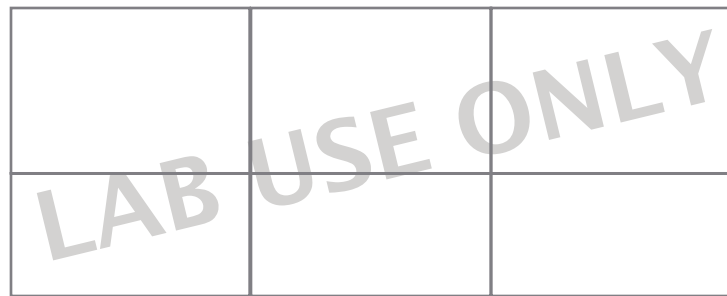


# AOA

Allesee Orthodontic Appliances Phone 1-800-262-5221  
 13931 Spring Street Fax: 262-886-6879  
 Sturtevant, WI 53177 International: 262-886-1050



## Simpli5 and RWB

### 1. Select Appliance

Simpli5 / 5 Tray System

- Upper  Lower  Both

RWB / 3 Tray System

- Upper  Lower  Both

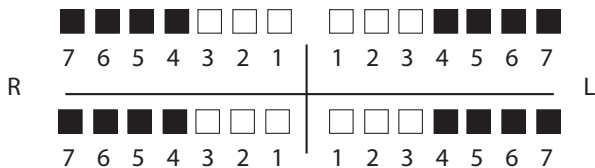
- Diagnostic Set-up (no appliances)

**NOTE: Opposing arch recommended for single arch treatment cases to check occlusion.**

- Opposing arch not included because there is no interference

Dr. \_\_\_\_\_ Acct # \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Patient \_\_\_\_\_  
 Tel # \_\_\_\_\_ Fax # \_\_\_\_\_  
 E-Mail \_\_\_\_\_  
 Shipped \_\_\_\_\_ Placement Date \_\_\_\_\_  
 (PLACEMENT DATE SHOULD BE 1-2 DAYS BEFORE ACTUAL INSERTION DATE)

### 2. Teeth to be reset



- Reset Ideal - call if not feasible  
 Best overall result - (compromised correction)

\* AOA cautions against aggressive repositioning of cuspids, which may compromise overall results

### 5. Stripping

- Strip as necessary and record  
 Strip as indicated below  
 Contacts already stripped  
 Do not strip  
 (stripping standard is .3mm / contact)

R  3  2  1  1  2  3  L

R  3  2  1  1  2  3  L

### 3. Space Closure

- Close space completely  Close space as feasible

- Leave space (indicate teeth below)

Upper Mesial \_\_\_\_\_ Distal \_\_\_\_\_

Lower Mesial \_\_\_\_\_ Distal \_\_\_\_\_

### 6. Position for future restoration

- Add Pontic Shade \_\_\_\_\_  
 Leave space for implant \_\_\_\_\_ mm

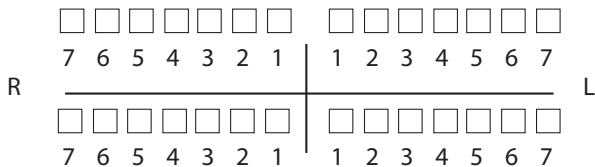
Note details in Special Instructions below

### 7. Blue 2 / Holding Appliance - no set-up

- Upper  Lower  Both

### 4. Attachments (Round shape)

Retention attachments w/bonding trays - Indicate location.  
 Cannot place on teeth being reset



- Add Dura Clasp

### Marketing Materials

- Send complimentary office counter top display kit  
 Send refill pamphlets for display

### Supplies

- Shipping Boxes  Prescription Sheets  
 Pre-Paid Shipping Bags Catalog & Pricing Guide

Submitted scans digitally through:  Lythos  iTero

3M  Box  Other \_\_\_\_\_

### Special Instructions

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Doctor Signature \_\_\_\_\_

4 3 2 1	1 2 3 4	<b>Lab Use Only</b>	4 3 2 1	1 2 3 4
4 3 2 1	1 2 3 4		4 3 2 1	1 2 3 4

**Laboratory Use Only**

IMP \_\_\_\_\_ FV500 \_\_\_\_\_

MATRIX \_\_\_\_\_ FV501 \_\_\_\_\_

DIMP \_\_\_\_\_ FV502 \_\_\_\_\_

DIAG \_\_\_\_\_ FV503 FV504 \_\_\_\_\_

SIMPLI5 \_\_\_\_\_ FV401 FV402 \_\_\_\_\_

\_\_\_\_\_ FV400 \_\_\_\_\_

RWB \_\_\_\_\_ RWB401 RWB402 \_\_\_\_\_

\_\_\_\_\_ RWB403 \_\_\_\_\_

RWII \_\_\_\_\_ RWB404 RWB405 \_\_\_\_\_

B2 \_\_\_\_\_ FV505 \_\_\_\_\_

DL ADD \_\_\_\_\_ FV506 \_\_\_\_\_

BP \_\_\_\_\_ FV507 \_\_\_\_\_

REFINEMENTS:

SIMPLI5/RWB \_\_\_\_\_ FV508 \_\_\_\_\_

RWII \_\_\_\_\_ FV509 \_\_\_\_\_

POSTAGE \_\_\_\_\_

**RECEIVING**

**SHIPPING**

Open \_\_\_\_\_ Dept. ✓ \_\_\_\_\_

Dept. ✓ \_\_\_\_\_