Dentaltech Lab

Orthodontics Docket

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Department of Health Reg. No. MD. 14.138. S.I. No. 252 of 1994

Practice _____ **Dentist** _____ **Patient name** _____

Address _____ **Tel** _____ **Age** _____ **Male** ☐ **Female** ☐

Date required _____

(Delivery be arranged at least one day prior to the patient's appointment.)

Removable & Functional

	U	L
Upper appliance (URA)	☐	☐
Lower appliance (LRA)	☐	☐
Hawley w/ 3D screw	☐	☐
Schwarz	☐	☐
Gelb	■	☐

Thermoplastic & Protective

	U	L
Clear Aligner	☐	☐
Essix	☐	☐
Zendura	☐	☐
Dual laminate	☐	☐
Bleaching tray	☐	☐
Soft nightguard	☐	☐
Cold cured hard nightguard	☐	☐
Heat cured hard nightguard	☐	☐
Gumshield	☐	☐
Anti-snoring silensor	☐	☐

Diagnostic & Working Models

	U	L
Casted working model	☐	☐
Printed working model	☐	☐
Record Models	☐	☐

Fixed & Functional

	U	L
Clark Twin Block	☐	☐
McNamara Disjunctor	☐	☐
A.L.F	☐	☐
Bionator / Activator	☐	☐
Frankel	☐	☐
Harvold	☐	☐
Medium Opening Activator	☐	☐
Rick-A-Nator	☐	■
Rickett	☐	■
Haas	☐	☐
Hyrax RME	☐	■
Quad Helix	☐	■
Trans Palatal Arch	☐	■
Trans Palatal Arch w/ Nance	☐	■
Band & Loop	☐	☐
Lingual Arch	■	☐
Lip Bumper	☐	☐
Nance	☐	■
Williams	■	☐
Pedi Partial	☐	☐
Co Axial Wire	☐	☐
Rigid Wire TMA	☐	☐
Wraparound Circunf.	☐	☐
Kois Deprogrammer	☐	■
Thumb Sucking Inhibator	☐	■
Tongue Thruster	☐	☐

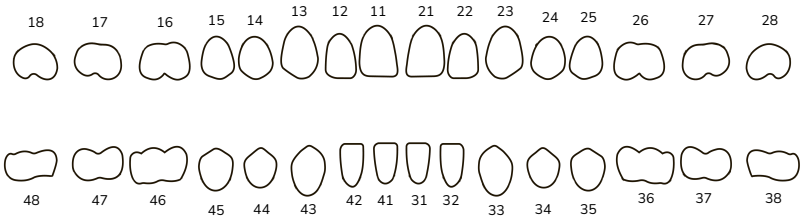
Appliance Servicing

	U	L
Repair	☐	☐
Adjustment	☐	☐
Rebuild	☐	☐

Enclosed

	U	L
Impression	☐	☐
Bite Models	☐	☐
Scan	☐	☐
Photos	☐	☐
Components	☐	☐

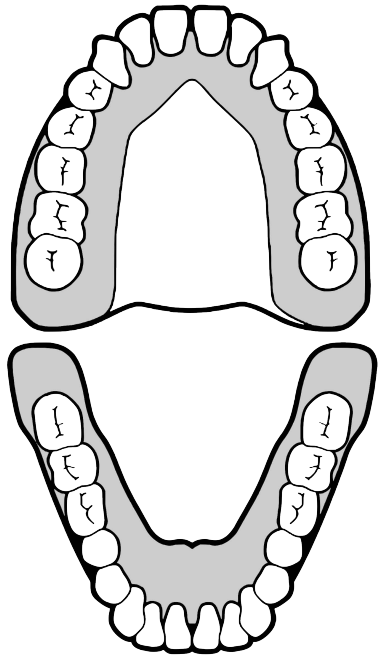
Design & Instructions



(If applicable.)

Shade _____

Mould _____



Case instructions:

(If no instructions are provided, we will choose what we believe to be the most suitable design.)