







## Preface

To help ensure an efficient user experience, this User Guide contains important and useful information for clinicians about 3M<sup>™</sup> Self-Ligating Appliance Systems.

As with any system, knowledge of the techniques associated with the components will help to make sure that you, your staff, your practice and your patients benefit to the fullest in the efficiencies that these systems have to offer.

Included in this guide is information from clinicians experienced in the use of the systems, providing valuable insight to help you with rapid implementation into your practice.

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#### Introduction 3M<sup>™</sup> Self-Ligating Appliances: Enhanced, User-Friendly and a Complete Treatment System

3M<sup>™</sup> Self-Ligating Appliances are the innovative choice for today's orthodontics. SmartClip<sup>™</sup> SL3 and Clarity<sup>™</sup> SL Self-Ligating Appliances are the only self-ligating appliances with true-twin bracket design, and they feature a unique nickel-titanium clip mechanism for simple and efficient archwire changes. 3M Self-Ligating Appliances are designed to provide patients the results that both you and they want ... a beautiful new smile.

#### **True Self-Ligating Brackets**

With no moving latches or doors, 3M Self-Ligating brackets are true self-ligating brackets. The familiar twin design allows for selective engagement, giving the Orthodontist added control during treatment. Also, the traditional tie-wings provide easy application of auxiliaries for space closure when desired. The open slot concept was designed with patient hygiene in mind because it facilitates easy cleaning; this helps reduce problems caused by plaque build-up often associated with other ligation mechanisms.

#### **Multiple Prescriptions Available**

3M Self-Ligating Appliances are offered in the MBT<sup>™</sup> Versatile+ Appliance System, as well as Ricketts\* (High Torque) and Roth\* (Low Torque) prescriptions, giving Orthodontists the option to select the treatment philosophy that works most efficiently in their practice.







## 3M<sup>™</sup> Self-Ligating Appliances

#### Performance You'll Notice. Start to Finish.

At every stage, from patient consultation on through to debonding, 3M<sup>™</sup> Self-Ligating Appliances are designed to empower you and your staff. 3M Self-Ligating Appliances combine the benefits of passive self-ligation, true twin design and hallmark aesthetics to efficiently deliver the results you and your patients expect.

#### The Advantage of Accurate Bracket Positioning

Bracket positioning is an important factor for efficient orthodontic treatment. Many doctors agree that precise positioning may be even more important in a self-ligating world that tends to have longer treatment intervals and faster tooth movement. This is why 3M Self-Ligating Appliances have unique features designed to help you place brackets precisely.

### Benefits You'll Notice on Bonding Day

Bond reliability can be just as critical to efficiency as self-ligating mechanics. It can have an impact on chair time, the number of appointments and patient satisfaction. 3M Self-Ligating Appliances with optional APC<sup>™</sup> Adhesive Coating combine to offer a reliable bonding experience.

#### **Enhanced Leveling and Alignment**

Unraveling a malocclusion requires more than just the light forces of self-ligation. It requires an evidence-based treatment plan and an appliance system that allows you to effectively and, at times creatively, implement your plan. This is where the unique, true twin self-ligating design of 3M Self-Ligating Appliances empowers you.

#### Making the Working Phase Work for You

An efficient working phase requires a balanced approach to sliding biomechanics, torque expression and anchorage. 3M Self-Ligating Appliances offer features that allow you to achieve this delicate balance based on your treatment preferences and the unique needs of each patient.

### A Passive Self-Ligating Bracket That Helps You Finish With Confidence

You'll notice the most important benefits of 3M Self-Ligating Appliances in the finishing phase. Unlike other passive self-ligating brackets, 3M Self-Ligating Appliances have a true twin design that allows you to detail a case with familiar and time-tested procedures and techniques.

#### Efficient, Consistent, Predictable Debonding

Both the SmartClip<sup>™</sup> SL3 and Clarity<sup>™</sup> SL Self-Ligating Appliances have been designed to ensure that removing brackets is as easy as putting them on.





# SmartClip<sup>™</sup> SL3 Self-Ligating Appliances with Advanced Clip Technology

The unique Nitinol clip used by 3M<sup>™</sup> Self-Ligating Appliances has been optimized for enhanced performance and patient comfort.

#### The Intelligent Clip That Still Does The Trick, Even Better

Based on clinical feedback, 3M Unitek has combined advanced materials engineering with sophisticated mechanical design to develop an even more effective self-ligating bracket system and has improved the unique self-ligating clip mechanism. Both the SmartClip<sup>™</sup> SL3 Self-Ligating Appliance System and Clarity<sup>™</sup> SL Appliance System brackets use less force to give your patients more to smile about.

#### The Third Generation vs. The Previous SmartClip<sup>™</sup> Appliance

Compared to earlier SmartClip<sup>™</sup> Appliance versions, the advanced SL3 clip significantly reduces wire insertion forces and removal forces required for large wires. The clips have more room to flex, making them more forgiving to wire misalignment, thereby helping to minimize patient discomfort.





Source: 3M Unitek Labs







## **Bracket Handling**

Although the SmartClip<sup>™</sup> SL3 and Clarity<sup>™</sup> SL Brackets are designed as true-twin edgewise brackets, the addition of the two Nitinol retaining clips require mesial and distal protrusions to hold the clips in place. These protrusions require the user to apply a different approach to bracket handling with bracket tweezers.

The operator can use either reverse tweezers (like the Unitek<sup>™</sup> Bracket Placement Instrument, REF 804-171) or conventional cotton pliers.



Unitek<sup>™</sup> Bracket Placement Instrument (REF 804-171)

The bracket should be securely held by grasping in between the tie-wings and on one side of the bracket (mesial or distal). This will still allow the bracket to be securely held without causing the bracket to "flip off" the instrument. The instrument can also be placed just <u>above</u> the protrusions when grasping a bracket from both sides. The reverse-end blade of the Unitek Bracket Placement Instrument can also be used as a positioning and seating tool for adhesive expression.



In-Between Tie-Wing Grip



Mesial-Distal Grip

#### APC<sup>™</sup> Adhesive Coated Bracket

The available APC<sup>™</sup> Adhesive Coated Appliance System ensures a consistent amount of adhesive, customized to each bracket base, for full appliance base coverage every time.



## **Bracket Positioning**

Since both the SmartClip SL3 and Clarity SL Self-Ligating brackets are true-twin brackets, conventional bracket positioning methods can be used. The SmartClip SL3 bracket provides a vertical scribe line to aid in proper bracket angulation, and both systems provide clear vertical and horizontal referencing points. Clinicians can use their current method of bracket height positioning as these systems do not require any special accommodation. If preferred, the clinician may choose to use either Dr. Anoop Sondhi's (Indianapolis, Indiana) atypical bracket positioning charts (on page 7) or the MBT<sup>™</sup> Versatile+ Appliance System's bracket positioning method (REF 021-102 brochure).

## **Atypical Bracket Positioning**

Atypical bracket placement for open bite, deep overbite and canted occlusal plane as recommended by Dr. Anoop Sondhi.



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## **Archwire Engagement**

The most unique feature of the SmartClip<sup>™</sup> SL3 and Clarity<sup>™</sup> SL Brackets is the self-ligating mechanism. Unlike other self-ligating systems, the mechanism does not require the user to open or close any doors or clips. Rather, the mechanism is a Nitinol clip that opens to the archwire simply by applying pressure to the clips with the archwire. This pressure varies with the individual archwire dimension and material property. Effective and patient friendly archwire engagement is also dependent on proper archwire sequencing (see pages 13-17).

#### **Round Archwires**

Round archwires require no special consideration and can be inserted into the bracket slots by using normal finger pressure against the clips. If desired, a ligature director or the Unitek<sup>™</sup> Wire Insertion Instrument (REF 804-152 (.022 slot) or 804-153 (.018 slot)) can also be used.

#### **Rectangular Archwires**

Before inserting rectangular archwires, it is recommended that all leveling and alignment and rotations be corrected. This will ensure easier archwire insertion requiring less force. Using the Unitek Wire Insertion Instrument as a torqueing key will allow the clinician to align the archwire with the torque angle of each bracket. If desired, the clinician can also use a Weingart plier or other torqueing key to torque the archwire into the bracket. This alignment allows the Nitinol clip to open with minimal force.



Insert wire perpendicular to the base of the slot. This may require torqueing of the wire.



If the wire does not enter the clip correctly, it can create a positive stop (black arrows) and resist easy wire insertion.



Proper alignment to the slot will also assist in wire engagement.

#### **Single Clip Engagement**

A key feature of the SmartClip SL3 and the Clarity SL brackets is the ability to engage a single clip rather than both clips in initial leveling and alignment. This is especially useful with vertically displaced canines or severely rotated teeth. Engaging only one clip in these situations allows the clinician to increase inter-bracket distances and create a longer lever arm for lighter force corrections. On the next appointment simply engage the remaining clip for final correction. No other self-ligating bracket allows this versatility.





## **Archwire Engagement Sequence**

When using SmartClip<sup>™</sup> SL3 Molar Brackets:



When using traditional molar brackets:



## Archwire Engagement Using the Unitek<sup>TM</sup> Wire Insertion Instrument (REF 804-152 (.022 slot) or 804-153 (.018 slot))



#### Technique using SINGLE END TORQUEING KEY:



Figure 1

- 1. Align archwire over clip opening and bracket slot (Figure 1).
- Position instrument on archwire on either mesial or distal side of bracket.
- 3. Torque the archwire if necessary.
- 4. Push instrument gently while providing lingual support to the teeth.

#### Technique using DOUBLE END TORQUEING KEY:



Figure 2

- 1. Align archwire over clip opening and bracket slot (Figure 2).
- 2. Position instrument on archwire so that torqueing key straddles bracket.
- 3. Torque the archwire if necessary.
- 4. Push instrument gently while providing lingual support to the teeth.

#### **Tips for Archwire Engagement**

 Always provide lingual support for enhanced patient comfort.



 For sensitive patients, have patient bite down on cotton roll before engaging and disengaging archwire to provide occlusal support.



## Archwire Disengagement

**Recommended Disengagement Sequence** 



As you begin to change archwires in the SmartClip<sup>™</sup> SL3 and Clarity<sup>™</sup> SL Appliance Systems, make sure that the existing archwire is completely passive and sliding freely before moving into larger archwires. This will ensure that the current archwire has fully expressed itself with the lightest possible amount of force. The ability to use minimal force to move teeth is a key benefit of the 3M<sup>™</sup> Self-Ligating Appliance Systems.

\*If the archwire has step bends, disengage all remaining brackets.



SmartClip<sup>™</sup> Appliance Wire Disengagement Hand Instrument (REF 804-160)

#### **Round Archwires**

To remove round archwires simply cut the archwire at the midline and slide out the two sections of wire. If the archwire is to be used again, use the SmartClip<sup>™</sup> Appliance Wire Disengagement Hand Instrument (REF 804-160) to disengage the anterior brackets and slide out archwire.

#### **Rectangular Archwires**

Rectangular archwires should be removed using the SmartClip Appliance Wire Disengagement Hand Instrument. This instrument provides reciprocal force against the bracket and pulls the archwire out of the bracket slot. Please see instructions on page 11 on how to use the hand instrument.

If desired, the user can also remove rectangular archwires by disengaging the anterior brackets then sliding the archwire out of the remaining posterior brackets.



### Archwire Disengagement Using the SmartClip<sup>TM</sup> Appliance Wire Disengagement Hand Instrument (REF 804-160)



1. Approach archwire with disengagement instrument from occlusal or gingival side.



2. Place instrument hooks under archwire keeping the bracket between the instrument hooks.



3. Gently squeeze handles (squeeze until the point of release).

#### **Tips for Archwire Disengagement**



- Always provide lingual support for enhanced patient comfort.
- For sensitive patients, have patient bite down on cotton roll before engaging and disengaging archwire to provide occlusal support.
- Avoid the mesial and distal protrusions and tie-wings when disengaging Clarity<sup>™</sup> SL Brackets to avoid breakage.



## **Tandem Archwires**

The use of Tandem Archwires is important in the leveling and alignment phase of treatment for the SmartClip<sup>™</sup> SL3 and Clarity<sup>™</sup> SL Appliance Systems. Following the initial archwire (typically .014 Nitinol SE) the clinician is recommended to insert a second round Nitinol Classic Archwire, .014 in the .018 slot, or .016 in the .022 slot. When the initial archwires are completely passive, rather than removing these archwires, a second archwire is to be placed directly on top of the initial archwire, forming a tandem archwire.

The combination of these two round archwires provides maximum control of the vertical, horizontal, and rotational dimension. Proceeding to rectangular archwires should never begin until the tandem archwires have been placed and have expressed themselves. Use of the tandem archwire technique allows for simple and easy insertion of a rectangular archwire.

- There is no need to disengage the initial archwire, saving this step.
- Tandem archwires can also be used in segments rather than as a continuous archwire.

#### **Tandem Archwire Combinations**

The choice of tandem archwire combination depends on the slot size and degree of rotational deflection. In most cases, the following combination can be used:

	0.018 Slot	0.022 Slot
Initial Archwire	Nitinol SE .014	Nitinol SE .014
Tandem Archwire         Nitinol Classic .014		Nitinol Classic .016



#### Notes:

- Do not insert the tandem archwire until the initial archwire is completely passive.
- Do not move to rectangular archwires until all rotations and vertical corrections are complete with tandem archwires.



Prior to Tandem Archwire



Tandem Archwire Working



Tandem Archwire Complete

## **Archwire Sequencing**

Initial archwire sequencing with the SmartClip<sup>™</sup> SL3 and Clarity<sup>™</sup> SL Brackets is critical to the success of the appliances. Because of the passive nature and low frictional resistance of these appliances, light resilient archwires should be used for initial leveling and alignment. By using small dimensional round wires, the reduction in binding friction can be optimized without compromising control.

As each patient's malocclusion presents its own treatment requirements, archwire sequences should always be modified to best treat each individual case. Below is a generic archwire sequence for your use.

Treatment Phase	.018 Slot	.022 Slot
Initial Phase Getting Organized • leveling • aligning Necessary Wire Criteria • low forces • low modulus • low friction	Nitinol Classic .012 Nitinol SE or HA .014	Nitinol Classic .012 Nitinol SE or HA .014 Nitinol HA .016
Intermediate Phase Working the Big Picture arch form correction occlusal plane leveling rotating tipping Necessary Wire Criteria medium forces medium modulus medium malleability low friction	Nitinol SE or HA .014 with Nitinol SE or Classic .014 tandem Nitinol SE or HA .018	Nitinol SE or HA .014 with Nitinol SE or Classic .016 tandem Nitinol SE or HA .020 Nitinol SE or Classic .017 × .025
Finishing Phase Getting Down to Details • vertical detailing • space closure • refine interdigitation • retention Necessary Wire Criteria • medium forces • short working range • high modulus • high malleability	Beta III Titanium (non-extraction) .016 × .025 .017 × .025 Permachrome Resilient (extraction) .016 × .025 .017 × .025 Braided .016 × .025	Beta III Titanium (non-extraction) .019 × .025 Permachrome Resilient (extraction) .019 × .025 Braided .019 × .025



## Archwire Sequence Recommendations – .018 Slot

Recommendations by Dr. Anoop Sondhi for various types of malocclusions.

#### **Overview**

Archwire	Appointment Interval	Total Duration	Function
.012 or .014 Nitinol Super-Elastic	8 weeks	8 weeks	Preliminary alignment, leveling and rotation
.014 or .016 Nitinol Classic Tandem	8 weeks	8 weeks	Complete alignment, leveling and rotation
.016 × .025 Beta III Titanium	8-10 weeks	16-30 weeks	Provide torque control, arch consolidation, use of inter-arch elastics
Retraction Arches	6-8 weeks	12-24 weeks	Space closure, retraction into extraction sites

#### **Class I, Minor Crowding, Non Extraction**



#### **Class I, Moderate Crowding, Non Extraction**





#### Archwire Sequence Recommendations – .018 Slot (continued)





For additional details, please view the CE Class titled the "SmartClip™ and Clarity™ SL Self-Ligating Treatment Systems: Recommended Archwire Sequences" presentation on 3MUnitekTraining.com.

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## Archwire Sequence Recommendations – .022 Slot

#### **Overview**

Archwire	Appointment Interval	Total Duration	Function	
.012 or .014 Nitinol Super-Elastic	8 weeks	8 weeks	Preliminary alignment, leveling and rotation	
.014 or .016 Nitinol Classic Tandem	8 weeks	8 weeks	Complete alignment, leveling and rotation	
.017 × .025 Beta III Titanium	8-10 weeks	16-30 weeks	Provide torque control, arch consolidation, use of inter-arch elastics	
$.019 \times .025$ Beta III Titanium or Stainless Steel	8-10 weeks	16-30 weeks		
Retraction Arches	6-8 weeks	12-24 weeks	Space closure, retraction into extraction sites	



#### **Class I, Moderate Crowding, Non Extraction**





Archwire Sequence Recommendations - .022 Slot (continued)



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### How to Stop "Walking Wires"

Due to the reduced frictional resistance with the initial round archwires there is a tendency for the archwire to "walk" through the brackets and molar attachments freely, causing temporary discomfort to the patient. To avoid the wires from "walking" it is recommended to do one of the following:

- · Apply crimpable stops on the archwire distal to the most crowding
- Apply an AlastiK<sup>™</sup> Ligature on an anterior tooth that needs the least amount of correction



Ligature on Anterior Tooth

• Use dimpled archwires







The shape and width of the dimpled archwires from 3M Unitek are arch-specific, to compensate for the differences in inter-bracket distances between the upper and lower teeth.

## SmartClip<sup>™</sup> SL3 Self-Ligating Molar Brackets

Re-designed to better serve Orthodontists' needs, SmartClip<sup>™</sup> SL3 Molar Brackets have small low profile tiewings for enhanced treatment flexibility. The enhanced design accommodates either steel ligatures for lacebacks and tiebacks or AlastiK<sup>™</sup> Ligature Modules. The maxillary 1st molar brackets incorporate the distal offset into the bracket base rather than into the slot, improving archwire retention during treatment.



SmartClip<sup>™</sup> SL3 Molar Brackets





## **Bracket Debonding**

The debonding procedure for the SmartClip<sup>™</sup> SL3 Brackets require no change from your current debonding procedure; conventional methods used with any traditionally ligated metal bracket can be applied.

Clarity<sup>™</sup> SL Self-Ligating Brackets feature the same stress concentrator as the ligated Clarity<sup>™</sup> Metal-Reinforced Ceramic Brackets, making debonding easy and efficient. When debonding Clarity SL brackets, it is recommended to use the Unitek<sup>™</sup> Self-Ligating Bracket Debonding Instrument (REF 804-170). Using the Debonding Instrument will allow the clinician to debond with the archwire removed or in place to hold together the pieces of the bracket.



Unitek<sup>™</sup> Self-Ligating Bracket Debonding Instrument (REF 804-170)

### Bracket Debonding Using the Unitek<sup>TM</sup> Self-Ligating Bracket Debonding Instrument (REF 804-170)



A. Archwire Slot

- B. Screw holding Nitinol Insert in place
- C. Nitinol Insert
- D. Bracket Gripping Shelf



Self-Ligating Bracket retained between Nitinol Insert and the instrument tips.



Gingival-Occlusal view of Instrument, with Bracket Gripping Shelf (D) embracing the bracket mesial/distally <u>without archwire</u> <u>in place</u>. Nitinol Insert (C) is placed vertically into the bracket.



Gingival-Occlusal view of Instrument, with Bracket Gripping Shelf (D) embracing the bracket mesial/distally <u>with</u> <u>archwire in place.</u>



## **User Tips and Tricks**

### Bracket Positioning/Inter-Proximal Reduction (IPR)

- Position the bracket slightly off-center on the tooth to help with rotational control. (Figure 1)
- When direct bonding, a Tarno instrument works well for bracket positioning. (Figures 2-3)
- All bracket repositioning and IPR should be accomplished early in treatment.



#### Friction



 To stabilize and prevent the archwire from sliding, apply an AlastiK<sup>™</sup> Ligature Tie on the most anterior tooth that needs the least amount of correction. (Figure 4)



• Secure previously corrected rotations when stepping back to a smaller archwire. Use figure 8 to tie in the bracket. (Figure 5)

Selective Friction to secure molar position



• Friction can be useful. Whether it's maintaining midlines, for torque control or maintaining rotation control, determine where it works best, and secure the bracket. (Figure 6)



• Use open coil to create space on initial wires. (Figure 7)

### **User Tips and Tricks**

#### **Tandem Archwires**

- Use tandem archwires to correct residual rotations and level and align arches. The tandem archwires will allow you to do bracket repositioning early in treatment. (Figures 8-10)
- Use reverse curve archwires as part of the tandem arch when necessary. (Figure 11)
- Use segmented tandem archwires where more correction is needed. (Figures 12-13)





During





After



#### Before 21 days

21 uays

#### Archwires

- To correct difficult rotations in the lower anteriors: a) use tandem archwires;
   b) open the contacts in the mandibular anterior segment with a .012 SS wire with loop; c) offset brackets by 0.5 mm towards the rotation; and
   d) avoid uneven resin thickness under the bracket bases.
- Archwire segment should not cross edentulous span or non-bracketed teeth. (Figure 14)
- Complete all alignment activations in light archwires. Avoid skipping intermediate archwires or getting into larger steel archwires until preliminary alignment has been achieved.
- When removing light archwire, assure that it is passive, then a) segment archwire at midline and slide out, or b) disengage anterior teeth only, then slide out.
- Only use rectangular archwires when existing round archwire is passive. To insert rectangular archwire, engage 2nd bicuspids, slide into buccal tubes, then slide posterior from the midline and engage from posterior to anterior.
- If having difficulty inserting larger rectangular wires, make sure to:

   a) establish vertical alignment of teeth and brackets with tandem archwires,
   b) complete all rotation corrections with tandem archwires and c) verify that
   the torque factor is not overly active. If large rectangular wires are still
   difficult to insert, step down to a smaller rectangular wire. (Figure 15)
- The majority of finishing details can be achieved in Beta III Titanium archwires.







## **User Tips and Tricks**

### Selective Clip Engagement

 Use the flexibility of the twin wing and clip design to selectively engage the archwire for severe rotations. Begin by engaging only one clip until preliminary rotation correction is achieved.
 Forcing in an archwire will increase the risk of distortion and spontaneous disengagement.





**Risk of Deformation** 

#### **Mechanics**



• Reduced friction enhances sliding mechanics for initial space closure using lace backs.



• Chain to adjacent teeth to correct rotations.

### **User Tips and Tricks**

#### **Mechanics Continued**



• Express full rotation correction with a small step bend or offset while still in light round archwires.



 Chain to control arch width instead of stainless steel wire. This helps seat the archwire against the bracket base.



Prior to NiTi springs



8 weeks after NiTi springs

 Use NiTi springs to slide teeth along archwire. They deliver consistent, constant force. Attach to bracket hooks or posted archwires.



- Bond mandibular 3-3 retainer as initial stage of finishing. The retainer secures incisor position and facilitates bicuspid settling.
- For closing small spaces with 3M<sup>™</sup> SL Appliances, avoid using powerchains as they may be inefficient, redundant and unhygienic. Simple, crimpable hooks and AlastiK<sup>™</sup> Ligature Modules are effective for closing small spaces. For generalized space closure, however, powerchains are still useful.

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#### 3M Unitek Orthodontic Products 2724 South Peck Road Monrovia, CA 91016 USA www.3MUnitek.com

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