## **Raymond B. Meandro, D.D.S., M.S.**

**Specialist in Orthodontics**

**236 South Street, Pittsfield, MA 01201**

**(413) 499-7266**

[**meandro1@verizon.net**](mailto:meandro1@verizon.net)

This is to introduce \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Referred by \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Please check all that apply (if emailing, put “X” after those that apply):

|  |  |
| --- | --- |
| * Class I Malocclusion | * Midline Shift |
| * Class II Malocclusion | * Anterior Open Bite |
| * Class III Malocclusion | * Posterior Open Bite |
| * Anterior Crossbite | * Congenitally Missing Tooth or Teeth #\_\_\_\_\_\_\_ |
| * Posterior Crossbite | * Impacted Tooth or Teeth #\_\_\_\_\_\_\_ |
| * Excessive Overbite | * Abnormal Eruption |
| * Excessive Overjet | * For possible Surgical Orthodontics |
| * Crowding | * Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |