

PLEASE PRINT

Account # C0 _____ **PO #** _____

BILLING PRACTICE TYPE: _____
(i.e., ortho, GP, pedo, prosth, oral surgeon, commer. lab)

DOCTOR: _____

ADDRESS: _____
(Specify if ship to address is different)

ADDRESSES CITY: _____ STATE: _____ ZIP: _____

PHONE: (_____) _____
FAX: (_____) _____
EMAIL: _____

PATIENT: _____ AGE: _____

PLEASE PRINT

DATE SHIPPED: _____

DATE DUE: _____

1 day before appointment

LAB USE ONLY Incoming # cases _____

Customer Used: GLO Acct 2 Day On Call

Portal Upload - No Frt (00) Cust Acct - No Frt (00)

Disinfected 0 1 2 3 4 5 6 7 8 9

Rcvd: _____

B# _____ Via: _____

Shipment Date _____ Planned Shipment Date _____

(QC): _____ (LPD): _____

Estimated Delivery Date _____ Promised Delivery Date _____

ND _____ (Rec): _____

NO BITE / MDL - B / C Source: _____

Campaign: _____

Align ID# _____ Dig ID# _____

Please Provide: Boxes Labels

Rx: _____ Qty: _____
(specify appliance type)

**IMPORTANT! Always retain models and bite until appliance is seated.
Damage to models may occur during fabrication, please mark Rx if duplication (additional fee) of model(s) is required.**

Crossbow (X-Bow)

Fabrication Requirements: Upper and Lower models. Bands on upper 6's (with occlusal headgear tubes) and upper 4's (if bands are not seated on upper 4's - we will provide occlusal rests), bands on lower 6's.

- Standard Crossbow-Upper with RPE and Lower Frame
- Upper Options:** No RPE VECS Expander Palatal Bar
- Lower Options:** No Lower Lower Only

- Please Provide: Additional Charge**
- Adapt FRD Hardware (Incl: Universal Springs, Push Rods and "L" Pins)
 - Gurin Locks (2)
 - Add Wrench
 - E-Z Module Springs

Herbst Fabrication Options

Note: To provide the most technically accurate Acrylic Splint Herbst appliance, we ask that you provide a construction bite in which the mandible has been advanced 3-4mm and has a 2-3mm vertical opening in the incisor region. For the all metal Herbst the advancement remains the same, the vertical opening is eliminated, and you may either mark models in construction position or provide a bite.

Clasping For Retention

- Ball Clasps Adams Clasps No Clasping Other _____

Acrylic Splint Design:

- Upper- (All choices include posterior coverage)**
- Standard Removable - Full Cuspid Coverage
 - Standard Bonded - Lingual Extension on Cuspids
 - Optional Removable - Includes Incisal Cap

- Lower- (All choices include posterior coverage)**
- Standard Removable - Includes Incisal Cap
 - Standard Bonded - Lingual Extensions on Cuspid
 - Option - Full Cuspid Coverage

Banded or Crowned Design:

If not noted, the lab will carve brackets and remove lingual retainers when present.

- Upper-Please Provide:**
- Bands Rolo Bands Heavy Duty Bands Crowns
 - Keep Brackets Grind Brackets Carve Brackets Off Models
- Lower-Please Provide:**
- Bands Rolo Bands Heavy Duty Bands Crowns
 - Keep Brackets Grind Brackets Carve Brackets Off Models

Cantilever Design:

- Mayes Cantilever
- Dischinger Design

Crowns are Available in Standard Sizes Only:

- If tooth requires an in-between size do you prefer-
- A Loose Fit A Snug Fit A Phone Call

Herbst Hardware Options

- Standard - Hex Head Screw Please add adhesive to pivots
- Slot Head Hanks Telescoping Flip-Lock
- Mini Scope w/Apple Core Screws Other _____
- Add Crimpable Shims (4 PK) 1mm 2mm

Bonded Appliances (not as part of Herbst Appliance)

- Bonded Palatal Expander
- Bonded Palatal Expander with Facial Mask Hooks
- Bonded Palatal Splint with Facial Mask Hooks

Special Instructions: _____

Visit our online appliance catalog at MyGreatLakesLab.com for a wide variety of color and pattern options!

The standard color is "Clear" unless otherwise specified. Select a cold cure color option ONLY!

- Decal Rainbow Tropical Tones Contemporary
- Neon Glow Galaxy Glitter MagiCryl@2

Please specify color and/or decal # choice: _____

Please Provide

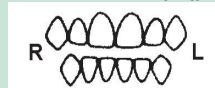
- Adaptable Class III Mask**
- Standard Size 9-1/2" Pedo Size 7-1/2"
 - Retention Elastics (pkg/50)
 - Herbst Advancement Kit 265-107 (Shims available individually by size)
 - EZ Key 140-020 (pkg/10)
 - All Metal Keys 140-001 (pkg/25)

Auxiliaries

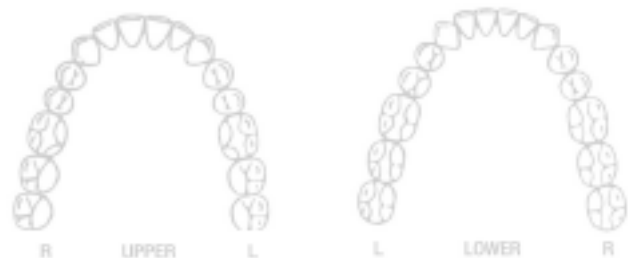
- Palatal bar
- Upper molar rests
- Upper bicuspid rests
- Lower lingual wire
- Lower molar rests
- Lower bicuspid rests
- .040 Headgear Tubes
- .045 Headgear Tubes
- .051 Headgear Tubes
- Hook on Tube
- .018 Buccal tubes upper lower
- .022 Buccal tubes upper lower w/hook
- Double Buccal tubes ^{.022 x .028} ^{.045 HGT} w/hook
- Add Rapid Palatal Expander
- Lower Expansion Screw
- Facial Mask Hooks
- Debonding Screws (2)
- Debonding Loops
- Vent holes in crowns (occlusal)
- Other, please specify _____

Midlines: Please indicate patients current midline position. If no indication, we will follow bite registration.

- Maintain Align Other: _____



Define Discrepancy of Dental Midlines:
Upper to lower midline deviates to Pt. R or L by ____mm



License #: _____

Dr. Signature: _____

Master Rx on File # _____