaround time is based on the date we receive the case, as well as ALL information being correct and complete on the RX. If the RX is incomplete we CANNOT guarantee a delivery date until all information are in the Lab.



R	3	2	1	1	2	3	L
	3	2	1	1	2	3	



Removable Appliance:

- | | |
|---|---|
| <input type="checkbox"/> Hawley | <input type="checkbox"/> Invisible Retainer |
| <input type="checkbox"/> Wraparound | <input type="checkbox"/> Essix |
| <input type="checkbox"/> San Antonio | |
| <input type="checkbox"/> Spring Ret. 3-3 | |
| <input type="checkbox"/> Modified Spring Ret. | |
| <input type="checkbox"/> Reset teeth circle | |

Clasps:

- | | |
|--------------------------------------|--------------------------------------|
| <input type="checkbox"/> Ball | <input type="checkbox"/> Finger |
| <input type="checkbox"/> C | <input type="checkbox"/> S |
| <input type="checkbox"/> Sold C | <input type="checkbox"/> Helix |
| <input type="checkbox"/> Adams | <input type="checkbox"/> Mushroom |
| <input type="checkbox"/> Arrow | <input type="checkbox"/> Distalizing |
| <input type="checkbox"/> Other _____ | |

Springs:

Acrylic Opt:

- ☐ Stnd. Pink
- ☐ Stnd. Clear
- ☐ Biostar
- ☐ Decal # _____
- ☐ Pattern _____
- ☐ Transparent
- ☐ Luminary
- ☐ Royals
- ☐ Opaques
- ☐ Pearls
- ☐ Sparkle
- ☐ Metallic

Fixed Appliance:

- ☐ Lingual Arch
- ☐ Nance
- ☐ Fixed Bite Plate
- ☐ Quad-Helix
- ☐ Bi-Helix
- ☐ W Arch
- ☐ Thumb/Tongue Crib
- ☐ Transpalatal Arch
- ☐ R P E
- ☐ Haas

Bite Plate:

- | | |
|--|-------------------------------|
| <input type="checkbox"/> Ant | <input type="checkbox"/> Post |
| <input type="checkbox"/> Pontics # _____ | |

Splint:

- ☐ Hard (TMJ)
- ☐ Flat (Biostar)
- ☐ Gelb
- ☐ Soft Mouthguard
- ☐ Athletic Mouthguard
- ☐ Talon
- ☐ Durasoft

Bands:

- ☐ Space Maint
- ☐ Fixed Pado Bridge
- ☐ Distal Shoe
- ☐ Arch Maint

Functional Appliance:

- | | |
|-------------------------------------|---------------------------------------|
| <input type="checkbox"/> Schwartz | <input type="checkbox"/> Distal Jet |
| <input type="checkbox"/> Saggital | <input type="checkbox"/> Pendulum |
| <input type="checkbox"/> Bionator | <input type="checkbox"/> Pendex |
| <input type="checkbox"/> Twin Block | <input type="checkbox"/> T-Rex |
| <input type="checkbox"/> Herbst | <input type="checkbox"/> Hilger's PhD |

DIGITAL OPTION:

- ☐ Digital Study Model
- ☐ Digital Print
- ☐ Workable Model
- ☐ Horseshoe arch
- ☐ Digital Analysis

NOTES: _____
