



TOP END
ORTHODONTICS

Straight Teeth and
Invisible Braces

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Dr. Ashley Freeman

SPECIALIST ORTHODONTIST

BDS DCD(Ortho) AOB(Cert) BBiomedSc BScDent(Hons)
PGDiplImplant FRACDS FICD FPFA

patient name:

DOB

address:

phone:

email:

ORTHODONTIC CONCERNS:

Crowding

Smile aesthetics

Skeletal discrepancy

Spacing

Gummy smile

Pre-restorative management

Deep bite

Attrition

Impacted teeth

Open bite

Crossbite/s

Hypomineralised molars

Overjet

Missing teeth

Other

Further Details:

Radiographs:

Attached

Patient to bring

Emailed

Referring practitioner / practice:

phone:

email:

date:

Appointment:

Patient to contact

TEO to contact patient