



**Allesee Orthodontic Appliances**

**COMMUNICATION CENTER**

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Calexico, CA 92231  
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INTERNATIONAL # 262-886-1050

- CLASS**® (Requires Diagnostic Set-up for Bracket Positioning)
- TARG** (Brackets Positioned directly onto Malocclusion Model Omit Set-up instructions for this service.)
- STb** (No Set-up)  Full Arch  Social 6 (w/starting wire)
  - Upper  Lower

**CLASS**® Instructions

- Reset all teeth
- Reset only indicated teeth

7 6 5 4 3 2 1	1 2 3 4 5 6 7
7 6 5 4 3 2 1	1 2 3 4 5 6 7

**Anterior Overbite**

- Ideal
- Increase \_\_\_\_ mm
- Decrease \_\_\_\_ mm

**Anterior Overjet**

- Ideal
- Maintain
- Set to \_\_\_\_ mm

**Anterior Root Torque**  
**Upper Lower**

- Maintain  Maintain
- Increase  Increase
- Decrease  Decrease

**Arch Form**  
**Upper Lower**

- Maintain  Maintain
- Constrict  Constrict
- Widen  Widen

**Indicate interproximal reduction (stripping) on the diagram**

**Arch wire selection - Circle wires needed**

Upper		Lower	
Respond®	.0155	Respond®	.0155
	.0175		.0175
NiTi™	.016	NiTi™	.016
	.018		.018
TMA®	.016	TMA®	.016
	.0175x.0175		.0175x.0175
	.017x.025		.017x.025
St. Steel	.014	St. Steel	.014
	.016		.016
	.018		.018
	.016x.016		.016x.016
	.016x.022		.016x.022
	.017x.025		.017x.025
	.018x.025		.018x.025
D-Rect®	.016x.022	D-Rect®	.016x.022
CuNiTi™.013		CuNiTi™.013	
	.017x.017		.017x.017
	.017x.025		.017x.025

**TARG Instructions**

**AOA Standard Values - please note any desired changes (Generation 7 Bracket Only)**

	Tip	Ht	Torque	
Upper Centrals	5°	-	14°	_____
Laterals	8°	-	7°	_____
Cuspids	10°	+5	-2°	_____
Bicuspid	0°	-	-7°	_____
Molars	0°	-	-10°	_____
Lower Centrals	0°	-	0°	_____
Laterals	0°	-	0°	_____
Cuspids	10°	+5	-7°	_____
1st Bicuspid	0°	-	-12°	_____
2nd Bicuspid	0°	-	-16°	_____
1st Molar	0°	-	-22°	_____
2nd Molar	0°	-	-27°	_____

Please note any changes desired in the above table by crossing out and adding new value to be used.



This appliance manufactured only in Wisconsin

**LINGUAL INDIRECT R**

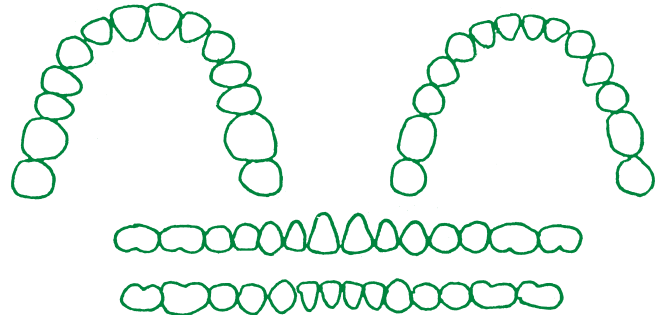
Dr. \_\_\_\_\_ Acct. # \_\_\_\_\_  
 Address \_\_\_\_\_  
 City St Zip \_\_\_\_\_  
 Patient \_\_\_\_\_  
 Tel \_\_\_\_\_ Fax # \_\_\_\_\_  
 E-mail \_\_\_\_\_  
 Shipped \_\_\_\_\_ Placement Date \_\_\_\_\_  
 (PLACEMENT DATE SHOULD BE 1-2 DAYS BEFORE ACTUAL INSERTION DATE)

**PLEASE WRITE SPECIAL INSTRUCTIONS**

**BRACKET CHOICE**

- STb  Standard Torque  High Torque  Select most Suitable
- Ormco Generation 7

- Return Chairside Adhesive  Do Not Provide Adhesive
- Circle teeth that will be banded. Place an "X" on teeth to be extracted or missing. Indicate overcorrections by using arrows.



- Section trays as shown on diagram above

- Do not section trays

**Slot Size and arches to be treated**

- .018  .022  Upper  Lower

**Indicate Molar Bracket choices on diagram**

TB (Std. Bracket) TT (Terminal Tube) HC (Hinge Cap)

Supply AOA Band w/Bracket Return **weldable** brackets for:



76	67
76	67

*Laboratory Use Only*

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

IB \_\_\_\_\_

MAC \_\_\_\_\_

MAC \_\_\_\_\_

MAC \_\_\_\_\_

SPM \_\_\_\_\_

AAC \_\_\_\_\_

AAC \_\_\_\_\_

\_\_\_\_\_

SHIP \_\_\_\_\_

**RECEIVING**

OPEN \_\_\_\_\_

ID \_\_\_\_\_

DATE \_\_\_\_\_

ENTER \_\_\_\_\_

PULL \_\_\_\_\_

**SHIPPING**

PULL \_\_\_\_\_

LAYOUT \_\_\_\_\_

PACK \_\_\_\_\_

SHIP \_\_\_\_\_

CHECK \_\_\_\_\_