

Today's Date: \_\_\_\_\_

Return by 5:00 pm on: \_\_\_\_\_

Please send:  Prescriptions  Boxes  Case Bags

Mailing Labels:  Pre-paid Fed Ex Stamps  Pre-paid Mail Labels

Please have a technician call me:  Yes  No



## SPECIALTY APPLIANCE PRESCRIPTION

DOCTOR: \_\_\_\_\_ PATIENT NAME: \_\_\_\_\_

PHONE: (\_\_\_\_) \_\_\_\_\_

FAX: (\_\_\_\_) \_\_\_\_\_

STREET: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

EMAIL: \_\_\_\_\_

### NTI-tss PLUS™

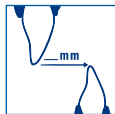
#### 1. Choose the appliance:

**Appliances made from Keller's Clear 450™ thermoplastic material.**

- NTI-tss Plus™ Nighttime (Anterior - Posterior Discluding Element)
- NTI-tss Plus™ Daytime (Anterior Point, Stop)
- NTI-tss Plus™ Extended Coverage From \_\_\_\_\_ to \_\_\_\_\_  Full Coverage
- NTI-tss Plus™ Migraine Therapy Set (NTI-tss Plus™ and NTI-tss Plus™ Daytime)
- NTI-tss Plus™ Universal Therapy Set (NTI-tss Plus™ & Opposing Universal Slide Bar)
- NTI-tss Plus™ + Soft (must be extended 2nd bi - 2nd bi)

#### 2. Choose the arch:

- Upper  Lower  Lab Choice  
(We will make a lower unless contraindicated)



#### 3. Measurements:

- Maximum Protrusive Measurement \_\_\_\_\_ mm
- Leaf Gauge Measurement (vertical) \_\_\_\_\_ (if triple tray is used or if patient has third molars.)

**Enclose full arch models or impressions.**

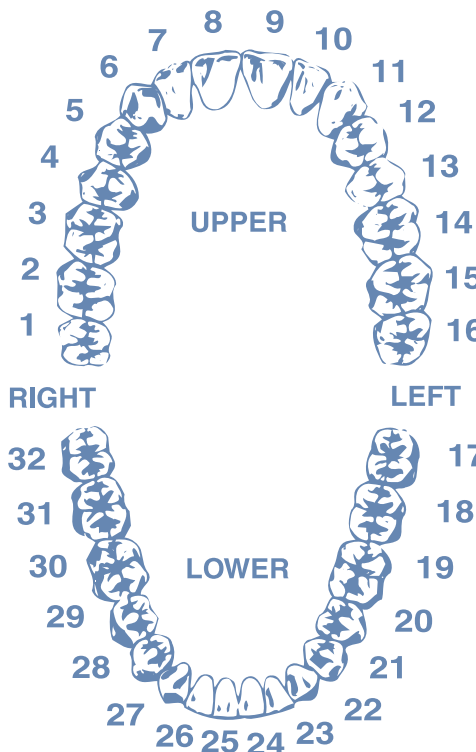
### VACUUM-FORMED APPLIANCES

#### 1. Choose the appliance:

- HotShok sports guard
- Athletic - for basic protection
- Competitor - appropriate for most sports
- Extreme - for maximum protection
- Vacuum-formed night guards
- Bleaching trays

#### 2. Choose the arch:

- Upper
- Lower



### CRYSTAL CLEAR® Full Coverage Guards

#### 1. Choose the appliance:

**Appliances made from Keller's Clear 450™ thermoplastic material.**

- Crystal Clear® (Hard, durable, non-porous, injection-molded thermoplastic)
- Crystal Clear®+Soft (Hard Guard with Soft Inner Lining)

#### 2. Choose the arch:

- Upper  Lower

#### 3. Choose the guard design\*:

- Flat Plane - Anterior guidance (ramp)
- Flat Plane - Group function (no ramp)
- Daytime - No anterior coverage

*\*Specialty Designs Available*

**Send open bite with 2mm posterior clearance.**

**Enclose full arch models or impressions.**

### ANTI-SNORING DEVICE

- Crystal Clear ASD (Anti-Snoring Device with lower anterior retention)
- Crystal Clear ASD (Anti-Snoring Device with ramp for bruxers)

**Send open construction bite with 2mm posterior clearance.**

Comments: \_\_\_\_\_

Doctor Signature: \_\_\_\_\_ License No.: \_\_\_\_\_

*Terms are net 10 days from statement date.*

**Keller Laboratories, Inc.**

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