

Retainer Instructions

Now that you are in retainers, treatment is in your hands. Wearing your retainer and keeping your smile is a full time job. Retainers are to be worn full time 24/7 they can be removed while brushing, eating and during sports. In time, you may be able to switch to only night time wear by either Dr.Chang or Dr.Chung. You want to treat your retainer like you would your cell phone always have it on you and always keep it in its case. Materials used in fabrication of your retainer are of the highest quality available. The most durable acrylic along with stainless steel wires are used to make your retainer. Acrylic used is porous and needs to be kept clean brush your retainer every time you brush.



Basic Rules and Care

- *Your retainer is handmade and custom designed for YOU, the plastic taste will go away after a few day's
- *Rinse and clean your retainer with cold water NEVER hot, brushing with a toothbrush and toothpaste is ok
- *Safest place for your retainer is IN YOUR MOUTH
- *Losing or breaking your retainer will be costly: replacement retainer fee is \$240 each and a repair can range from \$175-\$240. Make sure you always have your case
- *Call our office immediately if you lose or break your retainer. Replacing in a timely manner will help prevent any shifting of your teeth.

Dogs and other pet's eat retainers make sure your retainer is out of their reach. Never leave your retainer in the sun like in a parked car. Excessive heat will warp and distort your retainer. Always keep your retainer in its case never wrap in a napkin and or tissue. Always take your retainer out before eating or chewing gum.

While participating in contact sports we recommend leaving your retainer out such as baseball, football, soccer, etc. Your retainer case is your best defense when your retainer is not in your mouth. Always have your case with you and in a safe place.

I acknowledge that I have been given a copy of "Retainer Instructions" handout. I have also been shown how to place and remove my retainer. I am clear on the verbal instructions which I have been given.

Patient/Parent Signature: _____ Date: _____

Witness: _____