

Surgeon name \_\_\_\_\_ Hospital name/Account number \_\_\_\_\_

Phone number \_\_\_\_\_ E-mail address \_\_\_\_\_

Secondary contact information (name, e-mail address, phone number) \_\_\_\_\_

Sales Consultant name \_\_\_\_\_

Shipping Information     Consultant Home     UPS Hold Station     Storage or Office

Ship to Account, attn: \_\_\_\_\_

Other: (address, city, state, zip) \_\_\_\_\_

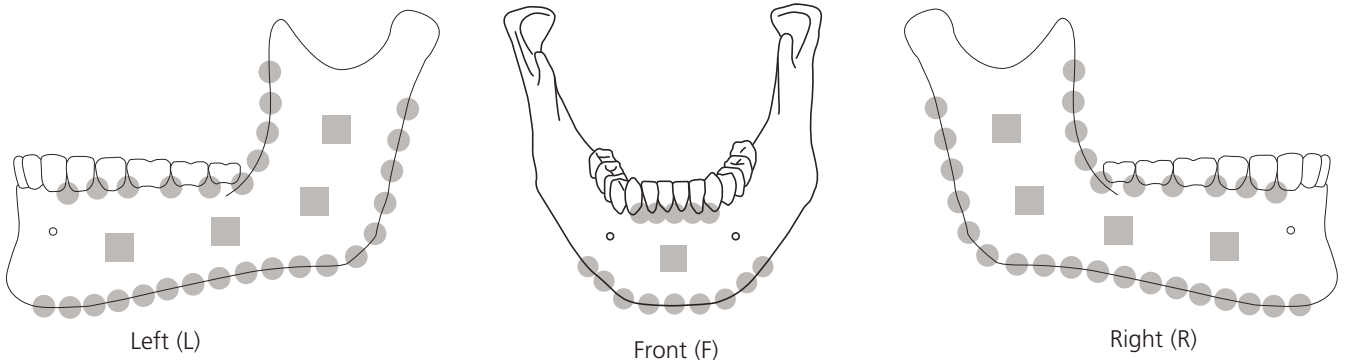
Patient number/name \_\_\_\_\_ Date of planned surgery \_\_\_\_\_

**I. Select procedure**

- |   |   |
|---|---|
| <input type="checkbox"/> Distraction                    | <input type="checkbox"/> Bone Transport                 |
| <input type="checkbox"/> Ramus                          | <input type="checkbox"/> Ramus                          |
| <input type="checkbox"/> Body                           | <input type="checkbox"/> Body                           |
| <input type="checkbox"/> Oblique/angle (ramus and body) | <input type="checkbox"/> Oblique/angle (ramus and body) |
| <input type="checkbox"/> Alveolar                       | <input type="checkbox"/> Alveolar                       |
| <br>  |   |
| <input type="checkbox"/> Bilateral                      |   |
| <input type="checkbox"/> Unilateral                     |   |
| <input type="checkbox"/> Patient's left side            |   |
| <input type="checkbox"/> Patient's right side           |   |

Approximate length of distraction planned for the patient (mm) \_\_\_\_\_

Mark approximate location of osteotomies and distractor placement with  (can be modified during the planning session) if completing electronically. Alternately if a hard copy is submitted, please draw predicted osteotomies and distractor placement.



- Distractor orientation
- |   |  |
|---|--|
| <input type="checkbox"/> Intraoral activation | <input type="checkbox"/> External activation (through a percutaneous port) |
|   | <input type="checkbox"/> Distractor exits soft tissue near the ear         |
|   | <input type="checkbox"/> Distractor exits soft tissue at front of face     |

# Proplan CMF™.

## Request for service—Mandible Distraction.

### II. Select distractor type, if known (can be modified during the planning session)

#### 1. Internal mandible distractors

- Single Vector Distractor (titanium)
- Curvilinear Distractor (titanium)  
System size:  
(Indicated for patients  $\leq$  4 year)  1.3 mm†  
(Indicated for patients  $>$  1 year)  2.0 mm  
Screws:  Locking (2.0 mm only)  
 Non-locking
- CMF Distractor (titanium)  
System size:  
(Indicated for patients  $\leq$  1 year)  1.0 mm  1.3 mm  
(Indicated for patients  $>$  1 year)  1.5 mm  2.0 mm  
Screws:  Locking (2.0 mm only)  
 Non-locking  
Footplate design:  
 Mesh  
 Cloverleaf  
 Elevated mesh (1.5 mm and 2.0 mm only)  
 5.5 mm offset  7.5 mm offset  
Distractor body:  
 Center translating (AB style; 15 mm–30 mm)  
 End translating (BC style; 15 mm–40 mm)

#### 2. External mandible distractor

- Multi Vector Distractor (titanium)
  - Multi vector configuration
  - Single vector configuration

#### 3. Alveolar distractor

- Alveolar Distractor (titanium)

### III. Kit configuration

- SD900.006 Patient Specific Instrument and Planning Kit—Distraction
- Consists of:
- SD900.107 Patient Specific Guide, Distractor Positioning (2 ×)
  - SD900.266 Anatomical Model, Child, Mandible—Orbit, Clear

### IV. Additional bone models and guides

#### 1. I would like to order additional patient specific bone models

- Yes  No  To be determined

Model to represent:

- Preoperative  Planned outcome

Model anatomy:

- Mandible  Cranium
- Maxilla  Full skull
- Mandible through maxilla  Attached
- Attached  Separate
- Separate  Mandible through orbit

Bone model material:

- Acrylic, clear colorizable
  - Teeth  Nerve
  - Other (e.g. screw position or mandible angle; defined during planning session)
- Polyamide

#### 2. I would like to order additional surgical guides

- Yes  No  To be determined

To submit CT scan data and Request for Service (RFS) use one of the following ways:

#### Preferred Method:

Upload completed RFS and CT scan to ProPlan CMF Connect, or ProPlan CMF Online\*

#### Alternative Method:

Mail via overnight delivery to:  
Materialise  
Attn: CMF Team  
44650 Helm CT  
Plymouth MI, 48170

Be sure to include:

1. Completed RFS Form
2. CT scan data archived onto a CD or disk; labeled with physician name, scanner type, CT technologist name and phone number

#### To submit data electronically:

Upload completed RFS and CT scan data to ProPlan CMF Connect, or ProPlan CMF Online.\* Additional patient data (i.e. photos, cephalometric data and prior CT scans) may be uploaded concurrently with the RFS and CT scan data

For access to ProPlan CMF Connect go to [www.synthesccs.com](http://www.synthesccs.com) and follow the instructions in the Online Request section

\* Synthes ProPlan CMF Online is for sales consultant use only

† The 1.3 mm curvilinear distractors are not licensed for use in Canada



Distributed by:  
DePuy Synthes CMF  
1302 Wrights Lane East  
West Chester, PA 19380  
Telephone: (610) 719-5000  
To order: (800) 523-0322  
Fax: (610) 251-9056

Synthes (Canada) Ltd.  
2566 Meadowpine Boulevard  
Mississauga, Ontario L5N 6P9  
Telephone: (905) 567-0440  
To order: (800) 668-1119  
Fax: (905) 567-3185

[www.synthes.com](http://www.synthes.com)

Proplan CMF Products are  
manufactured by:

