



# EXPRESS DENTAL LABORATORY™

1350 N Interstate Dr. | Norman, OK 73072  
Phone 405.217.2282 | XDentalLab.com

# 2001

# ALIGNER

Doctor \_\_\_\_\_ Phone # \_\_\_\_\_

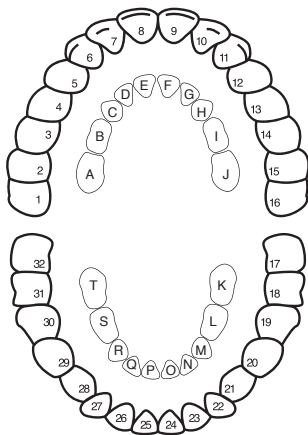
PLEASE PRINT CLEARLY

Office Name \_\_\_\_\_

Patient \_\_\_\_\_ Sex  M  F Age \_\_\_\_\_

Date \_\_\_\_\_ Due Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

### SPECIFY WHERE IPR IS EXCLUDED



### TREATMENT

- UPPER ESTHETIC TREATMENT
- LOWER ESTHETIC TREATMENT

### ALLOW IPR

- YES
- NO

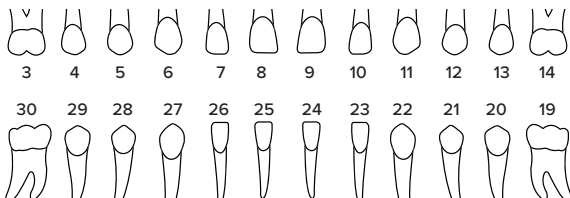
### ALLOW INCISOR EXTRACTIONS

- YES, TOOTH # \_\_\_\_\_
- NO

### ANKYLOSIS/IMPLANT

- YES, TOOTH # \_\_\_\_\_
- NO

### MARK WHERE ATTACHMENTS ARE EXCLUDED



- PANO PROVIDED
- PHOTOS PROVIDED

### MIDLINE

#### MAINTAIN

- YES, TOOTH # \_\_\_\_\_
- NO

#### MOVE

- UPPER  LEFT  RIGHT
- LOWER  LEFT  RIGHT

### ANTERIOR POSTERIOR RELATION

#### MAINTAIN

- RIGHT  LEFT

#### IMPROVE CANINE RELATIONSHIP ONLY

- RIGHT  LEFT

### CROWDING

#### UPPER

AS NEEDED  PRIMARILY

EXPANSION

IPR

#### LOWER

AS NEEDED  PRIMARILY

EXPANSION

IPR

### OVERJET & OVERBITE

OVERJET  OVERBITE

MAINTAIN

IMPROVE

### TOOTH SIZE DISCREPANCY

- IPR IN OPPOSITE ARCH
- LEAVE SPACES OPEN >
- DISTAL TO LATERALS
- DISTAL TO CANINES

### SPECIFIC INSTRUCTIONS

Dr. Signature \_\_\_\_\_ DDS License No \_\_\_\_\_