

Dr. _____

Address _____

_____ Zip _____

Patient _____

Date Shipped to PAR _____

Date Required _____

SPLINTS*: Upper Lower *must include wax bite

- Flat Occlusal Plane
- Occlusal Plane with Cuspid Rise
- Anterior Repositioning
- Gelb Splint (Mora)
- Starnes Orthotic (Tripod support allows cuspids and bicuspid to passively erupt)

TWIN BLOCK

- Standard Design
- To Open Bite
- To Close Bite
- Other _____

BIONATOR

- To Open Bite
- To Close Bite
- Neutral

ORTHOPEDIC CORRECTOR

- To Open Bite
- To Close Bite
- Other _____

SAGITTAL

- Upper
- Lower
- Class III

SCHWARZ

- Upper Fan Type
- With Occlusal Coverage
- Lower

JACKSON

- Upper
- Lower

FRANKEL

- FR I FR II FR III FR IV
- Other _____

SPLINT/FUNCTIONAL Rx

HERBST®*

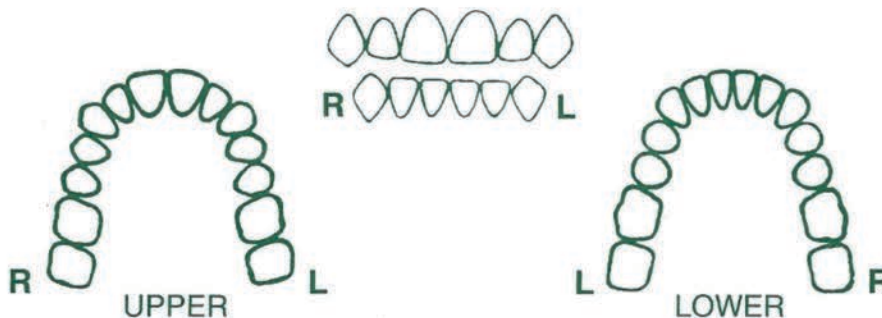
- PAR's Standard Herbst®
(includes Lingual Arch, TPA, Hex Kit)
- PAR's Cantilever Design
(includes Lingual Arch, TPA, Rests & Hex Kit)
 - Dentaurem Herbst® (hex screws)
 - Mini-Scope
- Rollo Bands
- Acrylic Bonded
- Crowns
- Combination

* Herbst is a registered trademark of Dentaurem, Inc.

PLEASE WRITE SPECIAL INSTRUCTIONS:

PLEASE DIAGRAM SPECIAL INSTRUCTIONS:

INDICATE DENTAL MIDLINES



OPTIONS AVAILABLE:

ACRYLIC

- Clear Pink Tint
- Other Color # _____

EXPANSION SCREWS

- Midline Sagittal
- Not Required

PLEASE SEND ADDITIONAL SUPPLIES:

- Boxes Rx Forms Other _____

Lab use only
BIO
OC
SAG
SCH
FR
HER
OTHER
SC