

Date: _____ Phone #: _____ Doctor: _____

Office Name: _____ Office Address: _____

 Patient Name: _____ Male Female Age: _____

Return Date: _____ Return Time: _____ AM _____ PM (Rush dates not guaranteed without prior approval; charges may apply.)

Arch: Maxillary Mandibular Duplicate Models

Orthodontics
Nightguard

-
- Hard Resin
-
- Thermoflex
-
- Dual Laminate (Hard/Soft)
-
-
- Duraflex (Hard & Soft Acrylic)
-
- Hard Acrylic
-
-
- Panthera NG

Additional Items

-
- Anterior Guidance
-
- Cuspid Rise
-
-
- Lingual Strengthener
-
- Posterior Bite Pads
-
- Clasps:
-
- Ball
-
- Hang
-
- Adams

Removable Appliances

-
- Kois Deprogrammer
-
- Crossbite
-
- Twin Block
-
-
- Sports Guard
-
- Sagittal
-
- Schwartz
-
- Retainer:
-
- ClearBow
-
- Hawley
-
- Wraparound
-
- Essix
-
-
- Other _____

Fixed Appliances

-
- Band and Loop
-
- LLHA
-
- Nance
-
- Haas:
-
- Bonded
-
- Banded
-
- Tubes & Hooks
-
- No Tubes
-
- RME:
-
- Bonded (Hyrax)
-
- Banded (Hyrax)
-
-
- Tubes & Hooks
-
- No Tubes
-
- Bonded Retainers:
-
- 3-3
-
- 4-4
-
- With Transfer Tray
-
- Kross
-
-
- ALF:
-
- Max
-
- Mand
-
- Other _____

Sleep Appliances

-
- Dorsal
-
- Panthera X3
-
- Herbst Sleep
-
-
- Dorsal Flex
-
- Panthera D-SAD
-
- _____

 Extended Appliance Insurance Plan
(Call for details and pricing)

Signature _____

License _____

Submission of this Rx constitutes agreement with limited warranty terms and conditions.

Dentures
Type of denture:

-
- Complete Denture
-
- Immediate Denture
-
- Acrylic Partial
-
-
- Valplast® Partial
-
- Chrome Cast Partial

ADSC Mould: _____ SHADE: _____

Procedure:

-
- Bite Block
-
- Custom Tray
-
- Hard Acrylic Reline
-
-
- Try-in
-
- Perforated
-
- Soft Reline
-
-
- Cast Partial
-
- Non-Perforated
-
- Rebase
-
-
- Teeth in Wax
-
- 3D Printed
-
- Repair
-
-
- Handmade
-
-
- Acrylic Finish

Notes:

