



**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  
 AOA CALIFORNIA 341 E. First Street Calexico, CA 92231

INTERNATIONAL # 262-886-1050

**RAPID PALATAL EXPANDER**

- Upper  Lower  
 2 Arm  4 Arm  
 Mini  Standard  Haas  
 Ratchet  Ratchet  Acrylic Bonded  
 Arnold/E-Arch  Super Screw  
 Fan Expander

**QUAD HELIX APPLIANCE**

- Upper  Lower  
 Fixed  Removable  Bi-Helix  Quad

**Distalizing & Expansion Appliances**

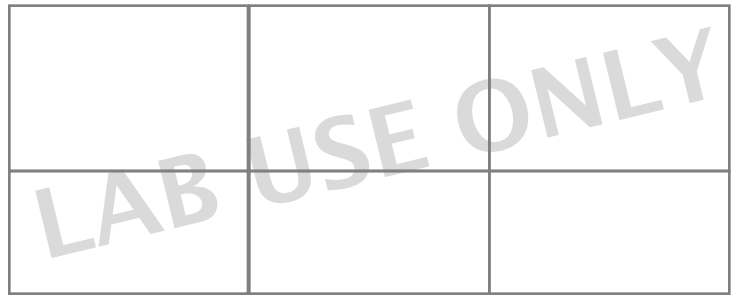
- Hilgers Pendulum - no expansion screw  
 Hilgers Pendex - expansion screw  
 Hilgers T-REX expansion screw & locking wires  
 Hilgers Phd - all metal framework for expansion & distalization  
 Tracey / Hilgers MDA - all metal designed with AOA Mini RPE  
 Mayes Penguin - removable TMA springs for distalization  
 \_\_\_\_\_

**HABIT APPLIANCE**

- Vertical Crib  Bluegrass Tongue Trainer  
 Palatal Crib (not vertical)  Hayrake - Palatal with spurs  
 Combination Crib (palatal and vertical)

**METAL ACCESSORIES**

- Arch Wire Tubes \_\_\_\_\_ Size  
 Face Mask Hooks  
 Whip Springs  Rests  
 Edge Wise Brackets  Buccal De-bonding loops  
 Extentions to the \_\_\_\_\_



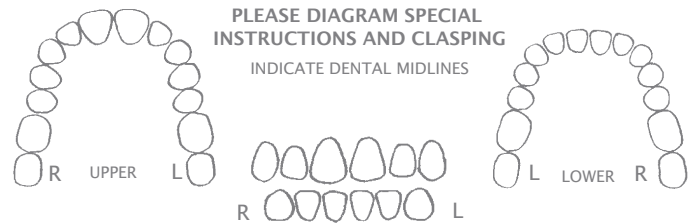
**Metal R<sub>x</sub>**

Dr. \_\_\_\_\_ Acct. # \_\_\_\_\_  
 Address \_\_\_\_\_  
 City, State, Zip \_\_\_\_\_  
 Patient \_\_\_\_\_  
 Tel # \_\_\_\_\_ Fax # \_\_\_\_\_  
 Email \_\_\_\_\_  
 Shipped \_\_\_\_\_ Placement Date \_\_\_\_\_

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

NOTES:

**METAL INSTRUCTIONAL DRAWINGS**



**SPACE MAINTAINERS**

- Upper  Lower  
 Banded Lingual Arch  Band & Loop  
 Add Adjustment Loops  Upper Nance Button  
 Removable  Upper TPA - Palatal bow

**FIXED RETAINERS**

- Kiddy Partial - Pontic Shade \_\_\_\_\_  
 E-Z Bond Retainer  
 Mesh Pad Bonded - pads on cuspids  
 Composite pads all anteriors  
 M.C.L.R. (Krause) indicate mesh pads on diagram)  
 Include Transfer Tray

**ACRYLIC COLORS**

- Clear  Pink Tint  
 Colors \_\_\_\_\_

- Please Ship Extra  
 Pre-Paid Bags  
 Shipping Boxes  
 Prescription Sheets

*Laboratory Use Only*

FE \_\_\_\_\_

LED \_\_\_\_\_

HAB \_\_\_\_\_

SPM \_\_\_\_\_

SPR \_\_\_\_\_

HIL \_\_\_\_\_

TR \_\_\_\_\_

WIL \_\_\_\_\_

MAC \_\_\_\_\_

MAC \_\_\_\_\_

AAC \_\_\_\_\_

AAC \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

SHIP \_\_\_\_\_

**RECEIVING**

OPEN \_\_\_\_\_

ID \_\_\_\_\_

DATE \_\_\_\_\_

ENTER \_\_\_\_\_

PULL \_\_\_\_\_

**SHIPPING**

PULL \_\_\_\_\_

LAYOUT \_\_\_\_\_

PACK \_\_\_\_\_

SHIP \_\_\_\_\_

CHECK \_\_\_\_\_