

International Orthodontic Services 12811 Capricorn St,Stafford, TX 77477 USA Tel:+1 832 342 9487 Fax: +1 281 340 4764 www.iosortho.com info@iosortho.com

## Orthodontic Bands

The following groups of products are covered by this instruction for use:

- Molar Bands (SS 12-4)
- Molar Kits
- Plan Bands



# INSTRUCTIONS FOR USE ENGLISH

## INDICATIONS FOR USE

Bands anchor an appliance to the teeth or secure an archwire to the molars. Used on the molars and in some cases the premolars. Bands come in different sizes and are custom fit to the tooth using the appropriate dental instruments. They are temporally cemented on the teeth with cement designed specifically for the use with bands. Bands have attachments similar to a hook to allow for the use of removable elastics or other attachments. The archwire slides into a small sleeve on the cheek side of the band. This allows for the movement or stabilization of the molars.

#### WARNINGS

Products can contain nickel and/or chromium which have been known to cause sensitivity reactions. Cancer and Reproductive harm. For more information go to www.P65Warnings.ca.gov

All Bands and attachments are single-use devices. Any reuse can risk cross contamination to patients.

All Bands and Attachments are supplied non-sterile.

When using a band pusher, exercise caution to prevent the instrument from slipping form the band, thus injuring the patient's mucous membrane



## PRECAUTIONS

All Bands and Attachments are to be fitted by a trained/qualified Practitioner to ensure accurate fitting. Patients must adhere to the Practitioners recommended hygiene care and check-ups to prevent damage to teeth and Periodontitis from poor hygiene between patient visits. Practitioner is to select the correct band size to ensure precise placement and secure to the teeth for maximum retention.

## INSTRUCTIONS FOR USE - PRACTITIONER/ORTHODONTIST

These devices are sold under prescription/order to qualified Practitioners/Orthodontists and Doctors who are trained in Orthodontic treatment and have knowledge of their use.

The Practitioner/Orthodontist/Dentist makes the determination on the selection of the correct size and shape of the bands for each unique patient treatment to be performed. If any doubts are raised on the treatment plan coordinate with other professionals such as speech pathologists, otolaryngologists, physicians, dentists and/or orthodontists before proceeding. Follow the manufacturer's instructions for any orthodontic cements, instruments or other materials used in the orthodontic treatment.

Use conventional orthodontic band cement following manufacturer's instructions. Place it using the instrument of our choice. Remove excess cement from around the band and from the occlusal of the tooth. • Orthodontic training in standard procedures will determine appropriate instruments for use during appliance placement and removal. • Do not touch bonding surfaces with bare fingers since skin oils may diminish adhesion. • Oral hygiene is of particular importance for immunocompromised patients. Closely monitor oral hygiene on immunocompromised patients. • Assess whether further orthodontic treatment is advisable in the presence of root resorption.



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## **INSTRUCTIONS FOR USE - PATIENT**

Chewing of hard foods can cause a device or related appliance to break, come off or loosen.

Some sports my cause damage to an orthodontic wire device and/or related appliance, and which may present a risk of harm in the event of certain sports related injuries. Consult with an orthodontic specialist for recommended safeguards. Check braces once a week for anything loose or bent or if you are involved in an injury to the mouth area. If a bracket or band comes loose or you break a wire and contact your Practitioner if any problems or uncomfortable.

## DISPOSAL

**Disassembly:** If possible, the devices can be disassembled before disposal. This can help ensure that all components are properly sterilized or decontaminated, and it can also make disposal easier and safer.

**Decontamination:** Before disposal it is recommended where possible that removed braces (combination of our devices) should be thoroughly cleaned and decontaminated to remove any potential infectious agents using a clinical autoclave sterilization method already approved.

**Sharps disposal:** Devices should be disposed of in either a medical waste container or a sharps container that is clearly labeled and meets all regulatory requirements for safe disposal.

**Transportation and disposal:** All containers of medical waste or sharps should be transported and disposed of according to local regulations and guidelines. This may involve working with a licensed medical waste disposal service or contacting local health authorities for guidance.

It is important to follow all appropriate guidelines and regulations for safe disposal to protect both human health and the environment.

## 4.0 CONTRA-INDICATIONS:

While orthodontic bands, brackets, wires, and attachments are widely used in orthodontic treatment, there are certain contraindications or situations where their use may not be recommended. Some common contraindications include:

- **4.1** Poor Oral Health: If a patient has significant oral health issues, such as severe gum disease (periodontitis) or extensive tooth decay, it may be necessary to address these conditions before initiating orthodontic treatment. In such cases, the orthodontic devices may impede proper oral hygiene practices and worsen the existing oral health problems.
- **4.2** Insufficient Tooth Structure: In situations where the teeth have insufficient enamel, tooth structure, or significant damage, the application of orthodontic bands, brackets, wires, or attachments may not be feasible. The compromised tooth structure may not provide sufficient support for the devices, leading to increased risk of tooth fracture or other complications.
- **4.3** Skeletal Growth Concerns: If a patient is still experiencing active skeletal growth, particularly in the jawbones, certain orthodontic treatments may not be recommended. In such cases, the orthodontist may advise postponing or modifying the treatment plan until skeletal growth is complete or until a more appropriate time.
- **4.4** Temporomandibular Joint (TMJ) Issues: Patients with severe temporomandibular joint disorders or dysfunction may require specialized evaluation and management before orthodontic treatment. The presence of TMJ issues can affect treatment outcomes and may require a multidisciplinary approach involving orthodontists and TMJ specialists.
- **4.5** Inadequate Patient Compliance: Orthodontic treatment requires active patient cooperation, including regular visits, proper oral hygiene practices, wearing of elastics, and adherence to dietary restrictions. If a patient is unable or unwilling to comply with the treatment requirements, it may affect the effectiveness and success of the orthodontic treatment.

It's important to note that the determination of contraindications for orthodontic treatment should be made by a qualified orthodontist based on a thorough evaluation of the patient's oral health, dental condition, and individual circumstances. The orthodontist will consider these factors and develop a personalized treatment plan that addresses any contraindications and ensures the best possible outcome for the patient.

## **REPORTING INCIDENTS**

If there are any issues with the performance or safety of the device then in the 1st instance please contact at the contact details below:

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