

Hi TECH ORTHODONTIC LABORATORY

745 NORTH 500 WEST
PROVO, UT 84601
OFFICE: (801) 375-8239 / FAX: (801) 375-8240

Patient's Name: _____

Return Date: _____ Dr.'s Office: _____

Address: _____

City: _____ State: _____ Phone #: _____

Retainers

- Hawley: Upper/Lower
- Anterior Spring: Upper/Lower
- Wrap Around: Upper/Lower
- Flipper

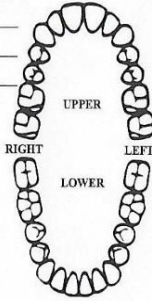
Fixed

- Space Maintainer (B&L)
- LHA (Lower Holding arch)
- Quad Helix
- Nance
- 3x3
- RPE (Rapid Palate Expander)
- PHA with Pontics

Functional

- Schwartz: Upper/Lower
- Sagittal: Upper/Lower
- 3-Way Sagittal
- Other: _____

Special Instructions:



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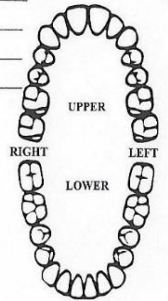
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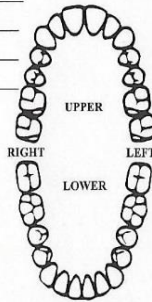
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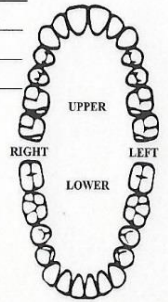
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