

Practice: _____	Patient: _____
Address: _____	Date Sent: _____
_____	Due Date: _____

Removable Appliance Rx

Retainers		
Hawley Retainer.....	U	L
3x3 2x2		
Simplified Wraparound.....	U	L
Wraparound Soldered to Clasps.....	U	L
Invisible Retainer.....	U	L
Plus Ace C+		

Claps & Extras		
Ball Clasps.....	U	L
Adams Clasps.....	U	L
"C" Clasps.....	U	L
Occlusal Rests....	U	L
Soldered "C" to bicuspid	U	<input type="checkbox"/> L
Other: _____	U	L
Flat Bow.....	U	L
Finger Spring	U	L
Stabilizing Wires: Upper	_____	
Lower	_____	

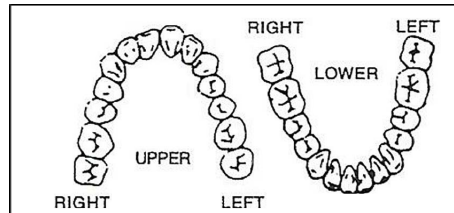
Aligners		
Standard 3x3 Spring.....	U	L
Standard 3x3 Spring w/ Wire Extensions.....	U	L
Modified Spring Aligner.....	U	L
Super Spring.....	U	L
Super Spring w/ Helix Coils	U	L
Super Spring w/ Mushroom	U	L

Reset Teeth:		
Do Not Reset.....		
Partial Reset.....		
Ideal Reset.....		
R	3 2 1 1 2 3	L
	3 2 1 1 2 3	

Add Pontics:
Shade: _____
Replace tooth: _____ _____

Acrylic Trim & Design:	-Horseshoe Trim	-Posterior Bite Plane.....
-Acrylic in Edentulous Area	-Acrylic on Labial Bow of Upper Lower	-Anterior Bite Plane.....
Acrylic Color: _____		-Scalloped Anterior Acrylic
		Place Decal: _____

Special Instructions: _____ _____



3D Printing:	
Segmented Model	
Upper	Lower
Working model	
Upper	Lower

Send More:
Rx Pads.....
Mailing Labels...
Shipping Boxes..

Doctors Signature: _____	Date: _____
Doctors License No. _____	

White - Original Yellow - Lab Copy Pink- Doctors Copy