

QC Orthodontics Lab, Inc.
 109 Spence Mill Road
 Fuquay Varina, NC 27526
 (800) 537-1018 (919) 577-2250 (919) 577-2253 (fax)
 www.qcortho.com info@qcortho.com

FILLABLE HERBST PRESCRIPTION

Doctor _____	Telephone _____	email _____
Address _____	Patient _____	Age _____
City _____	State _____	Zip _____

Crown Herbst

- Cantilever
- Hanks Telescoping
- Fliplock

Banded Herbst

- Cantilever
- Hanks Telescoping
- Fliplock

Other Herbst Designs

- Acrylic Sleep Apnea
- Band / Crown Combination

Bite Relationship

- AP Relationship Marked on Model
- AP Relationship by Wax Bite
- Position Anterior Edge to Edge
- Position for Class I Molars
- Position for Super Class I Molars
- Other: _____

Crown / Band Preparation

- Remove Occlusal From Crowns
- Vent Holes in Occlusal
- Trim to _____mm Sub Gingival
- Reinforce Bands

Maxillary Expansion

- 13mm RPE
- 8mm RPE
- 13mm Low Profile Anatomical RPE
- 8mm Low Profile Anatomical RPE
- 12mm Snaplock RPE
- 8mm Snaplock RPE
- Stealth RPE

Mandibular Expansion

- Williams
- Fixed Schwartz
- E Arch
- Pin Tube

Date Wanted

Appointment Date

UPS Labels

SEND BOXES

Call

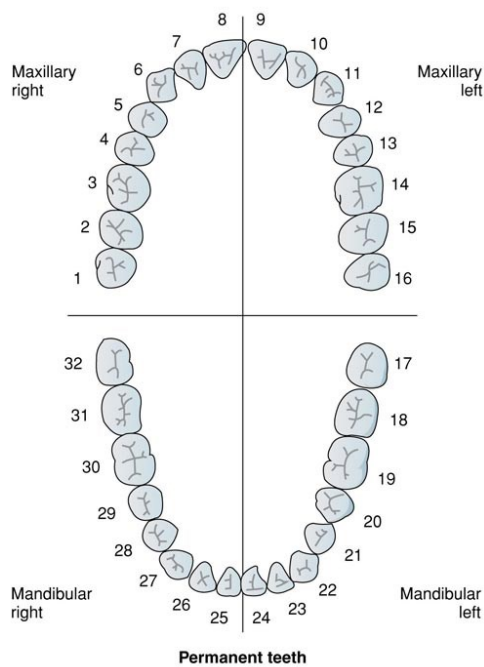
Date of Impression

Wire Appliances

.40 Lingual Arch

.60 Trans Palatal Arch

Other _____



Doctor's Comments

 Doctor's Signature

 License Number