

## **ELASTICS INSTRUCTIONS**

Elastics (rubber bands) are used to generate a gentle but continuous force to help in the movement of individual teeth in order to coordinate the fit of the upper and lower dental arches. The direction and the force of the elastics may be changed during your treatment depending on the desired movement.

Teeth will move as desired when elastics are worn **consistently and as instructed**. When elastics are worn one day and left off the next, tooth movement does not continue and often no changes take place. Inconsistent elastic wear actually results in soreness and the bone and periodontal structures resisting movement. If you follow the instructions you will get better results in a more comfortable manner, and in a shorter period of time. Wearing the elastics improperly will greatly affect your orthodontic results and extend your treatment time. Non-compliance with elastic wear may result in the use of another bite correction appliance at an additional charge.

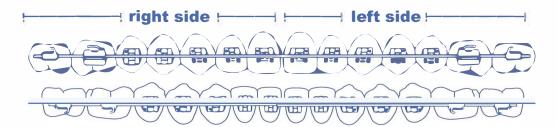
INITIALS

There is often some initial discomfort when elastics are first worn, but this will disappear within a few days with consistent wear. Over-the-counter medication, such as ibuprofen or acetaminophen, may be taken to ease the initial discomfort. You should call the office if you are having trouble placing the elastics or if you experience soreness in the jaw joint.

Elastics lose their elasticity over time and should be changed a few times per day. The elastics may be removed to brush/floss your teeth, eating main meals and playing sports or an instrument. They should be replaced immediately following the activity. Unless otherwise directed, your elastics should be worn **22 hours per day**. The general rule is they may be removed **4 times per day** for no longer than **30 minutes at a time** to maximize tooth movement. Please note elastics are all or none. If you only wear them part-time, they will not be effective.

If you run out of elastics you may stop by our office to pick up more or call us to mail them to you. Do NOT wait for your next visit. This can delay your treatment progress.

### To get the desired results, follow this chart to use your elastics as instructed:



DATE	PATIENT NAME	OFFICE NAME/ ACCOUNT NUMBER	
DATE	SIGNATURE OF PATIENT (IF OVER 18 YEARS) OR PARENT, CO-SIGNER, GUARDIAN OF PATIENT		
DATE	ORTHODONTIST SIGNATURE		



### ABOUT YOUR ORTHODONTIC TREATMENT

You are starting a period of orthodontic treatment that is unlike any medical or dental treatment you have experienced. Orthodontic treatment is unique and your results will depend highly on you. Before we begin treatment, we want to be sure you understand the basic requirements necessary to achieve the best possible results.

**HYGIENE:** During treatment it is extremely important that you keep your teeth absolutely spotless. Poor oral hygiene will result in decalcification spots, cavities, bad breath, and swollen, bleeding gums. We highly recommend the Oral B Braun electric toothbrush, Colgate PhosFlur fluoride rinse and Superfloss. You can enjoy a tremendous discount on these products from our office because we want to promote excellent oral hygiene habits and because treatment time can be reduced significantly with more optimal results.

CONTINUE TO VISIT YOUR DENTIST AT YOUR NORMAL PROTOCOL FOR CLEANINGS AND CAVITY CHECK-UPS DURING YOUR ENTIRE ORTHODONTIC TREATMENT. WE HIGHLY RECOMMEND MORE FREQUENT PROFESSIONAL CLEANINGS EVERY 3 MONTHS WITH YOUR HYGIENIST.

**BREAKAGE**: Avoid any food that is hard, crunchy, sticky, or chewy. These foods may break brackets, loosen bands or damage wires. Limit the size of your bites, as well as how hard you bite down. Broken appliances will result in longer treatment time and added costs. Insurance does not cover breakage. Please call our office to change your appointment as soon as you notice any breakage. Repairs will not be done at your adjustment appointment.

**APPOINTMENTS:** You will be seeing us every 4-8 weeks depending on your specific treatment plan. It is unavoidable that some school or work will be missed. In order to be fair to everyone please:

- 1. Try not to change appointments. If you must, please give 48-hour notice to avoid a \$35 charge per half hour scheduled.
- 2. We allow a 10 minute grace period. If you are later than that, your appointment will need to be rescheduled. Habitual tardiness or cancellation is not acceptable.
- 3. All long appointments are done only in the morning. This includes repairs. Afternoons are for adjustments and short procedures only. Our goal is to accommodate as many families as possible in the afternoon hours. In fairness to all of our student patients, you will have to alternate your appointment times from early to late afternoon.
- 4. A PARENT OR LEGAL GUARDIAN MUST ACCOMPANY PATIENTS UNDER THE AGE OF 18.
- 5. If you have to cancel or no show for an appointment, the next available appointment may not be for several weeks because all of our patients schedule their appointments before they leave the office.
- 6. One of the orthodontic assistants will update you on each visit's treatment and oral hygiene status.

**DISCOMFORT:** Your braces may irritate your lips, cheeks, gums or tongue. We will provide you with wax and show you how to use it. After each adjustment, you may be sore for several days. If needed, an over-the-counter pain medication is best.

**ELASTICS:** You may be asked to wear rubber bands some time during your treatment. These must be worn exactly as instructed. Non-compliance will result in prolonged treatment time.

**EMERGENCIES**: Accidents will happen and occasionally you may need a wire clipped or have something broken. At these times it is extremely important that you call us immediately so we can schedule the appropriate appointment as soon as possible. If our office is closed, please listen to the entire voicemail message as it will direct you to an affiliated office or our after-hours answering service.

**CONTRACT TERMS:** The professional fee for your orthodontic care is determined by your insurance provider and the doctor's estimated treatment time. Please know treatment may extend beyond this time for various reasons: difficulty of the malocclusion, poor compliance with elastic wear, poor oral hygiene, and excessive failed appointments. Additional MONTHLY fees will apply if and when treatment exceeds the estimated active treatment time on the contract.

We are excited that you are entrusting us with the responsibility of providing orthodontic treatment for you or your child. We will do our best to be deserving of your confidence. If these conditions are acceptable to you, please sign below to acknowledge and confirm your review and acceptance of this information and these conditions.

DATE	PATIENT NAME	OFFICE NAME/	OFFICE NAME/ ACCOUNT NUMBER	
DATE	SIGNATURE OF PATIENT (IF OVER 18 YEARS) OR PARENT, CO-SIGNER, GUARDIAN OF PATIENT			
DATE	APPROVAL SIGNATURE		OPTIO TREATMENT BOLIGIES	
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# RETAINER INSTRUCTIONS

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# LakeStone RAPID PALATAL EXPANDER (RPE)

#### Hygiene

Brush the appliance including the metal bars & screw in the same way you brush your teeth. When you are unable to brush after eating, use water swished around in your mouth to help dislodge any food particles.

#### Diet

At first, eating will be more difficult; take small bites & eat soft foods until you adjust (usually a few days to a week). After that, you should be able to eat almost everything you did before with some exceptions.

Stay away from chewy foods (bagels, steak), crunchy foods (popcorn, chips), sticky foods (caramel, gum), hard foods (nuts, hard candies), foods that require biting into (apples, raw carrots) or shearing forces (chicken wings).

#### What to expect

You will notice several things as the expander does its job.

**Speech**- your speech will be affected. This is not permanent & the best way to get used to this is to speak aloud as much as possible; try reading out loud or singing.

**Soreness**- your teeth may be sore for the first few days. You can take over the counter pain relievers to help. However, chewing & talking are the best ways to get your mouth used to this new feeling. Do not SKIP days, because skipping days will only extend the amount of time you experience soreness & may complicate treatment. Pressure or tingling of the mouth, tongue, cheeks & nose.

Your bite will feel off as the width of your palate changes. As the palate expands the teeth will not fit together properly, this is normal.

#### Space between your front teeth

Although this is a good sign from the standpoint of your treatment, it can be disheartening from a cosmetic point of view. By the time you stop turning the screw, the space may look large enough to fit another tooth. This space should close by itself within a short time.

#### **Potential Trouble and Problems**

Please turn the appliance as instructed. Do not continue to activate the appliance beyond this time. At your next appointment, you will be told if your expansion is completed or needs to continue.

The most common problem we see with the RPE is an incomplete activation where the key can not be seated for the next activation. You should see the next hole completely in the RPE when they key is removed. Call us if you have this problem and we will get you in to correct it.

If one of the arms gets bent or is pinching the gum, please call so we can adjust your rpe.

If the RPE ever feels loose, the bands should be cemented and not moving on the teeth. If you feel movement, please call to have the appliance re-cemented.

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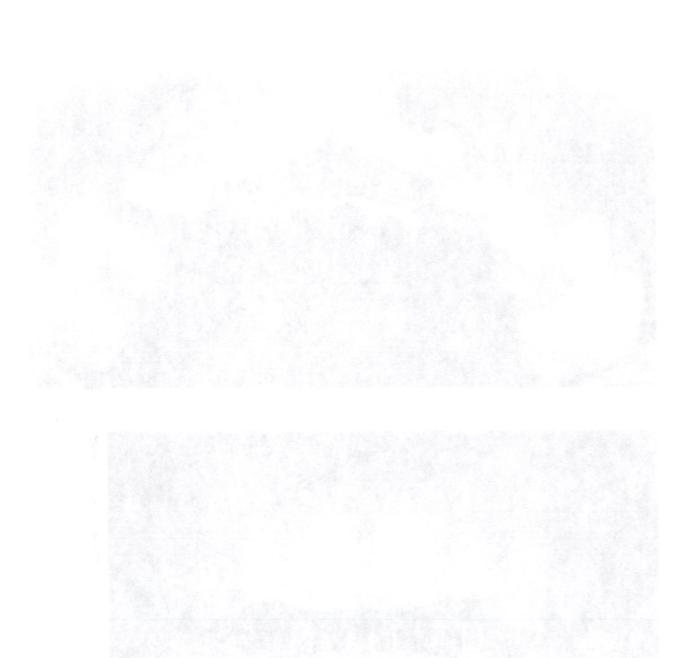
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