ORTHO CAST STUDY MODELS, LLC.



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Specializing in Orthodontic and Pediatric Study Models

Practice or Billing Name PLEASE USE STAMP Please CLEARLY PRINT patient information for Model Label in box below LAST NAME FIRST NAME AGE OR D.O.B. CASE NUMBER or MISC. INFO. IMPRESSION DATE PREMIUM MODEL SERVICE **CHECK TYPE OF MODELS DESIRED** DUE DATE _____ Completely Finished-with inked lettering Poured, Trimmed, Sculpted, Soaped & Polished. Completely Finished-with typed labeling Check for NO SOAP Poured, Trimmed, Sculpted, Soaped & Polished. Semi-Finished-with typed labeling Please indicate below Poured, Trimmed & Sculpted. Bases not sanded. any unusual occlusion such as cross bite. Rough - Cut - with typed labeling or Class III Poured & Trimmed only. 2 Sets of Models - Pour impressions twice Also check Model Type - A, B, or C above. Duplicate - Make new models by duplicating the enclosed poured models. Also check Model Type - A, B, or C above. PLEASE SEND MORE Please Include a Wax Bite With Each Order MAILING LABELS PRESCRIPTIONS TRIM WITH WAX BITE UPS LABELS TRIM WITHOUT WAX BITE

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