



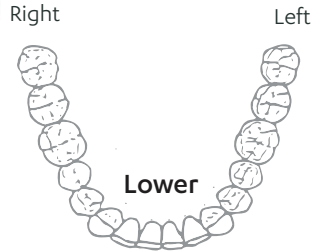
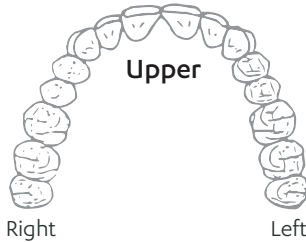
POSTAL ADDRESS
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 LABORATORY ADDRESS
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Inquire about PRE-booking... Visit!
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THE DENTAL FACTORY

Date:	Patient:
DR:	Due Date:
Practice:	
<input type="checkbox"/> Contact me concerning case	<input type="checkbox"/> Please send more Lab Sheets



Colour	Colour
Sparkles	Sparkles

Additional Instructions...

Removable Appliances	Upper	Lower	Fixed Appliances
Hawley (1bow, 1set cribs)	<input type="checkbox"/>	<input type="checkbox"/>	Bonded Retainer <input type="checkbox"/> Upper <input type="checkbox"/> Lower
Clear Retainer (1mm)	<input type="checkbox"/> Alignment	<input type="checkbox"/>	<input type="checkbox"/> 3-3 <input type="checkbox"/> Straight <input type="checkbox"/> 4-4 <input type="checkbox"/> W
Schwarz	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> Rickanator <input type="checkbox"/> Quad Helix
3D Expander	<input type="checkbox"/>		<input type="checkbox"/> Transpalatal Arch <input type="checkbox"/> LLA
ALF	<input type="checkbox"/>		<input type="checkbox"/> Tongue guard <input type="checkbox"/> Nance Holding Arch
Spring Aligner	<input type="checkbox"/> Upper	<input type="checkbox"/> 3-3 <input type="checkbox"/> 4-4	<input type="checkbox"/> Band & Loop spacemaintainer <input type="checkbox"/> Herbst (with kit)
Biobloc	<input type="checkbox"/>	<input type="checkbox"/>	Rapid Palatal Expander <input type="checkbox"/> Hyrax <input type="checkbox"/> Haas <input type="checkbox"/> Bonded <input type="checkbox"/> Superscrew
	<input type="checkbox"/> Stage 2 <input type="checkbox"/> Stage 3	<input type="checkbox"/> Stage 4	
Repairs	<input type="checkbox"/> Addition	<input type="checkbox"/> Fracture	Others
Functional Appliances			Splint <input type="checkbox"/> Upper <input type="checkbox"/> Lower
Twin Block	<input type="checkbox"/> Stage 1	<input type="checkbox"/> Stage 2	<input type="checkbox"/> Gelb <input type="checkbox"/> Flat Occlusal <input type="checkbox"/> CLEARsplint* (flexible splint) <input type="checkbox"/> Pressure adapted soft splint <input type="checkbox"/> Anterior Deprogrammer <input type="checkbox"/> Farrar
Bionator	<input type="checkbox"/> Open bite <input type="checkbox"/> Close bite	<input type="checkbox"/> Maintain bite	Mouthguard <input type="checkbox"/> Single layer <input type="checkbox"/> Advanced <input type="checkbox"/> Double layer
<input type="checkbox"/> MDSA Sleep Apnea	<input type="checkbox"/> Ortho Apnea	<input type="checkbox"/> Erkodont Snoreguard	<input type="checkbox"/> Orthodontic Study Models <input type="checkbox"/> Whitening Trays <input type="checkbox"/> Indirect Bonding

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