MEDLEY GOLD™ PRESCRIPTION



LAB USE ONLY Incoming # cases_

Special Instructions: _

DIE GE DDINE		Customer used:
PLEASE PRINT		☐ Portal Upload - No Frt (00) ☐ Cust Acct - No Frt (00)
Account # C0 PO #		☐ Disinfected
B PRACTICE TYPE:	DATE	
(i.e., ortho, GP, pedo, prostho, oral surgeon, commer. lab)	DATE SHIPPED:	Rcvd:
L DOCTOR:L		B#Via: Shipment Date Planned Shipment Date
ADDRESS: (Specify if ship to address is different)		Shipment Date Planned Shipment Date
Ğ	DATE DUE:	(QC): (LPD): Estimated Delivery Date Promised Delivery Date
A CITY: STATE: ZIP:		ND(Rec):
Provide PHONE: ()		Source:
Country & EAV.	lannointment	NO BITE / MDL - B / C Campaign:
ony code		Align ID#Dig ID#
EMAIL:	Please Pro	vide: Boxes Labels
PATIENT:AGE:AGE:	—— □Rx:	Qty: (specify appliance type)
FLEASE FRINI		(specify appliance type) Protection Program (NOT AVAILABLE)
IMPORTANT! Always retain model	•	,
Damage to models may occur during fabrication, please m	ark Rx if duplicati	on (additional fee) of model(s) is required.
Medley Gold™ Sleep Apnea Appliance:		on the Medley and other sleep
The Medley Gold appliance is 3 appliances in one. It allows the clinician to customize the same appliance with three different advancement	appliances visit our website at greatlakesdentaltech.com	
mechanisms determined by patient needs: Rigid Nylon links, Elastomeric	Auxiliaries & O	ther Sleep Appliance Options:
straps or Herbst* (Rod Sleeve). The Herbst version is PDAC approved.	Visit our website for	a full list of EMA Elastomeric Straps available in various
Bite Registration- 5mm minimal vertical incisal clearance and 60% mandibular protrusion recommended. The laboratory may need to open	lengths and strengths in bulk packaging to meet your patient's needs. ☐ MPowRx [™] - Non-Custom Snoring and Sleep Apnea Appliance <i>255-040</i>	
the bite depending on curve of spee or in deep bite cases.	☐ The George Gau	ıge™ Kit <i>056-050</i>
Medley Basic Appliance Platform Options:		ks Grey Long (25/pkg) <i>056-032</i> ks Blue (25/pkg) <i>056-026</i>
Features the advancement location for Rigid Nylon Link or Elastomeric strap attachments. Includes elastic hooks, (1) package of elastics and	5mm Bite Forl	ks White Long (25/pkg) 056-033
(1) wrench. Select preferred appliance	☐ The George Gau ☐ my TAP™ 255-09	ge™ Asstd. Bite Fork Pack (12)-2mm, (12)-5mm <i>056-025</i> 32
☐ Rigid Nylon Link - Includes sizes 17-22mm (Standard)	☐ AM Aligner (10/p	kg) 255-041
☐ Elastomeric - Includes sizes 16-21mm (Blue)	☐ Mandibular Stabi ☐ EZ Key (10/pkg)	ilizerRed 155-028 140-020
☐ Medley Complete Appliance Platform (Rod Sleeve) PDAC Version Features the advancement location for Telescopic Herbst arms	☐ DentaSOAK® 235-023 (1 month Supply)	
(Rod Sleeve). Medicare Approved	☐ Elastics (Bag of 50 Non-Latex) 833	
Also includes: Rigid Nylon Link and Elastomeric strap attachments, (1)	Dental Midline Consid	deration: If no indication, we will follow bite registration. Define Discrepancy of Dental Midlines:
Rigid Nylon Link set (17-22mm), (1) Elastomeric strap set (16-21mm) - Blue, elastic hooks, (1) package of elastics and (1) wrench.	RODDOO	Upper to lower midline deviates to Pt. R or L bymm
	00000	TE BROIDE byIIIII
OPTIONS: Additional Fee Medley Configuration Kit Includes: (1) set Rigid Nylon Links, (4)		
link screws, (1) set Elastomeric straps sizes (16-21mm) Blue & Yellow, (4) Elastomeric screws and (4) screw wrenches.	-57	2000
	DW.	TO STATE
MATERIAL OPTIONS: ☐ Durasoft 2.5mm (Standard)	B	
□ Durasoft 1.8mm □ Biocryl with Thermacryl	69	
☐ Hard Acrylic	90	TO IN THE
☐ Clasping for Retention- Available only with Hard Acrylic material option: ☐ Ball Clasps ☐ Other	90	(H) (H)
	R UPF	PER L L LOWER R
Recommended for use with Medley AM Aligner (10/pkg) 255-041		
	License #:	
Herbst is a registered trademark of Dentaurum, Inc.	Dr. Signature:	
¬ Master Ry on File #		