

# Model Order Form



**Please fax completed form  
to Medical Modeling LLC  
at 303.273.6463**

**Craniomaxillofacial**

**Toll Free: 888.781.8177**

Surgeon Name: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Surgeon Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Stryker Representative: \_\_\_\_\_

Patient Name: \_\_\_\_\_ Date of birth: \_\_\_\_\_

CT Facility: \_\_\_\_\_ CT Scan Date: \_\_\_\_\_

CT Facility Phone Number: \_\_\_\_\_

Date Model Needed: \_\_\_\_\_

Hospital: \_\_\_\_\_

**Purchase Order Number:** \_\_\_\_\_

## OsteoView Anatomical Models

<input checked="" type="checkbox"/>	Cat.No.	Qty	Description
<input type="checkbox"/>	6500000011	___	OsteoView Mandible
<input type="checkbox"/>	6500000012	___	OsteoView Maxilla
<input type="checkbox"/>	6500000013	___	OsteoView Mandible & Maxilla
<input type="checkbox"/>	6500000014	___	OsteoView Full Skull, Adult
<input type="checkbox"/>	6500000015	___	OsteoView Full Skull, Pediatric (up to 5 years)

## ClearView Anatomical Models

<input checked="" type="checkbox"/>	Cat.No.	Qty	Description
<input type="checkbox"/>	6500000006	___	ClearView Mandible
<input type="checkbox"/>	6500000007	___	ClearView Maxilla
<input type="checkbox"/>	6500000008	___	ClearView Mandible & Maxilla
<input type="checkbox"/>	6500000009	___	ClearView Full Skull, Adult
<input type="checkbox"/>	6500000010	___	ClearView Full Skull, Pediatric (up to 5 years)

- Please select structures for selective coloration
- Teeth & Tooth Buds
  - Existing Implants
  - Inferior Alveolar Nerve
  - Soft Tissue Tumor
  - Other

\* \$30 will be added to each order for shipping and handling.

Shipping Address: \_\_\_\_\_

- 
- CT brain with out contrast
  - CT MaxilloFacial with out contrast

Diagnosis with ICDA codes \_\_\_\_\_  
CPT codes \_\_\_\_\_

# Cranio-maxillofacial CT Scanning Protocol



Thank you for taking a moment to read this protocol. The quality of the CT scan is the most important aspect of creating case-specific anatomical models. Your observation of the recommendations made in this protocol will have a significant impact on the accuracy of the final model. Please do not hesitate to contact Medical Modeling toll free at 888.781.8177 with any questions or prior to using this protocol for the first time.

## Craniomaxillofacial

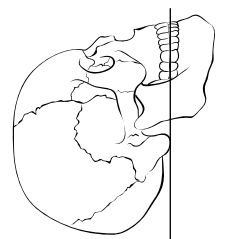
### Please keep in mind the following key points

- Acquire scans at a high spatial resolution. Series should be acquired with thin, contiguous image slices (<2.0mm, 0.75 – 1.25mm is preferred) and as small a field of view (FOV) as possible while still including the patient's external contour. Patient must remain completely still through the entire scan. If patient motion occurs the scan must be restarted.
- Image distortion from patient motion will severely compromise the accuracy of a model. Please ensure that scans are free from motion artifact.
- Do not use a gantry tilt in scanning patients.
- Image artifact caused by metallic implants can obscure anatomy of interest. Please take steps to minimize artifact from the presence of metal. It is useful to position the patient so that the occlusal plane is parallel to the image plane (see figure). This can help to limit artifact from metallic dental restorations to the region around the teeth.
- Archive the entire study, preferably in DICOM format, to a removable medium such as Sony / MaxOptix optical disk, Pioneer optical disk, 4 or 8mm DAT, or CD-R. Many of the older proprietary image formats (for example GE Advantage, Picker, Philips) can be supported but the most reliable method of image transfer is DICOM format on CD-R. It is also possible to transfer image data via computer network. Please contact Medical Modeling at 888.781.8177 for details.

### Example image protocols for cranio-maxillofacial study

- Acquisition: Helical
- FOV: 25.0 cm
- Gantry tilt 0°
- Scan spacing 1.0 mm
- Slice thickness 1.0 mm
- Algorithm Standard (not bone or detail)
- Pitch 1:1

### Patient positioning



Occlusal plane should be parallel to the gantry.

Variations on this example are acceptable as long as the above key points are followed. If using a multidetector scanner please be sure to reconstruct images at thin sections (<2.0mm, 0.75 – 1.25mm is preferred).

If using a single slice scanner please do not reconstruct images to slices that are thinner than the original acquisition. This simply interpolates between slices and does not improve the resolution of the exam. If using a single slice scanner please scan the patient with the thinnest slice thickness possible (<2.0mm, 0.75 – 1.25mm is preferred).

Medical Modeling can import image data from most mainstream CT scanners and PACS systems and most storage media. Please call us at 888.781.8177 if you have questions about the ability to read images from your equipment.

### Shipping Information

Medical Modeling LLC  
17301 West Colfax Avenue, Suite 300  
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Phone: 888.781.8177  
Fax: 303.273.6463

Web Site: [www.medicalmodeling.com](http://www.medicalmodeling.com)  
E-mail: [info@medicalmodeling.com](mailto:info@medicalmodeling.com)

### DICOM Internet Transfer

Please call to set up an account for pushing DICOM images over the internet to our server.

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