

ALIGNER FINISHING APPLIANCE Rx



TP Orthodontics, Inc.

Mailing & Shipping

100 Center Plaza
La Porte, Indiana 46350-9672 USA
Phone: 800-348-8856
219-785-2591

Instructions for digital/online
prescription submissions
can be found at

tportho.com/custom

DIGITAL FILE SUBMISSION

- ☐ Recent, appliances off
- ☐ Recent, with braces or composite attachments that need removal
- ☐ Completed set-up

MODELS ENCLOSED

IMPRESSIONS ENCLOSED

RESET

- ☐ All teeth
- ☐ Teeth circled
- ☐ No reset needed

R

8	7	6	5	4	3	2	1
1	2	3	4	5	6	7	8

 L

VIEW AND APPROVE SET-UP ONLINE

- ☐ Yes
- ☐ No

BLOCK OUT LINGUAL RETAINER

- ☐ Upper
- ☐ 1-1
- ☐ 2-2
- ☐ 3-3
- ☐ 4-4
- ☐ Lower
- ☐ 1-1
- ☐ 2-2
- ☐ 3-3
- ☐ 4-4

HINGE AXIS

- ☐ Use average
- ☐ Headplate sent under separate cover
- ☐ Tracing enclosed

CLEAR

COLOR

- ☐ Green
- ☐ Purple
- ☐ Blue
- ☐ Rainbow
- ☐ Pink
- ☐ Orange
- ☐ Red
- ☐ Yellow

SEATING SPRINGS for positive seating and increased retention.

- ☐ No
- ☐ Yes (Draw arrows to indicate location)

R

7	6	5	4
4	5	6	7

 L

SOCKET LINERS for rotation correction

- ☐ No
- ☐ Yes on teeth circled

R

2	1
2	1

 L

MOLDED AIRWAYS included if not marked.

- ☐ Yes
- ☐ No

END APPLIANCE DISTAL TO

Appliance should cover all teeth to prevent super-eruption.

- ☐ First molars
- ☐ Second molars
- ☐ Other

SPECIAL INSTRUCTIONS

☐ This is my first case with TP Orthodontics.

ACCOUNT NO.

Dr. _____

Address _____

City _____

State _____

Zip _____ Phone () _____

E-Mail (required) _____

Patient's Name _____

Date Shipped
to TPO® _____

Date
Required _____

This custom-made device is manufactured to satisfy the design characteristics and properties specified by the prescribing doctor for this specific patient, and is intended for the exclusive use of the named patient.

PLEASE DO NOT WRITE IN THIS SPACE

500-100 <input type="checkbox"/>	400-601 <input type="checkbox"/>	400-0002 <input type="checkbox"/>	
614-100 <input type="checkbox"/>	400-850 <input type="checkbox"/>	400-0005 <input type="checkbox"/>	
	400-900 <input type="checkbox"/>		
	406-700 <input type="checkbox"/>		