VILLAGE ORTHODONTICS

Dr. James R. Nicholson, D.D.S., M.S. • Dr. Nicholas C. Brassard, D.D.S., M.S.D

Please call to set up your complementary consultation • 317-873-6927

Patient Name:_____

Date:_____

Referred by: _____

Referred for the following:

- ☐ Generic Orthodontic Consultation
- ☐ Crowding/spacing
- ☐ Overjet/overbite
- ☐ Crossbite
- ☐ Impactions
- ☐ Early Interceptive Treatment
- ☐ Missing tooth/teeth
- ☐ Space Maintenance
- ☐ Habit Correction
- ☐ Jaw Discrepancy
- ☐ Sleep Disorder

☐ Other/Special Instructions: _____

_____

MAXILLA

			A	B	C	D	E	F	G	H	I	J			
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17
			T	S	R	Q	P	O	N	M	L	K			

RIGHT MANDIBLE LEFT

Radiographs:

- ☐ Mailed/Emailed
- ☐ Given to patient
- ☐ No X-ray on file

☐ 95 E Oak St.
STE B
Zionsville, IN 46077

☐ 1911 North Lebanon St.
Lebanon, IN 46052