

ORTHO-TAIN ORDER

Dr. _____

Address 1 _____

Address 2 _____

City _____ State _____ Zip _____

Phone _____ Acct. No. _____

E-mail _____

Charge to My: Visa MasterCard Amex Sec. Code: _____

Keep Card CC # _____ Exp. ____/____

on File

(if applicable)

NITE-GUIDE® 5-7 Years Hinged Appliance \$125.00 EACH* ___ 1C ___ 1 ½ C ___ 2 C ___ 2 ½ C ___ 3 C ___ 3 ½ C ___ 4 C ___ 4 ½ C ___ 5 C ___ 5 ½ C ___ 6 C <td> SOFTEE® 7-12 Years Overbite/Overjet Hinged Appliance \$125.00 EACH* ___ 1CS ___ 1 ½ CS ___ 2 CS ___ 2 ½ CS ___ 3 CS ___ 3 ½ CS ___ 4 CS ___ 4 ½ CS ___ 5 CS ___ 5 ½ CS ___ 6 CS <td> OCCLUS-O-GUIDE® 8 Years & Above (‘H’ Used Last 2 Months for Resistant Overjets) \$125.00 EACH* ___ 1 G ___ 1 ½ G ___ 2 G ___ 2 ½ G ___ 3 G ___ 3 ½ G ___ 4 G ___ 4 ½ G ___ 5 G ___ 5 ½ G ___ 6 G ___ 6 ½ G ___ 7 G ___ 2 H ___ 2 ½ H ___ 3 H ___ 3 ½ H ___ 4 H ___ 4 ½ H ___ 5 H ___ 5 ½ H ___ 6 H ___ 6 ½ H ___ 7 H Hard Material Breathing Holes <td> ORTHO-T® For Adults NT = Non-Extraction • XT = 4 Bicuspid Extraction UT = 2 Upper Bicuspid Extraction \$125.00 EACH* ___ 1 NT ___ 1 ½ NT ___ 2 NT ___ 2 ½ NT ___ 3 NT ___ 3 ½ NT ___ 4 NT ___ 4 ½ NT ___ 5 NT ___ 5 ½ NT ___ 6 NT ___ 6 ½ NT ___ 7 NT ___ 1 XT ___ 1 ½ XT ___ 2 XT ___ 2 ½ XT ___ 3 XT ___ 3 ½ XT ___ 4 XT ___ 4 ½ XT ___ 5 XT ___ 5 ½ XT ___ 6 XT ___ 1 UT ___ 1 ½ UT ___ 2 UT ___ 2 ½ UT ___ 3 UT ___ 3 ½ UT ___ 4 UT ___ 4 ½ UT ___ 5 UT ___ 5 ½ UT ___ 6 UT <td> ORTHO-TAIN POSITIONER® Adult Denitition (Breathing Holes Optional) N = Non-Extraction • X = 4 Bicuspid Extraction U = 2 Upper Bicuspid Extraction \$125.00 EACH* ___ 1 N ___ 1 ½ N ___ 2 N ___ 2 ½ N ___ 3 N ___ 3 ½ N ___ 4 N ___ 4 ½ N ___ 5 N ___ 5 ½ N ___ 6 N ___ 6 ½ N ___ 7 N ___ 1 X ___ 1 ½ X ___ 2 X ___ 2 ½ X ___ 3 X ___ 3 ½ X ___ 4 X ___ 4 ½ X ___ 5 X ___ 5 ½ X ___ 6 X ___ 2 U ___ 2 ½ U ___ 3 U ___ 3 ½ U ___ 4 U ___ 4 ½ U ___ 5 U ___ 5 ½ U ___ 6 U Breathing Holes Soft Materials Hard Material </td></td></td></td>	SOFTEE® 7-12 Years Overbite/Overjet Hinged Appliance \$125.00 EACH* ___ 1CS ___ 1 ½ CS ___ 2 CS ___ 2 ½ CS ___ 3 CS ___ 3 ½ CS ___ 4 CS ___ 4 ½ CS ___ 5 CS ___ 5 ½ CS ___ 6 CS <td> OCCLUS-O-GUIDE® 8 Years & Above (‘H’ Used Last 2 Months for Resistant Overjets) \$125.00 EACH* ___ 1 G ___ 1 ½ G ___ 2 G ___ 2 ½ G ___ 3 G ___ 3 ½ G ___ 4 G ___ 4 ½ G ___ 5 G ___ 5 ½ G ___ 6 G ___ 6 ½ G ___ 7 G ___ 2 H ___ 2 ½ H ___ 3 H ___ 3 ½ H ___ 4 H ___ 4 ½ H ___ 5 H ___ 5 ½ H ___ 6 H ___ 6 ½ H ___ 7 H Hard Material Breathing Holes <td> ORTHO-T® For Adults NT = Non-Extraction • XT = 4 Bicuspid Extraction UT = 2 Upper Bicuspid Extraction \$125.00 EACH* ___ 1 NT ___ 1 ½ NT ___ 2 NT ___ 2 ½ NT ___ 3 NT ___ 3 ½ NT ___ 4 NT ___ 4 ½ NT ___ 5 NT ___ 5 ½ NT ___ 6 NT ___ 6 ½ NT ___ 7 NT ___ 1 XT ___ 1 ½ XT ___ 2 XT ___ 2 ½ XT ___ 3 XT ___ 3 ½ XT ___ 4 XT ___ 4 ½ XT ___ 5 XT ___ 5 ½ XT ___ 6 XT ___ 1 UT ___ 1 ½ UT ___ 2 UT ___ 2 ½ UT ___ 3 UT ___ 3 ½ UT ___ 4 UT ___ 4 ½ UT ___ 5 UT ___ 5 ½ UT ___ 6 UT <td> ORTHO-TAIN POSITIONER® Adult Denitition (Breathing Holes Optional) N = Non-Extraction • X = 4 Bicuspid Extraction U = 2 Upper Bicuspid Extraction \$125.00 EACH* ___ 1 N ___ 1 ½ N ___ 2 N ___ 2 ½ N ___ 3 N ___ 3 ½ N ___ 4 N ___ 4 ½ N ___ 5 N ___ 5 ½ N ___ 6 N ___ 6 ½ N ___ 7 N ___ 1 X ___ 1 ½ X ___ 2 X ___ 2 ½ X ___ 3 X ___ 3 ½ X ___ 4 X ___ 4 ½ X ___ 5 X ___ 5 ½ X ___ 6 X ___ 2 U ___ 2 ½ U ___ 3 U ___ 3 ½ U ___ 4 U ___ 4 ½ U ___ 5 U ___ 5 ½ U ___ 6 U Breathing Holes Soft Materials Hard Material </td></td></td>	OCCLUS-O-GUIDE® 8 Years & Above (‘H’ Used Last 2 Months for Resistant Overjets) \$125.00 EACH* ___ 1 G ___ 1 ½ G ___ 2 G ___ 2 ½ G ___ 3 G ___ 3 ½ G ___ 4 G ___ 4 ½ G ___ 5 G ___ 5 ½ G ___ 6 G ___ 6 ½ G ___ 7 G ___ 2 H ___ 2 ½ H ___ 3 H ___ 3 ½ H ___ 4 H ___ 4 ½ H ___ 5 H ___ 5 ½ H ___ 6 H ___ 6 ½ H ___ 7 H Hard Material Breathing Holes <td> ORTHO-T® For Adults NT = Non-Extraction • XT = 4 Bicuspid Extraction UT = 2 Upper Bicuspid Extraction \$125.00 EACH* ___ 1 NT ___ 1 ½ NT ___ 2 NT ___ 2 ½ NT ___ 3 NT ___ 3 ½ NT ___ 4 NT ___ 4 ½ NT ___ 5 NT ___ 5 ½ NT ___ 6 NT ___ 6 ½ NT ___ 7 NT ___ 1 XT ___ 1 ½ XT ___ 2 XT ___ 2 ½ XT ___ 3 XT ___ 3 ½ XT ___ 4 XT ___ 4 ½ XT ___ 5 XT ___ 5 ½ XT ___ 6 XT ___ 1 UT ___ 1 ½ UT ___ 2 UT ___ 2 ½ UT ___ 3 UT ___ 3 ½ UT ___ 4 UT ___ 4 ½ UT ___ 5 UT ___ 5 ½ UT ___ 6 UT <td> 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INTERIM ‘G’ RETAINER® \$125.00 EACH* Use between 1st & 2nd Phase Ortho (All with breathing holes) 2 IG ___B ___M ___G ___P ___O ___C 2 ½ IG ___B ___M ___G ___P ___O ___C 3 IG ___B ___M ___G ___P ___O ___C 3 ½ IG ___B ___M ___G ___P ___O ___C 4 IG ___B ___M ___G ___P ___O ___C 4 ½ IG ___B ___M ___G ___P ___O ___C 5 IG ___B ___M ___G ___P ___O ___C 5 ½ IG ___B ___M ___G ___P ___O ___C 6 IG ___B ___M ___G ___P ___O ___C 6 ½ IG ___B ___M ___G ___P ___O ___C 7 IG ___B ___M ___G ___P ___O ___C B= Blue, M=Magenta, G=Green, P=Purple, O=Orange, C= Clear <td> CLASS III® \$125.00 EACH* 2-6 years: _____ 6-12 years: _____ Max A® \$125.00 EACH* 2-6 years: _____ 6-12 years: _____ </td> <td> HABIT CORRECTOR® \$125.00 EACH* Toddler (2-4 years - One size fits all): _____ Pedo (4-6 years): Pads Pull Tabs _____ Kids+ (6-9 years): Pads _____ Youth (7-11 years): Pads Pull Tabs _____ Adult (12+ years): Pads _____ Slenderized Adult (12+ years): Pads _____ ROTATION CLEATS 50 for \$30.00 ___ Labial Cleats (50 ea.) ___ Lingual Cleats (50 ea.) ___ LABIAL LINGUAL WIRES \$15.00 EACH PERFIT® LIP BUMPERS Individual: \$15.00 Kit of 8: \$110.00 1L 2L 3L 4L 5L 6L 7L 8L ___ </td> <td> YOUTH SNORE CURE™ \$125.00 EACH One Size Fits All Qty: _____ SNORE CURE 1® Open Closed Qty: _____ SNORE CURE 2® Open Closed Qty: _____ ANIMAL BOXES \$10.00 EACH ___ Dog ___ Car ___ Cat ___ Monkey ___ Alligator </td>	CLASS III® \$125.00 EACH* 2-6 years: _____ 6-12 years: _____ Max A® \$125.00 EACH* 2-6 years: _____ 6-12 years: _____	HABIT CORRECTOR® \$125.00 EACH* Toddler (2-4 years - One size fits all): _____ Pedo (4-6 years): Pads Pull Tabs _____ Kids+ (6-9 years): Pads _____ Youth (7-11 years): Pads Pull Tabs _____ Adult (12+ years): Pads _____ Slenderized Adult (12+ years): Pads _____ ROTATION CLEATS 50 for \$30.00 ___ Labial Cleats (50 ea.) ___ Lingual Cleats (50 ea.) ___ LABIAL LINGUAL WIRES \$15.00 EACH PERFIT® LIP BUMPERS Individual: \$15.00 Kit of 8: \$110.00 1L 2L 3L 4L 5L 6L 7L 8L ___	YOUTH SNORE CURE™ \$125.00 EACH One Size Fits All Qty: _____ SNORE CURE 1® Open Closed Qty: _____ SNORE CURE 2® Open Closed Qty: _____ ANIMAL BOXES \$10.00 EACH ___ Dog ___ Car ___ Cat ___ Monkey ___ Alligator
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