P: 0481 466 454

E: lab@curatedsmiles.com.au

REMOVABLE APPLIANCE ORDER FORM

Dentist: _____

Practice: _____

Patient: _____

Sex: M / F DOB: ____/____/____

TURNAROUND

☐**Standard** ☐**Fast****

Due Date: _____/_____/_____

**Prior to sending any fast turn-around jobs, please call us to confirm, additional fees will apply.

MOUTHGUARD

☐ Standard 4mm Design:_____ Colour/s:_____

☐ Custom
Thickness:_____ Design:_____ Colour/s:_____

BLEACHING

All trays come with bleaching wells on the 6 anterior teeth unless specified in notes

U☐ ☐L Tray Only

☐ Take-Home Kit *(includes U+L trays, SOVA extreme white gel 5pk & case)*

MORE APPLIANCES COMING SOON

ORTHODONTICS

U☐ ☐L Essix Retainer

U☐ ☐L Active Tx Pontic Retainer (painted buccal surface)

Tooth#(s):_____ Shade:_____*

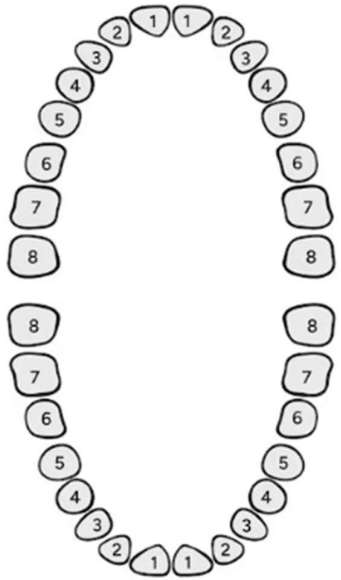
U☐ ☐L Post Tx Pontic Retainer (fixed composite tooth)

Tooth#(s):_____ Shade:_____*

Standard A2 shade if left blank

MORE APPLIANCES COMING SOON

◊Instructions



◊Shade



◊Pontic Design



◊Occlusal Contact



TRAY: ____ / ____ / ____

BITE: ____ / ____ / ____

TRY-IN: ____ / ____ / ____

RE-TRY: ____ / ____ / ____

FINISH: ____ / ____ / ____

ADDITIONAL NOTES: