Rideau Orthodonti Mfg. Ltd

LABORATORY PRESCRIPTION

Orthodontic	For shipping instructions, please inquire by calling 1-800-267-7982		
Mfg. Ltd.	PLEASE PRINT: Account # Doctor's Name		
69 Beckwith St. North	Licence Email		
Smiths Falls, Ontario	AddressCityProvince/StatePostal/Zip Code Any changes in your status (eg: new address, phone number or new associate) please send or fax to our office so we may ensure our records are accurate		
K7A 2B6 Local: 613-283-6841	Patient's Name		
Toll Free: 800-267-7982	Date Sent Date Required		
Fax: 613-283-5386 - www.orthodontic.ca	Available On-Line @ www.orthodontic.ca		
Email: orthodontic@orthodontic.ca	Supply Requests: Boxes Bubble Wrap Shipping Labels Retainer Containers		CASE EVALUATION
EMMETT GRIFFITHS President	☐ Daily Report Booklets ☐ Activation Ke	sys/Wrench Rx Pads Current Price List	O Please Call O New Case Evaluation O Ongoing Case Evaluation
EXPANSION	Instructions:		SPLINTS
☐ <u>SCHWARZ</u> OMx OMd ☐ <u>SAGITTAL</u> OMx OMd			O Md Gelb O Md Stack Pivot
O 2-screw O 3-screw	\sim		O Tanner/MAGO O Mx O Md O Talon/Pro-Flex O Mx O Md
Fixed Lateral Expansion Appliance		LAB USE	O Mx FARRAR O with ramp O without O Biocryl O Mx O Md
□ RPE ○ Plain ○ Straightwire Bands	\mathcal{R}	DowTM	O Other
O Snap Lock O Super Screw O Fan Screw ☐ ALF (must design on Rx/cast)		NEW Clear Bow TM O Mx O Md Around	SPECIALTY ANTI-SNORE
O Mx O Md		O Wron-Around	O Modified Twin Block O w/hooks O Silent Night
A-P CORRECTION		O Map 122	O Modified Herbst
☐ TWIN BLOCK O Open O Close O Hold			☐ MOUTHGUARD ○ with Strap ○ Pro-Form
O 3-screw O 2-screw O Hooks for forced eruption			O Power Guard to construction bite BLEACHING TRAYS
O Rick-a-nator w/straightwire bands ☐ ORTHOPEDIC CORRECTOR	right left		O Mx O Md
□ <u>BIONATOR</u>	(+) $(+)$		STRAIGHTWIRE & TRIPODING INDIRECT BRACKETING
O Midline screw O No screw O I to open	\mathscr{L}		O Current Panorex Included O Brackets supplied by Dr.
O II to close O III to hold A-P	Θ Θ		Setup O Mx O Md O Self Ligating O Translucent
O IV to hold Mx/Md for 6T6 to erupt O 13 to hold Mx/Md			O Stainless Steel O Gold O Supply wire sequence O Yes O No
Md free with lower cap O Adult TMJD for sleep			☐ <u>INDIRECT TRIPODING</u>
□ FRANKEL O I O II O III □ MARA	Daniel		O Construction Bite Provided O Standard O Anterior Ramps Only
O Full Crowns O Half Crowns O Mx RPE O Mx TPA			RETENTION & ALIGNERS
□ HERBST			☐ <u>RETAINER</u> ○ Mx ○ Md ○ Clear Bow [™] ○ Wrap-around ○ Adams
O Bonded O Banded O Full Crowns O Half Crowns	Appliance Colour		O Soldered Flat Bow O Round Anterior Labial Bow
CLASS III BEAN w/FACEMASK HOOKS O Plain O Straightwire Bands	see colour chart		O Wrap Around w/Flat Labial Bow O Reverse Anterior bow
O Place class III hooks O Mx RPE O Snap Lock O Fan Screw			O Round Bow w/flat automatic bow (acrylic relieved)
O Supply Facemask S/M/L O Supply Elastics 4/8/16 oz.			O Tru-Tain O Fixed lingual wire w/transfer tray
FIXED/REMOVABLE			O 3 x 3 O 4 x 4 O round O flat
☐ FIXED MOLAR DISTAL JET			☐ <u>RIDEAU SPRING CLIP ALIGNERS</u> ○ Mx ○ Md
O Straightwire Bands O Plain Bands O RPE Snap Lock O Fan Screw			☐ <u>POSITIONER</u> ☐ Canadian Simplifier
O Bilateral O Unilateral O Supply Activation Key			O Vanguard O Standard Setup O Carve Brackets
☐ <u>CETLIN TRANS-PALATAL ARCH</u> ☐ Straightwire Bands ☐ Plain Bands			O Air Holes O Incisor Socket Liners
O 2mm off tissue O 6mm off tissue O Md Lip Bumper			LAB SERVICES MOUNTING
☐ SOLDERED LINGUAL ARCH			O Witzig/Denar O SAM II O Acculiner O Fixator
O Straightwire Bands O Plain Bands ☐ 3D WILSON O Mx O Md			O Galetti O Other
O Straightwire Bands O Plain Bands O Mx Bimetric Distalizing Arch			☐ MODEL DUPLICATION ○ Mx ○ Md ○ Working ○ Study Model
O Quad Helix O Transpalatal Arch TPA	Signature X		☐ DIAGNOSTIC SETUP O Mx O Md
O Lingual Arch O Multi-Action Palatal	Insurance: ☐ 6 Months (10% of appliance cost + \$20 Deductible) ☐ 12 Months (20% of appliance cost + \$30 Deductible)		☐ Mx SPACE SHORTAGE ANALYSIS☐ CEPHALOMETRIC TRACING
O Nance Holding Arch O Rick-a-nator O Flat Bite Plane	TERMS: BALANCE DUE 15TH OF THE FOLLOWING MONTH. 1.5% INTEREST PER		Include date of birth, date of record, weight, height, gender and race.
For Laboratory Use Only: Repair # Remake #			
□ Damaged Upon Arrival (Explain) Via: Track # Initial			
☐ No Bite ☐ CR Wax Bite ☐ C ☐ Doctor's Bands ☐ Plain ☐ S	onstruction Bite		T AB YOU
		,	LAB USE

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