

SEND MORE

- ☐ Boxes
☐ Large (4.75x7.25x4)
☐ Medium (4x6x4)
☐ Labels
☐ RX's
☐ Other (List) _____

Patient Name: _____

Today's Date: ____/____/____ ☐ Female ☐ Male

NEXT APPOINTMENT:

DATE ____ DAY ____ TIME ____ AM/PM

TRIAL _____

FINISH _____

ORTHODONTIC

Mouth Guards:

- ☐ Upper ☐ Lower
☐ Hawley Retainer
☐ Splint
☐ Expansion Appliance
☐ ProForm[®] Mouth Guard
☐ Nance Appliance
☐ Lingual Arch Maintainer
☐ Comfort H/S[™]
☐ Thermo-Guard[™]
☐ Hard Acrylic

Not listed? We'll build it:

Sleep Appliances:

- ☐ Upper ☐ Lower
☐ EMA[®] Snore Appliance
☐ TAP[®]
☐ ClearDream[®]
☐ dreamTAP[®]

SHADE

Tooth Shade: _____

Choose the NTI Appliance

- ☐ NTI-tss[™] Plus Nighttime (Anterior - Posterior Discluding Element)
☐ NTI-tss Plus Migrate Therapy (NTI-tss Plus and NTI-tss Plus Daytime)
☐ NTI-tss Plus Daytime (Anterior Point, Stop)
☐ NTI-tss Plus Universal Therapy (NTI-tss Plus and Opposing Slidebar)
☐ NTI-tss Plus Extended Coverage (From _____ to _____)
☐ NTI-tss Plus + Soft (must be extended 2nd bi - 2nd bi)

Choose the arch:

- ☐ Upper ☐ Lower (Lab Default) ☐ Lab Choice

Measurements:

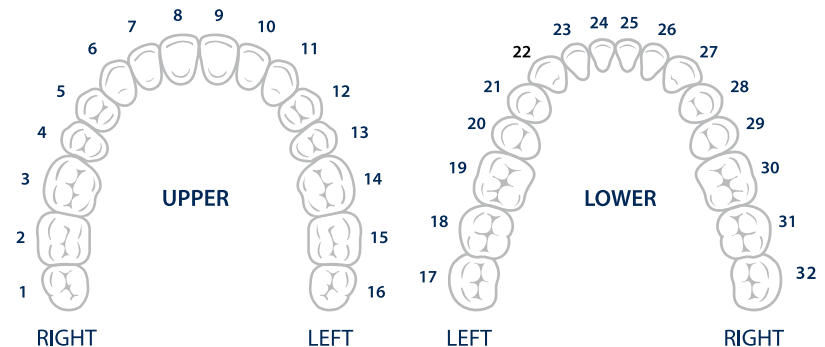
- ☐ Maximum Protrusive Measurement _____ mm
☐ Leaf Gauge Measurement (Vertical) _____ mm
 (triple tray is used or if patient has 3rd molar)

Enclose Full Arch Models or VPS Impressions

FDA: The NTI-tss protocol is approved for the Prevention of Medical Diagnosed Migraine Pain and Jaw Disorders through the reduction of trigeminally innervated muscular activation.

NOTES:

DESIGN CASE:



Dr.'s Signature: _____

License #: _____