

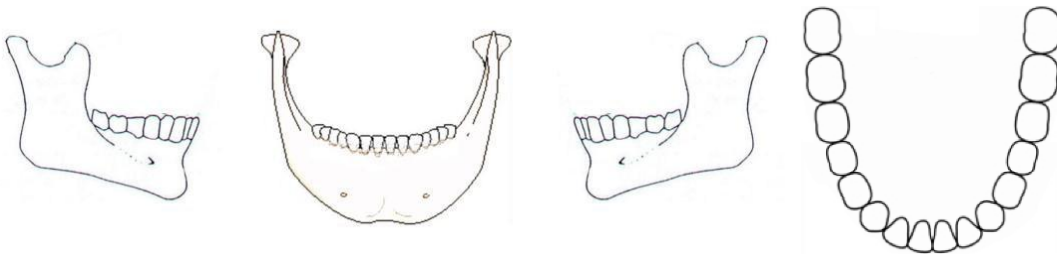
AccuPlan® - Reconstruction

501 Second Ave., Suite A-1000 · Dallas, TX 75226 · U.S.A. · (214) 453-8864 · www.medcad.net

Surgeon Name: _____
 Hospital: _____
 Sales Representative: _____ Distributor: _____
 Contact Phone No.: _____
 Email: _____
 Patient Name or ID: _____
 Date of CT Scan: _____ Surgery Date: _____
 Ship To (Name): _____
 Street Address: _____
 City, State, Zip code: _____
 Country: _____

Please indicate the predicted resection on the images below.

Mandible



Midface



Graft Plan

Please select the graft bone and indicate how many segments you expect to use for your procedure.

<input type="checkbox"/> Fibula	<input type="checkbox"/> Iliac Crest	<input type="checkbox"/> Scapula	<input type="checkbox"/> Other _____
___ Left	___ Left	___ Left	___ Left
___ Right	___ Right	___ Right	___ Right
___ No. of segments	___ No. of segments	___ No. of segments	___ No. of segments

CT data is: Patient specific Generic TBD

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Surgical planning

1. Recipient vessels connect to: Right neck Left neck
2. Neck dissection: Open Limited
3. Resection tissue is: Benign Malignant

Please select the products requested for this case:

- Pre-Op Anatomical Model
- Post-Op Anatomical Model
- Graft bone Anatomical Model
- Reconstruction site osteotomy guide(s)
- Graft bone osteotomy guide(s)
- Other _____

Special Instructions:
