



**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

**SET UP INSTRUCTIONS**

- Duplicate our Models
- Retain upper 1st molar bands
- Allow for lower/upper retainer
- Carve brackets and bands
- DO NOT CARVE BRACKETS & BANDS**
- PRE TREATMENT DIAGNOSTIC SET UP**
- DO NOT PROCESS SET UP**

Reset all Teeth

Reset only Circled Teeth

R	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	L
	8 7 6 5 4 3 2 1	1 2 3 4 5 6 7 8	

**Space Closure**

- Close Completely
- Close as Feasible
- Leave Space Distal to \_\_\_\_\_
- Leave Space Between \_\_\_\_\_

**Anterior Overbite**

- Ideal 1-2 MM
- Maintain
- Set to \_\_\_\_\_ mm

**Anterior Overjet**

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

**Anterior Root Torque**

- |  |  |
|--|--|
| Upper                                  | Lower                                  |
| <input type="checkbox"/> Maintain      | <input type="checkbox"/> Maintain      |
| <input type="checkbox"/> Lingual _____ | <input type="checkbox"/> Lingual _____ |
| <input type="checkbox"/> Labial _____  | <input type="checkbox"/> Labial _____  |

**Occlusal Plane**

- Maintain
- Flat
- Curve of Spee \_\_\_\_\_

**Arch Width**

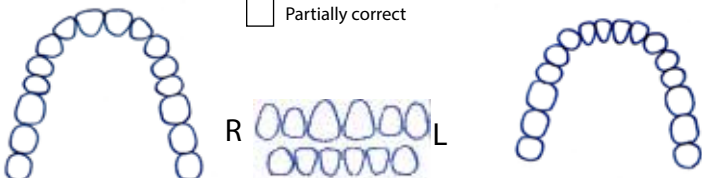
- |                                    |                                    |
|------------------------------------|------------------------------------|
| Upper                              | Lower                              |
| <input type="checkbox"/> Maintain  | <input type="checkbox"/> Maintain  |
| <input type="checkbox"/> Constrict | <input type="checkbox"/> Constrict |
| <input type="checkbox"/> Widen     | <input type="checkbox"/> Widen     |

**ARTICULATION**

- Articulation
- Average bite opening
  - Hinge Axis Tracing
  - Gnathological Set-up
  - Roth / Gordon Technique
  - Sam  Denar  Panadent
  - High Post Panadent  Quick Split
  - Other \_\_\_\_\_ Magnets

PLEASE DIAGRAM SPECIAL INSTRUCTIONS

- Set midlines on
- Set as marked
- Partially correct



R UPPER L

L LOWER R


**POSITIONER Rx** BENCH, GHATHO & ROTH

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)

Special Instructions \_\_\_\_\_

**MATERIAL OPTIONS**

**Silicone - Thermal Cured**

- PRO-Flex (medium clear)
- ImPak - Clear Acrylic rigid at room temperature.

**Flexclear - Clear Vinyl**

- Soft  Medium

- Elast-Acryl - Slightly more flexible than ImPak.

(Pre-soften both with hot tap water prior to seating.)

**Trimming Requirements**

- |  |                                   |
|--|-----------------------------------|
| <b>Height</b>  | <b>Thickness</b>                  |
| <input type="checkbox"/> Standard                        | <input type="checkbox"/> Standard |
| <input type="checkbox"/> High                            | <input type="checkbox"/> Thick    |
| <input type="checkbox"/> Short                           | <input type="checkbox"/> Thin     |
| <input type="checkbox"/> Roth Style (short in posterior) |                                   |

**Options Available**

- AirHoles - 3 or 5 (circle)
- Serrations
- Ball Clasps

End appliance Distal to

6   6	7   7	8   8
6   6	7   7	8   8

Location for Clasps

7 6 5   5 6 7	R	L
7 6 5   5 6 7		

**ROTH / GORDON OPTIONS**

**C.R. Registration**

- Two Piece Power
- Other \_\_\_\_\_

**Facebook Transfer**

- Estimated
- True Hinge

**Side Shift**

Right \_\_\_\_\_ Left \_\_\_\_\_

**Angle of Eminence**

Right \_\_\_\_\_ Left \_\_\_\_\_

PLEASE SHIP EXTRA:

- PRE-PAID BAGS
- SHIPPING BOXES
- PRESCRIPTION SHEETS

**Laboratory Use Only**

POS STD \_\_\_\_\_

SU PSU \_\_\_\_\_

DUP AUX \_\_\_\_\_

IMP AUX \_\_\_\_\_

DEB AUX \_\_\_\_\_

WAX AUX \_\_\_\_\_

HAT PSU \_\_\_\_\_

BALL AUX \_\_\_\_\_

TQ AUX \_\_\_\_\_

MT AUX \_\_\_\_\_

SER AUX \_\_\_\_\_

SPL \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

POSTAGE \_\_\_\_\_

RECEIVING

OPEN \_\_\_\_\_

ID \_\_\_\_\_

DATE \_\_\_\_\_

ENTER \_\_\_\_\_

PULL \_\_\_\_\_

STAPLE \_\_\_\_\_

SHIPPING

PULL \_\_\_\_\_

LAYOUT \_\_\_\_\_

PACK \_\_\_\_\_

SHIP \_\_\_\_\_

CHECK \_\_\_\_\_