

Orthodontics Rx

New Era Orthodontics Dental Laboratory

Patien	t Name(First)	(Last)	Date Sen	t		L □ Bio □ Bio
Doctor	r's Name		Due Date			
Addre	SS		Sex: M/H	Age		□ Twin □ Sag
City		St	ate	Zip		□ Sag □ Fan
Doctor	r's Signature		Dentist L	icense#		🗖 Tong
	a signing this authorization a tion costs in the event of suit			and agrees to pay all legal and		□ Sch □ Tra □ No:
INSTI	RUCTIONS					□ Snor
5 4 3 2 1	o A V V V II	- X	U 	L <u>Fixes Appliance</u> Band & Loop (uni-lateral) Lingual Arch (bi-lateral) Nance Rapid Maxillary Expande Bonded RME Transpalatel Arch (TPA) Bi-Helix Quad-Helix Lower Fixed Transverse A Habit Tongue Crib (Tong	er(ban Applia	nce (FTA
	UPPER ARCH	LOWER ARCH		□ Habit Thumb Crib (Thum □ Expansion "W"Appliance		king)
	Removabl Hawley Retainer (Please sp Hawley Retainer w/solder Hawley w/o clasp Hawley w/o closp Hawley w/color or design Wraparound	pecify clasp type) "c" clasp on 4's		 Dispansion of A Tippinate RPE-Rapid Palatal Expan Bonded RPE w/face mask Porter Appliance Bluegrass 	der	S

□ Bionato	r I (to	ope	en bite)			Clear	Bio
□ Bionato	r II (te	o clo	ose bite)			Custor	n E
Twin Blo	ock						
Twin Blo	ock w	/hav	vley wire				
□ Sagittal	2-wa	у					
Sagittal	l3-wa	у					
🗖 Fan Expa	ander					FOF	<u>R</u> L/
Tongue H	Iabit A	Acry	lic (Hawley Ha	abit) w/l	oops		
□ Schwar	tz						_
□ Transve	erse						
□ Nord							
□ Snoregua	ard (o	pen	anterior-comb	o)			
	U	т	Sulinte				
			Splints Dipod Applia	-			
			Hard Acrylic				
			Gelb or Mora	NO			
			Dual Combo S	Splint			
			D-Fisher	Sprint			
			Kois Deprogr	ammerv	w/wi	re	
			Kois Deprogr				
			Sved Splint				
			Soft Mouthg	uard			
			Bleaching Sp				
			Fluoride Tray				
led)-RME			Essix (clear sp	olint)			
			Tanner Splint-	-(cuspid	rise)		
			Anterior Repo	ositionin	ig Sp	olint	
			Sportguard (c	lear) (sp	ecify	ystrap)	
			Sportguard (c	olor) (B	i-, m	ulticolor)	
nce (FTA)			4x4				
ust)			5x5				
(ing)	Cassid	G . +la		data and	times	aa wall aa	tla a

Speciality Appliance

281-795-9347 13635 Clarks Fork Drive Houston, Texas 77086 neweraortholab.com _ -

U	L	Biocryle Retainer
	□ Clea	r Biocryle Retainer

Design Biocryle Retainer

AB USE ONLY

Misc.

- □ Overlapping Springs
- □ Molar Distalizing Spring
- Helices Springs
- **J** Finger Springs
- □ S-Spring
- □ Z-Springs
- □ Ball Clasp
- C-Clasp
- ☐ Adams Clasp
- □ Solder Clasp (Hooks)
- Arrow Clasp
- **J** Mushroom Springs
- Occlusal Rest
- Occlusal Coverage
- Solder Spring
- Bite Plane (anterior)
- **Bite Plane (posterior)**
- Strengthening Bar
- □ Teeth
- ☐ Ortho Repair
- Brackets

* Specify the appointment date and time, as well as the date needed, on the RX form.

- * Please allow adequate turnaround time. This means 3-5 days in lab, not counting pick-up and delivery. If you have a rush case, please call before 1 pm.
- * Please inspect your model for any voids and please make sure that bands are placed correctly.
- * Please send completed RX form including the doctor's signature and license number.
- * I'm available to answer any questions that you may have.
- * Invoices are sent out by the 1st of the month.
- * Payment due on the 15th of every month.
- * Check is the accepted method of payment.

□ Neon Glow Artist Design (Please specify color)

- □ Neon Glow Hawley Retainer (Please specify color)

- □ Wraparound w/color or design (please specify)
- □ San Antonio Wraparound w/support wire

- Distal Shoe
- □ □ Porter Appliance
- □ □ 3x3 Bonded (cuspid to cuspid)