

LAB USE ONLY

RETAINER R

PARKLUND ORTHODONTIC LAB

4 ABBOTT PLACE • MILLBURY, MA 01527

(800) 742-9539 • (508) 831-4361 F

WWW.PARKLUNDLABS.COM

Doctor _____

Address _____

City, State, Zip _____

Tel. _____ Fax _____

Patient Name _____

Date Shipped _____ Date Needed _____

PLEASE SEND:

☐ Retainer Rx ☐ Metal Rx

☐ Mailing Labels ☐ Boxes ☐ Call Me

RETAINERS

	Upper	Lower
Hawley w/ Ball Clasps	☐	☐
Hawley w/ "C" Clasps	☐	☐
Hawley w/ Occl. Rest	☐	☐
Hawley w/ Adam Clasps	☐	☐
Hawley w/ Arrow Clasps	☐	☐
Hawley Flat Bow w/ _____ Clasps	☐	☐
Hawley w/Soldered "C" Clasps	☐	☐
Wraparound Round Wire	☐	☐
Wraparound Flat Bow	☐	☐
Wraparound Soldered to Clasps _____	☐	☐
Essix (Invisible Retainer)	☐	☐
Mouth Guards	☐	☐

ACCESSORIES

- | | |
|---|---|
| ☐ Finger Springs | ☐ Habit Crib |
| ☐ Soldered Springs | ☐ Expansion Screw |
| ☐ Soldered Hooks | ☐ Sectional Screw |
| ☐ Holding Spurs | ☐ Lab. Support Wires |

SPRING RETAINERS

	Upper	Lower
Spring Retainer 3x3	☐	☐
3x3 with Wire Extensions	☐	☐
Modified Spring Hawley	☐	☐
Super Modified Spring Hawley	☐	☐
Super Modified with Helical Bow	☐	☐

RESET TEETH CIRCLED on Diagram Below

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

RESETTING/STRIPPING

- | | |
|---|--|
| ☐ Do Not Reset Teeth | ☐ Reset Teeth Ideally |
| ☐ Reset as Feasible | ☐ Do Not Strip Teeth |

SPECIAL INSTRUCTIONS:

ACRYLIC OPTIONS

- | | |
|---|--|
| ☐ Anterior Bite Plane | ☐ Pontics Shade _____ |
| ☐ Posterior Bite Plane | ☐ Custom Design _____ |
| ☐ Add Acrylic to Bow | _____ |

ACRYLIC COLORS

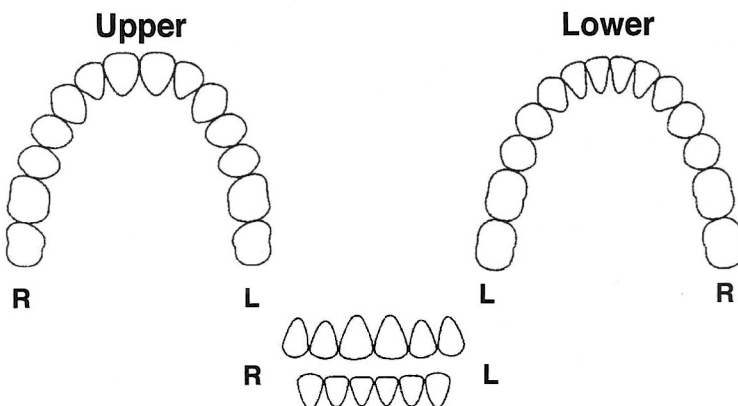
- | | | | |
|---------------------------------|--|--|--|
| ☐ Pink | ☐ Black | ☐ Tropical Purple | ☐ Star Dust Glitter |
| ☐ Clear | ☐ White | ☐ Tropical Pink | ☐ Neon Glow Red |
| ☐ Red | ☐ Teal | ☐ Silver Glitter | ☐ Neon Glow Orange |
| ☐ Orange | ☐ Tropical Red | ☐ Gold Glitter | ☐ Neon Glow Yellow |
| ☐ Yellow | ☐ Tropical Orange | ☐ Red Glitter | ☐ Neon Glow Green |
| ☐ Green | ☐ Tropical Yellow | ☐ Blue Glitter | ☐ Neon Glow Blue |
| ☐ Blue | ☐ Tropical Green | ☐ Purple Glitter | ☐ Neon Glow Pink |
| ☐ Purple | ☐ Tropical Blue | ☐ Multi Glitter | ☐ Neon Glow |

ACTIVE DESIGNS

	Upper	Lower
Sagittal	☐	☐
Schwarz	☐	☐
K-D	☐	☐
Sagittal - Two Screw	☐	☐
Sagittal - Three Screw	☐	☐

SPLINTS

- | | |
|--|--|
| ☐ Gelb / Mora | ☐ Anterior Repositioning Splint |
| ☐ Flat Plane Splint | ☐ Superior Repositioning Splint |



Dr. Signature: _____ License Number: _____

White – Lab Copy

Yellow – Doctor's Copy

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METAL R

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EXPANDERS

- ☐ Rapid Palatal Expander
- ☐ Rapid Palatal Expander - Mini Click
- ☐ Rapid Palatal Expander - Click
- ☐ Super Palatal Expander
- ☐ F.L.E.A. (Fixed Lower Expansion Appliance)
- ☐ Exspider (FAN) Expander
- ☐ Rapid Palatal Expander - HAAS
- ☐ Bondable Rapid Palatal Expander
- ☐ Deluke Expander
- ☐ Spring Jet 1 - Slow Expansion
- ☐ Spring Jet 2 - Rapid Expansion
- ☐ Quad Helix Fixed
- ☐ Quad Helix Removable
- ☐ Expansion W
- ☐ E Arch (Arnold) Expander

MOLAR DISTALIZING

- ☐ Pendulum without Expander
- ☐ Hilgers Pendex with Expander
- ☐ T-Rex with Expanders and Stabilizing Wires
- ☐ Distal Jet
- ☐ Unilateral Distal Jet
- ☐ Hilgers / Tracey Mini Distalizer
- ☐ PHD

ACCESSORIES

- ☐ Fit Bands
- ☐ Face Mask Hooks
- ☐ Occl. Rest
- ☐ Add Crib
- ☐ Archwire Tubes - Size: _____
- ☐ Head Gear Tubes - Size: _____
- ☐ Acrylic Color: _____

HABIT APPLIANCES

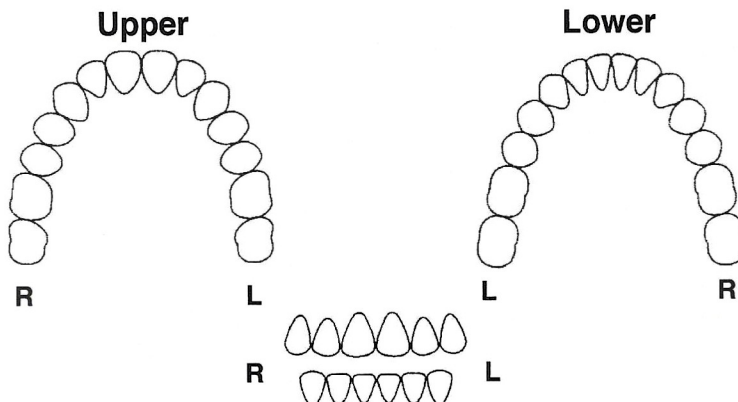
- ☐ Tongue Crib - Vertical (Send Counter Model)
- ☐ Palatal Thumb Crib (Not Vertical)
- ☐ Combination Crib (Palatal and Vertical)
- ☐ Hay Rake - Palatal with Spurs
- ☐ Blue Grass ☐ Lip Bumper

HERBST APPLIANCES

- ☐ Mini Scope Herbst
- ☐ Standard Herbst
- ☐ Hanks Herbst
- ☐ Add RPE
- ☐ Add TPA
- ☐ Lingual Arch
- ☐ Occl. Rests - Draw Placement
- ☐ Applecore Screws
- ☐ Crowns
- ☐ Bands
- ☐ Reinforcement Rings
- ☐ Ultimax Bands
- ☐ Rollo Bands
- ☐ Vent Holes
- ☐ Vert/Horz Slits

SPACE MAINTAINERS

- ☐ Band and Loop
- ☐ Lingual Arch Fixed - 6-6 ☐ with or ☐ without Loops
- ☐ Lingual Arch Removable - 6-6 ☐ with or ☐ without Loops
- ☐ Transpalatal Arch Fixed
- ☐ Transpalatal Arch Removable
- ☐ Nance Appliance
- ☐ Fixed BP



SPECIAL INSTRUCTIONS: _____

Dr. Signature: _____ License Number: _____

White - Lab Copy

Yellow - Doctor's Copy