

# Six Month Smiles Case Submission Script



**SIX MONTH SMILES®**  
Short Term Ortho System

Six Month Smiles, Inc.  
35 Main Street  
Scottsville, NY 14546  
866-957-7645 Option 3  
CaseProcessing@SixMonthSmiles.com

## Shipping Information

Doctor Name (required): \_\_\_\_\_

Practice Name: \_\_\_\_\_

Date: \_\_\_\_\_ Office Phone #: \_\_\_\_\_

Street Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ ZIP: \_\_\_\_\_

Email (where sales receipts should be sent) \_\_\_\_\_

Patient Name \_\_\_\_\_

Case processing time is 5 working days. If you prefer to receive your case at a later date please specify here: \_\_\_/\_\_\_/\_\_\_\_\_

## Please select the product that you are ordering (required):

### Patient Tray Kits

(includes all brackets, bonding trays, wires & other materials)

- Full Patient Tray Kit
- Single Arch Patient Tray Kit (UPPER ONLY)
- Single Arch Patient Tray Kit (LOWER ONLY)

Please do NOT send Alginate Impressions that have NOT been poured.

### Extras

- Expedited Processing 3 business days \$50
- Overnight Shipping & Handling \$50 (excludes international)
- No Diamond Disc in kit (less \$15.00)

### Retainers

- Bonded Retainer BOTH
- Bonded Retainer (UPPER ONLY)  
(Send bite registration and opposing model)
- Bonded Retainer (LOWER ONLY)
- Essix Retainer BOTH
- Essix Retainer (UPPER ONLY)
- Essix Retainer (LOWER ONLY)
- Recommended Protocol BOTH  
(Bonded and Essix retainer set)
- Recommended Protocol (UPPER ONLY)
- Recommended Protocol (LOWER ONLY)

Case processing time is now only: **5 Business Days!** \*Does not include ship times.

To place an order for 6MS Supplies please visit <http://supplies.6monthsmiles.com> or call 866-957-7645 (option 2)

**Special Requests for Case:** (changes to bracket positions, eyelets, buttons, overcorrections, teeth that should not be bracketed etc.)  
Brackets will be centered on current crowns unless otherwise directed.

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**Worn Teeth:** (include how many mm of wear exist) Please list all anterior teeth that are worn more than .5mm and that you would like the specialists to take into account when positioning the brackets. Brackets will be placed in current center of tooth unless wear is indicated.

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**Dr. Signature (Required):** \_\_\_\_\_ **License # (Required):** \_\_\_\_\_

Unless directed otherwise, brackets will be placed from 1st molar to 1st molar. Eyelet Brackets, Buttons & 2nd Molar Tubes can all be provided and placed in trays upon your request at \$7.00 per item. Any brackets not used due to missing teeth will be returned to you. Please ensure that models/impressions are adequately made & shipped safely. Write the patients last name on the base of the models if sending models. Average processing time is 5 business days. This does not include shipping to or from the processing center. Please take this into account when scheduling your patients. We return cases via 2-day shipping.

## Payment Information (Credit Card number required. Six Month Smiles is PCI Compliant)

Name on Card: \_\_\_\_\_

Credit Card #: \_\_\_\_\_ Exp Date: \_\_\_\_\_ CVV Code: \_\_\_\_\_

Billing Street Address: \_\_\_\_\_ Zip/Postal Code: \_\_\_\_\_