


LAB USE ONLY

**Retainer Rx**

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)**

**Please Ship Extra**

Pre-Paid Bags     Shipping Boxes     Prescription Sheets

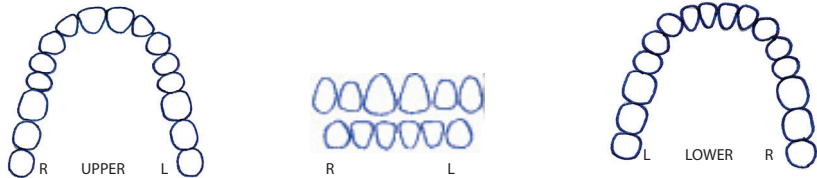
**Submitted scans digitally through:**

Lythos     iTero     3M     Box     Other \_\_\_\_\_

**(Submit digital Rx to: [digital.services@aolab.com](mailto:digital.services@aolab.com))**

**Special Instructions**

**Instructional Drawing**



Lab Use Only

3	2	1	1	2	3
3	2	1	1	2	3

APPLIANCE PROTECTION PLAN:

YES

NO

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

**1. Spring Retainers**

**Please mark set-up below**

Spring Retainer (Cuspid to Cuspid)	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
Spring Retainer with Wire Extensions	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
Modified Design	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
Modified Design with Helix Coils	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
Modified Design with Mushroom Spring	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
Super Modified	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
Pro-Active Series I	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
Pro-Active Series II	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
Pro-Active Series III	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower

**2. Reset teeth** - indicate on diagram

<input type="checkbox"/> Do Not Reset	<input type="checkbox"/> Strip if Needed	<table style="border-collapse: collapse;"> <tr> <td style="border: none; padding: 0 10px;">R</td> <td style="border: none; padding: 0 5px;"> <table style="border-collapse: collapse; text-align: center;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: none; padding: 0 5px;"> </td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> <tr> <td style="border: none; padding: 0 5px;">2</td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none;"></td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none; padding: 0 5px;">2</td> </tr> <tr> <td style="border: none; padding: 0 5px;">2</td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none;"></td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none; padding: 0 5px;">2</td> </tr> <tr> <td style="border: none; padding: 0 5px;"> <table style="border-collapse: collapse; text-align: center;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> </table> </td> <td style="border: none; padding: 0 5px;"> <table style="border-collapse: collapse; text-align: center;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> </table> </td> </tr> </table> </td> <td style="border: none; padding: 0 10px;">L</td> </tr> </table>	R	<table style="border-collapse: collapse; text-align: center;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: none; padding: 0 5px;"> </td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> <tr> <td style="border: none; padding: 0 5px;">2</td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none;"></td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none; padding: 0 5px;">2</td> </tr> <tr> <td style="border: none; padding: 0 5px;">2</td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none;"></td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none; padding: 0 5px;">2</td> </tr> <tr> <td style="border: none; padding: 0 5px;"> <table style="border-collapse: collapse; text-align: center;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> </table> </td> <td style="border: none; padding: 0 5px;"> <table style="border-collapse: collapse; text-align: center;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> </table> </td> </tr> </table>						2	1		1	2	2	1		1	2	<table style="border-collapse: collapse; text-align: center;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> </table>			<table style="border-collapse: collapse; text-align: center;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> </table>			L
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<input type="checkbox"/> Reset as Feasible	<input type="checkbox"/> Strip all Contacts																									
<input type="checkbox"/> Reset Ideal	<input type="checkbox"/> No Stripping																									

**3. Adaptor**

Standard Adaptor with Alastiks	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower																												
Adaptor with NiTi Coil Springs	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower																												
Reset	<table style="display: inline-table; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> <td style="border: 1px solid black; width: 15px; height: 15px;"></td> </tr> <tr> <td style="border: none; padding: 0 5px;">7</td> <td style="border: none; padding: 0 5px;">6</td> <td style="border: none; padding: 0 5px;">5</td> <td style="border: none; padding: 0 5px;">4</td> <td style="border: none; padding: 0 5px;">3</td> <td style="border: none; padding: 0 5px;">2</td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none; padding: 0 5px;">1</td> <td style="border: none; padding: 0 5px;">2</td> <td style="border: none; padding: 0 5px;">3</td> <td style="border: none; padding: 0 5px;">4</td> <td style="border: none; padding: 0 5px;">5</td> <td style="border: none; padding: 0 5px;">6</td> <td style="border: none; padding: 0 5px;">7</td> </tr> </table>												7	6	5	4	3	2	1	1	2	3	4	5	6	7				
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7	6	5	4	3	2	1	1	2	3	4	5	6	7																	

**4. Hawley Retainers**

Traditional Hawley	QCM Hawley	Ball Clasps	<input type="checkbox"/> Upper	<input type="checkbox"/> Lower
<input type="checkbox"/> Upper	<input type="checkbox"/> Upper	Adams Clasps	<input type="checkbox"/>	<input type="checkbox"/>
<input type="checkbox"/> Lower	<input type="checkbox"/> Lower	"C" Clasps	<input type="checkbox"/>	<input type="checkbox"/>
Options	U    L	Sage Clasps	<input type="checkbox"/>	<input type="checkbox"/>
Flat wire bow	<input type="checkbox"/> <input type="checkbox"/>	Dunn Clasps	<input type="checkbox"/>	<input type="checkbox"/>
Ricketts bow	<input type="checkbox"/> <input type="checkbox"/>	Soldered "C" to Bicuspid	<input type="checkbox"/>	<input type="checkbox"/>

Wraparound Hawley	Wraparound Soldered to Clasps	Stabilizer wires - Between	<input type="checkbox"/> 2-3	<input type="checkbox"/> 3-4	<input type="checkbox"/> 4-5
<input type="checkbox"/> Upper		Options		U	L
<input type="checkbox"/> Lower	Adams	Flat wire bow	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	"C" Clasps				

**5. Trim - Acrylic**

<input type="checkbox"/> Scalloped anterior	<input type="checkbox"/> Clear
<input type="checkbox"/> Anterior Bite Plane	<input type="checkbox"/> Pink Tint
<input type="checkbox"/> Posterior Bite Plane	
<input type="checkbox"/> Horseshoe Trim	<input type="checkbox"/> Color(s) _____
<input type="checkbox"/> Modified Horseshoe Trim	<input type="checkbox"/> Glitter(s) _____
<input type="checkbox"/> Acrylic on Labial Bow	<input type="checkbox"/> Designer _____ (Upper Only)
<input type="checkbox"/> Add Pontic(s) Shade _____	

**6. Full Arch Invisible Retainer**

Upper     Lower     .030     .040     Duraclear .030

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



**Laboratory Use Only**

HAW \_\_\_\_\_

SP \_\_\_\_\_

SU \_\_\_\_\_

SPL \_\_\_\_\_

PTC \_\_\_\_\_

ACRY \_\_\_\_\_

AAC \_\_\_\_\_

AAC \_\_\_\_\_

AAC \_\_\_\_\_

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SHIP \_\_\_\_\_