

Retainer Appliance Form



RICOH ORTHODONTIC APPLIANCES

Doctor: _____
 Address: _____
 City: _____ State: _____ Zip: _____ Telephone: _____
 Patient Name: _____
 Date Shipped: _____ Date Needed: _____

Office Use:
 Date Received: _____
 Models: _____
 Upper Lower Both
 Impressions: _____
 Upper Lower Both
 Bands _____ Crowns _____

Retainers

- | | U | L |
|------------------------------------|-----------------------|-----------------------|
| Hawley w/ 1 set of Clasps C clasps | <input type="radio"/> | <input type="radio"/> |
| Wrap around Labial Wire | <input type="radio"/> | <input type="radio"/> |
| Wrap around With Bite plane | <input type="radio"/> | <input type="radio"/> |
| Labial bow soldered to clasps | <input type="radio"/> | <input type="radio"/> |
| Flat bow Labial wire | <input type="radio"/> | <input type="radio"/> |
| * Clear Bow | <input type="radio"/> | <input type="radio"/> |
| QMC Arch Wire | <input type="radio"/> | <input type="radio"/> |
| Tooth Aligner | <input type="radio"/> | <input type="radio"/> |
| Invisible Retainer | <input type="radio"/> | <input type="radio"/> |

Spring Retainers

- | | | |
|-----------------------------------|-----------------------|-----------------------|
| Cuspid to Cuspid | <input type="radio"/> | <input type="radio"/> |
| Bicuspid to Bicuspid | <input type="radio"/> | <input type="radio"/> |
| Spring Hawley Combination 3x3 | <input type="radio"/> | <input type="radio"/> |
| Spring Hawley Combination 4x4 | <input type="radio"/> | <input type="radio"/> |
| Spring Hawley With Helix colix | <input type="radio"/> | <input type="radio"/> |
| Spring Hawley Wrap Around | <input type="radio"/> | <input type="radio"/> |
| Spring Hawley Labial bow soldered | <input type="radio"/> | <input type="radio"/> |

Reset teeth circled on diagram below

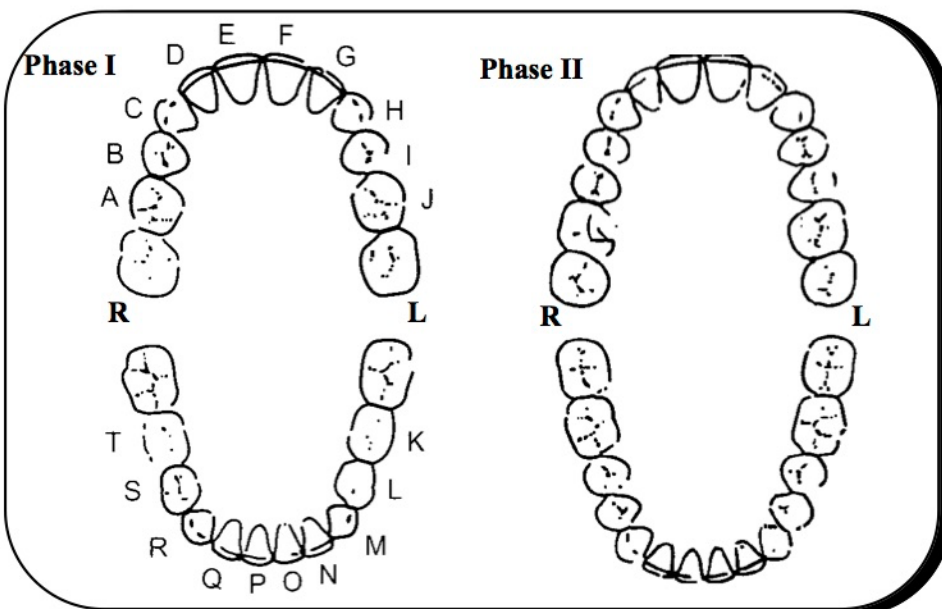
R	3	2	1	1	2	3	L
	3	2	1	1	2	3	

Expanders

- | | | |
|---------------------------|-----------------------|-----------------------|
| Schwartz Plate 1 screw | <input type="radio"/> | <input type="radio"/> |
| Schwartz Plate 2 screws | <input type="radio"/> | <input type="radio"/> |
| Standard Sagital 2 screws | <input type="radio"/> | <input type="radio"/> |
| Standard Sagital 3 screws | <input type="radio"/> | <input type="radio"/> |
| Fan type screw | <input type="radio"/> | <input type="radio"/> |
| Bertoni Three way screw | <input type="radio"/> | <input type="radio"/> |
| Occlusal coverage | <input type="radio"/> | <input type="radio"/> |

Digital Files

- | | | |
|---------------------------|-----------------------|-----------------------|
| Scan models | <input type="radio"/> | <input type="radio"/> |
| Print model | <input type="radio"/> | <input type="radio"/> |
| Send STL files. | <input type="radio"/> | <input type="radio"/> |
| Email Address _____@_____ | | |



Accessories

- | | U | L |
|---------------------------------|-----------------------|-----------------------|
| Adams clasps (no extra charge) | <input type="radio"/> | <input type="radio"/> |
| "C" or Ball clasps (circle one) | <input type="radio"/> | <input type="radio"/> |
| Finger springs | <input type="radio"/> | <input type="radio"/> |
| Soldered Springs | <input type="radio"/> | <input type="radio"/> |
| Soldered Hooks | <input type="radio"/> | <input type="radio"/> |
| Add arch wire tubes | <input type="radio"/> | <input type="radio"/> |
| Add Hg Tubes | <input type="radio"/> | <input type="radio"/> |
| Add Face Mask Hooks | <input type="radio"/> | <input type="radio"/> |

Acrylic Options

- | | | |
|---------------------------|-----------------------|-----------------------|
| Horseshoe palate | <input type="radio"/> | <input type="radio"/> |
| Scallop Anterior | <input type="radio"/> | <input type="radio"/> |
| Add acrylic on labial bow | <input type="radio"/> | <input type="radio"/> |
| Anterior Bite Plane | <input type="radio"/> | <input type="radio"/> |
| Posterior Bite Plane | <input type="radio"/> | <input type="radio"/> |
| Pontic Shade: _____ | | |
| Acrylic Color: _____ | | |
| Acrylic Design: _____ | | |

Splints

- | | U | L |
|-------------------------------|-----------------------|-----------------------|
| Anterior Repositioning Splint | <input type="radio"/> | <input type="radio"/> |
| Flat Occlusal Splint | <input type="radio"/> | <input type="radio"/> |
| Custom Sports Mouth guard | <input type="radio"/> | <input type="radio"/> |
| Night Guard | <input type="radio"/> | <input type="radio"/> |
| Dual Laminate | <input type="radio"/> | <input type="radio"/> |

Bonded Retainers

- | | | |
|----------------------------|-----------------------|-----------------------|
| Central-central | <input type="radio"/> | <input type="radio"/> |
| Lateral-Lateral | <input type="radio"/> | <input type="radio"/> |
| Cuspid-Cuspid | <input type="radio"/> | <input type="radio"/> |
| Mesh pads on distal tooth | <input type="radio"/> | <input type="radio"/> |
| Mesh pads on each tooth | <input type="radio"/> | <input type="radio"/> |
| Appliance w/ Transfer tray | <input type="radio"/> | <input type="radio"/> |

Doctor Signature:

Special Instructions:
