



## RETAINER CONSENT

Congratulations! Your active phase of orthodontic treatment has been completed.

The second phase of treatment, the retention phase, is now beginning. The teeth must be held in alignment while the bone and gum tissue stabilizes around them.

As discussed, retainer options include a choice of either fixed or removable retainers. No retainer is perfect and teeth can still move with retention. There are pros and cons to each retainer type. If compliance is an issue, a fixed retainer may be the better option. Parents and patients accept the fixed retainer acknowledging that it is only fixed to a certain number of teeth and the unattached teeth are still susceptible to movement.

If you choose a fixed retainer, it is very important to keep your teeth and gums around the fixed retainer clean. Brushing and flossing with threaders will be demonstrated at the time the retainer is placed. Remember, your retainer is not meant to last forever and will need to be repaired or replaced on occasion. You should have your general dentists check the health of your gums and teeth around your retainer at your cleaning appointments.

If you decide to go with a removable retainer, it needs to be worn full-time for the first 6 months, and then worn nights for the next year. After that, we recommend retainer wear of at least 3 nights per week indefinitely since your teeth are always moving. Your removable retainer needs to be removed when eating and brushed on both sides at least once a day. You must always keep the retainer in its case when not in use.

We strongly recommend that an appointment be made with your general dentist for a cleaning and thorough dental exam now that your orthodontic treatment is complete. Some adaptive changes in tooth position usually occur during the retention phase. Teeth, like other parts of the body, such as muscles and joints, are subject to changes caused by use, wear and stress as they function on a daily basis. Even with a fixed retainer, there may be some relapse, but this is usually minor in nature.

I understand that my orthodontic treatment is complete and I am satisfied with the result. I also understand that the treatment fee includes one set of retainers. There will be a charge for any additional treatment, replacement retainers and/or repair of retainers.

Retainer Choice:    ☐ **Fixed Retainer**        ☐ **Removable Retainer**

\_\_\_\_\_  
Parent/Patient Signature

\_\_\_\_\_  
Date