

Rapid Palatal Expander Instructions

There are two types of palatal expanders, Hyrax (with a key) and W-Arch.

What to do if you have a Hyrax:

- The Doctor has instructed you to:
turn the expander _____ times per day
for the next _____ days.
- Place the key in the hole closest to the front teeth. Push the key back towards the throat until a new hole appears at the front.
- If you cannot find the hole, have your child brush the expander with a toothbrush to remove debris. If you still can't find it, you may not have completed your previous turn. Complete the turn at the back of the mouth and the new hole will appear at the front.
- Your child may take Advil or Tylenol for the next few days if they are experiencing discomfort from the pressure, as the expander begins to work.
- Brush the roof of your mouth every time you eat to keep the appliance clean.
- Do NOT get frustrated! If you cannot complete a turn, call our office and we will help.
- If you miss an appointment, do NOT keep turning the expander unless instructed to do so. It is easy to over-expand the bite, if progress is not monitored.

What to do if you have a W-arch:

- There is no key, the appliance will activate slowly over the course of a month.
- You will probably notice an indentation on the tongue from the wire; this is normal and doesn't usually cause discomfort. It will disappear when the appliance is removed.
- Often the appliance will require a second "activation" at about a month. There may be some discomfort again for the first few days, but normally less than the first time.

With either appliance you may feel:

- Like you have pressure in your sinuses.
- The roof of your mouth may feel "itchy" as it stretches.
- Your body will make extra saliva for a few days so your speech may sound "wet".
- Your tongue may feel thick as you learn to talk with your appliance. The more you talk, the better you will sound.
- You may notice a space opening between the front teeth... this means PROGRESS!
The space will decrease after the active phase of treatment.

Active phase is usually 4-8 weeks, with quick visits every 1-3 weeks.

Retention phase is 6 months, while the skeletal changes stabilize and avoid relapse.

Call or return to clinic if the appliance becomes loose, breaks, or is hurting your child.



360-675-4613 (clinic) or 360-416-1514 (Dr. Hill's cell)