ACCUPLAN® | Orthognathic Service Request

MedCAD

CASE INFORMATION

Patient Name		Surgery Date	___ / ___ / ___ ☐ Not Scheduled
Hospital		Requested Meeting	___ / ___ / ___ at ___ : ___ PM Will be confirmed after ALL data submitted.
Surgeon		Surgeon Time Zone	
Distributor		Rep Phone	
Representative		Rep Email	

CLINICAL MEASUREMENTS

Maxillary Dental Deviation	☐ Right ☐ Left _____ mm(s)	Current Occlusal Plane Angle	_____ degree(s)
Canine Position	☐ Even ☐ Right Superior _____mm(s)		☐ Left Superior _____mm(s)

SURGICAL PLAN

Clinical Approach	☐ Single Jaw ☐ Double Jaw	If Double Jaw, starting with:	☐ Maxilla ☐ Mandible
Maxilla Surgery	☐ LeFort I ☐ LeFort II ☐ LeFort III	Maxilla Segments	_____ piece(s)
Mandible Surgery (Left Side)	☐ SSO ☐ Vertical Ramus ☐ Inverted L ☐ Mandibular Split ☐ Subapical Osteotomy	Mandible Surgery (Right Side)	☐ SSO ☐ Vertical Ramus ☐ Inverted L ☐ Mandibular Split ☐ Subapical Osteotomy

PLANNED SURGICAL MOVEMENTS

☐ Determine during Planning Session

Midline Correction	☐ Patient Right ☐ Patient Left ☐ N/A _____ mm(s)	Genioplasty	☐ Yes ☐ No
Maxillary Movement	☐ Impact ☐ Down _____ mm(s)	☐ Advancement ☐ Setback	_____ mm(s)
Occlusal Plane Angle Correction	☐ Increase ☐ Decrease _____ degree(s)	Occlusal Plane Position Correction	☐ 1st Molar Impaction ☐ 1st Molar Down _____ mm(s)

Additional Instructions:

CUSTOM PLATES + GUIDES

☐ N/A

☐ Lefort Plates ☐ Mandible Plates ☐ Genio Plate ☐ Guides

Screw Manufacturer:

Upload Data & Online Service Request: MedCAD.net/start
Ship Patient Data To: MedCAD, 501 S 2nd Ave, Suite A-1000, Dallas, TX 75226
Phone: +1 (214) 453-8864 **Email:** orders@medcad.net **Web:** MedCAD.net