



Allesee Orthodontic Appliances

COMMUNICATION CENTER
1-800-262-5221

AOA Wisconsin

13931 Spring Street
Sturtevant, WI 53177
Fax 262-886-6879

AOA Connecticut

6 Niblick Road
Enfield, CT 06082
Fax 860-741-7655

AOA California

341 E. First Street
Calexico, CA 92231
Fax 760-357-9488

INTERNATIONAL # 262-886-1050

Bionator

- To Open
 To Close
 To Maintain
 Sondhi Bionator

Midline Screw

Yes No

Orthopedic Corrector

- To Open
 To Close
 To Maintain

Midline Screw

Yes No

Schwarz Plate

- Upper Fan screw
 Nord Design
 Lower

Occlusal Coverage

Upper Yes No
Lower Yes No

Twin Block

- Standard – Upper Midline Screw
 Lower McNamara design
 McNamara design
 Add lower exp screw
 Standard Type II – Upper and Lower midline Screw
 Omit Midline Screw(s)

MARA – Standard Design Includes

Lingual Arch and 1st Molar Crowns with .022 Archwire Tubes

- Upper Expansion Screw
 AOA Mini Screw
 Trans Palatal Arch
 Occlusal Wire Rests _____
 Buccal Shields
 Occlusal Holes
 Standard 2/3 Crown

Sagittal Plate

- Upper
 Lower
 Class III – Lip Pads
 Add Midline Screw

Occlusal Coverage

Upper Yes No
Lower Yes No

Activators

- LSU
 Hamilton Expansion Activator
 Stockli-Teuscher
 Torquing Spring Labial Bow
 Woodside Open Face
Headgear Tubes .045 .051

Frankel

- FR I FR II
 FR III FR IV
 Alternate Relief Rt _____ Lt _____
 Standard Model Prep. Do Not Prep Models
 Lower Molar Rests Advancement Screws
 Disc Teeth Distal c's and Distal e's

Intrusion Appliances

- AVC – Active Vertical Corrector
 Add RPE Enclose Soft Chin Cup
 Woodside Spring Intrusion Splint

Jackson Expander

Upper Lower

LAB USE ONLY		

FUNCTIONAL R_x

Dr. _____ Acct. # _____

Address _____

City St Zip _____

Patient _____

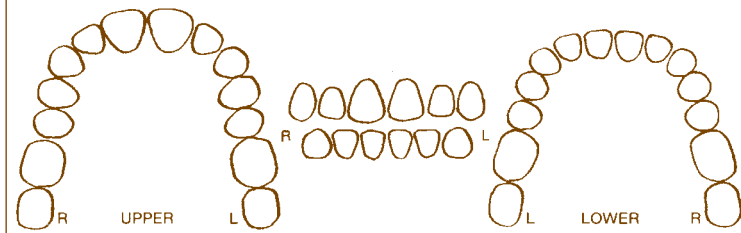
Tel _____ Fax # _____

E-mail _____

Shipped _____ Placement Date _____

(PLACEMENT DATE SHOULD BE 1-2 DAYS BEFORE ACTUAL INSERTION DATE)

PLEASE WRITE SPECIAL INSTRUCTIONS



Clasps

- Adams Arrow
 Ball Other _____

Labial Bow

- Standard
 Buccinator

Headgear Tubes

- .045
 .051

Acrylic

- Pink Tint
 Clear
PRO-PAL Series
 Color(s) _____ Glitter(s) _____
 Designer Series _____
 Custom Design Include Picture

Wax Relief

- Lower Anterior Lingual
 Lower Posterior Lingual
 Lower Occlusal
 Upper Anterior

Carve Brackets/Bands

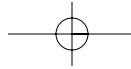
Yes No

PLEASE SHIP EXTRA:

- SHIPPING BOXES
 PRE-PAID BAGS
 PRESCRIPTION SHEETS

APPLIANCE PROTECTION PLAN:

- YES
 NO



Laboratory Use Only

FR _____

ACT _____

BIO _____

SAS _____

SAT _____

MA _____

AVC _____

JAS _____

TB _____

COLOR _____

AUX _____

POSTAGE _____

RECEIVING

OPEN _____

ID _____

DATE _____

ENTER _____

PULL _____

STAPLE _____

SHIPPING

PULL _____

LAYOUT _____

PACK _____

SHIP _____

CHECK _____

