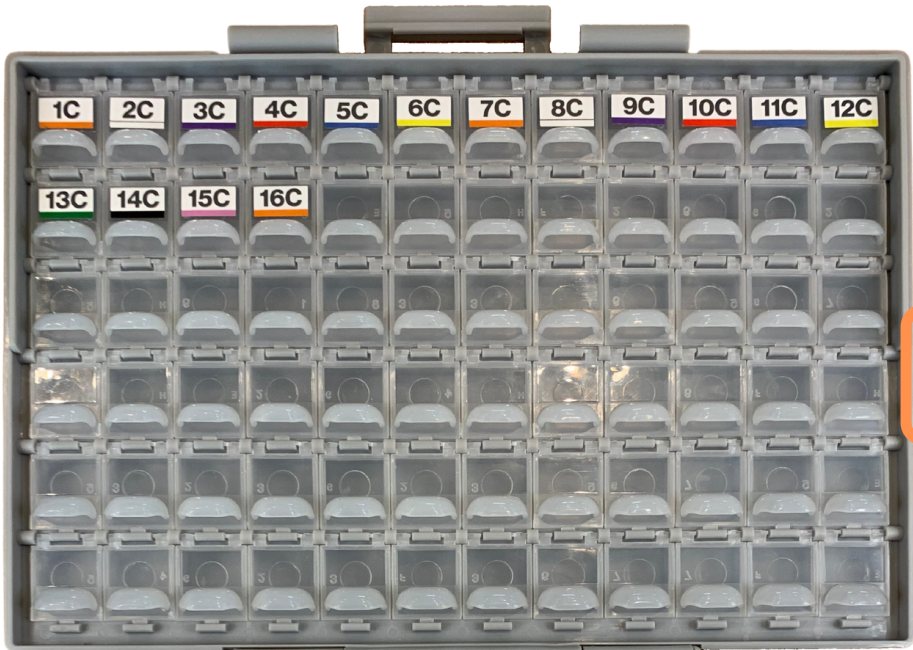
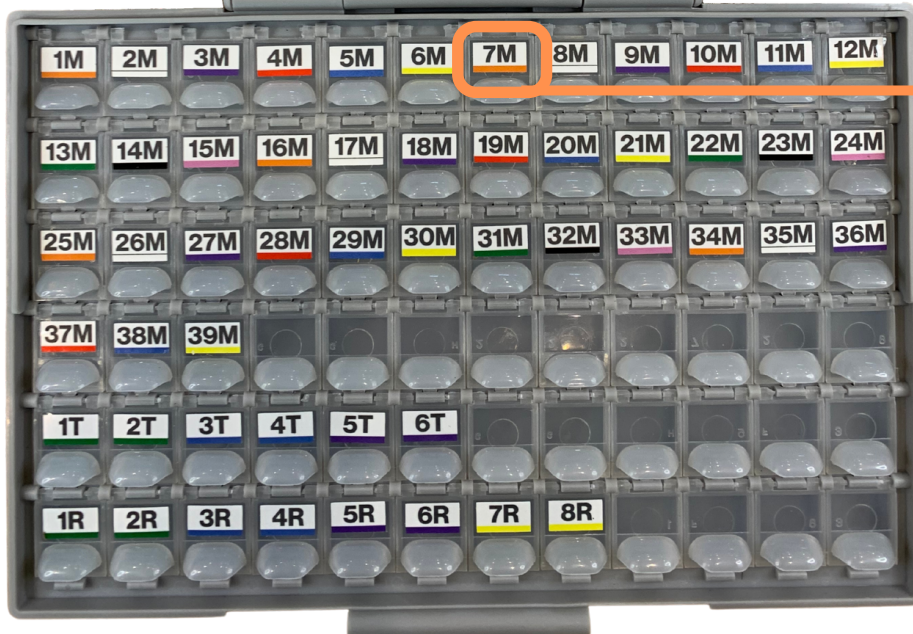


# KL Owen Rebonding Guide

**Step 1: Identify the Correct Bracket** matches between Bracket Rx and Bracket Kit.

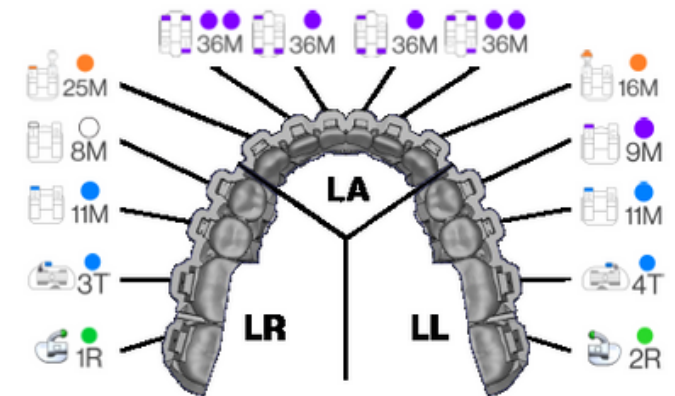
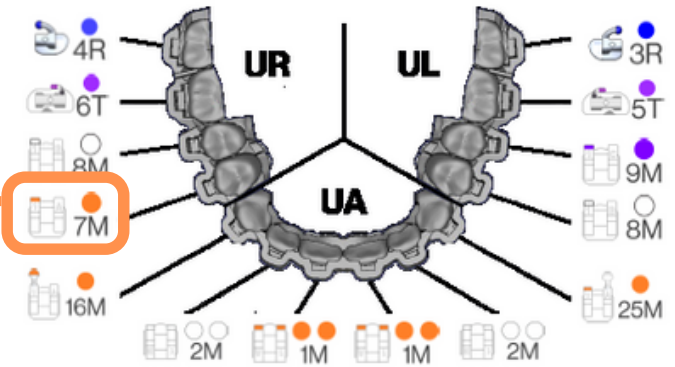
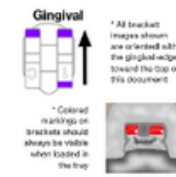
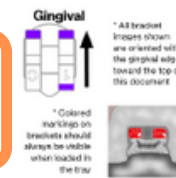


**7M**



Dr. Brandon Owen  
Dr. ID: 21266  
Patient: Training Model A  
Patient ID: 86PF55HG

\*Sample Bracket Rx\*



## Notes:

Upper Notes:

| Subgingival - UR-5 | Extra Composite Distal - UL-6, UR-6

Lower Notes: 0.3mm of IPR placed L3-3

| Direct Bond - LL-7 | Jig - LL-5

Extra Notes:

**IMPORTANT:** The dot(s) on the Rx indicate the bracket orientation in the tray. The dot(s) will always be gingival.

Check Rx to see if 1 or 2 dots face gingivally.



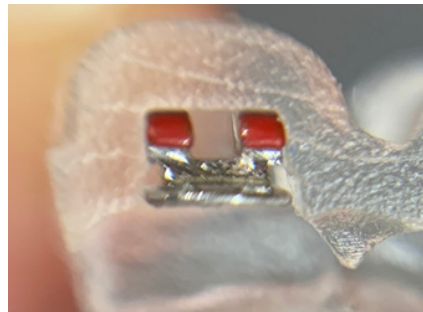
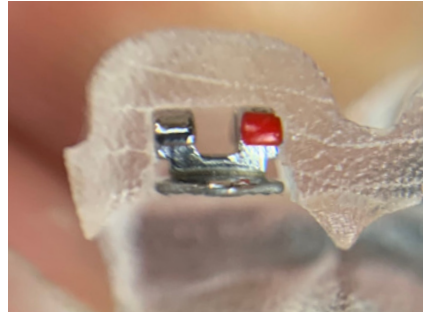
**1 Color Dot**

= 1 painted wing points gingival; signifying negative torque.



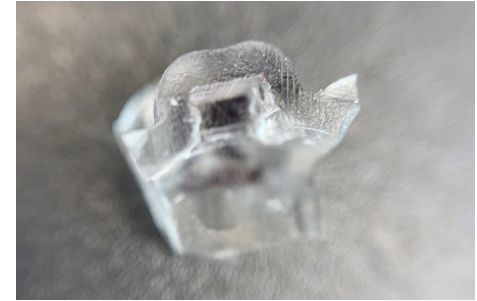
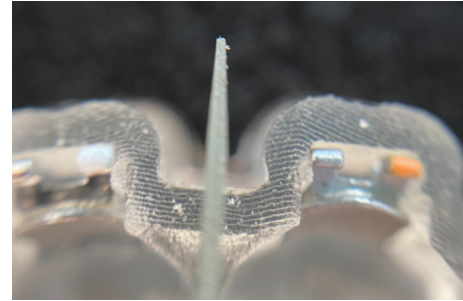
**2 Color Dots**

= 2 painted wings point gingival. signifying positive torque.



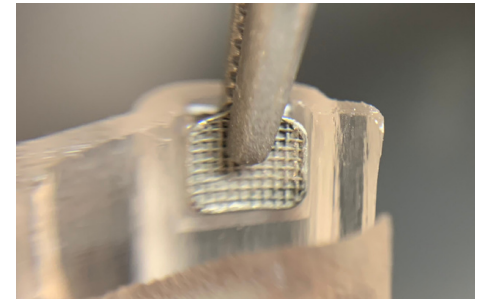
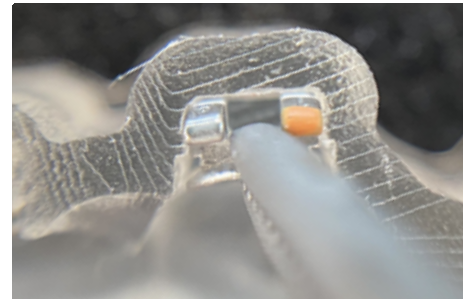
## **Step 2: Cut IDB Tray**

- To make a single-tooth jig, cut interproximally between the bracket boxes.
- (Optional) Label the correct tooth number on the jig.



## **Step 3: Load & Bond**

- Gently hold the bracket, and load into bracket box of IDB tray, with appropriate dot(s) gingival, per Rx.
  - Ensure bracket is fully seated into the bracket box.
- Proceed to rebond, following KLOwen Bonding Protocol.



## **Things to Remember**

- Some anterior brackets are universal. Be sure to reference Bracket Rx for proper placement.
- Molar brackets are universal. The same prescription molar bracket can be used for different molars (UR/LL and UL/LR; 6s & 7s).
- Reach out to your Practice Development Specialist (PDS) for support & any questions.