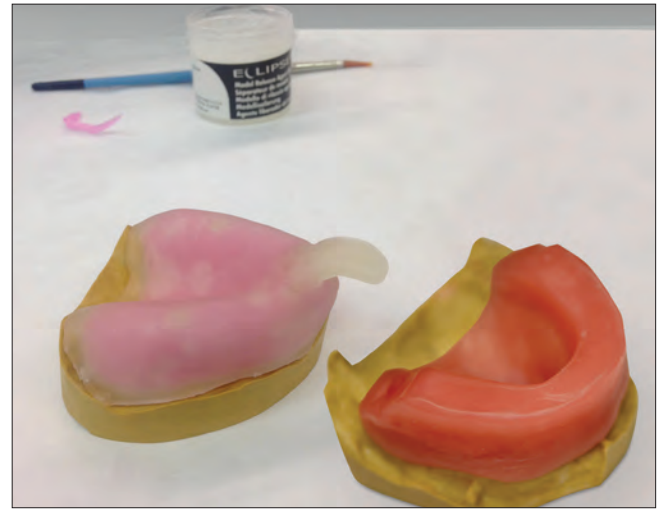


Clinical Steps:

Preliminary Impression, Custom Tray Impression, & Occlusal Rims for Digital Dentures

Preliminary Impression/Consultation Appointment (30 minutes or less)

- Using your preferred initial impression tray, take upper and lower preliminary impression per your established office practices.



- Inspect impression for ALL key anatomical landmarks (see Figures 1 & 2) and pressure spots - repeat process as necessary.

- Send to laboratory for fabrication of custom tray and occlusal rims.

Figure 1 - Maxillary Final Impression

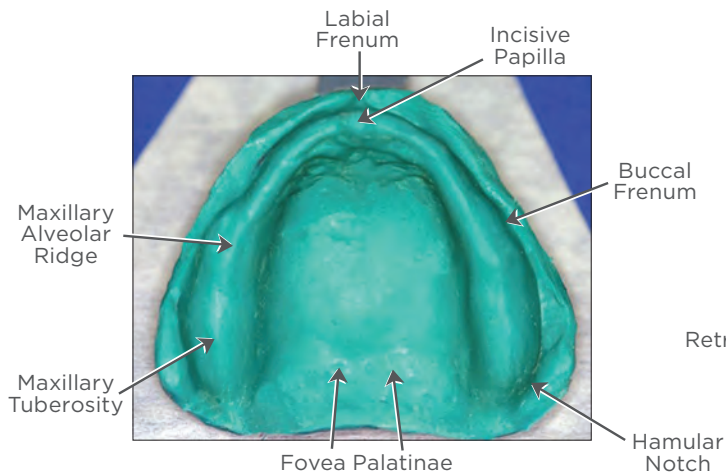
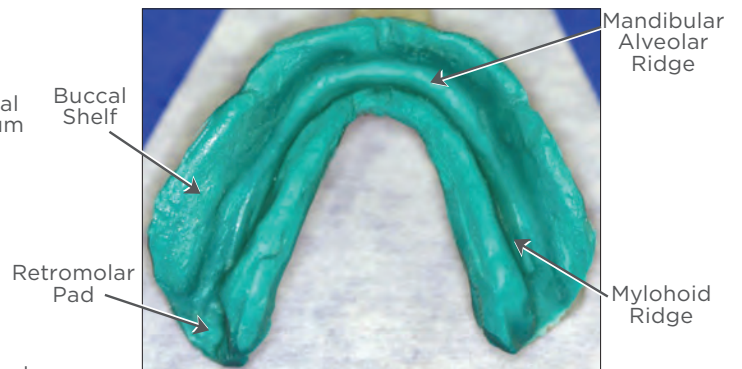


Figure 2- Mandibular Final Impression



Custom Tray Impression (45 minutes or less)

Digital dentures provide the clinician with the opportunity to combine two traditional steps into one appointment. Your laboratory will provide both a Custom Tray & Occlusal Rim(s) for this one appointment.

IMPORTANT: Steps 4 through 17 are CRITICAL for proper digital design.

Tip: Do not rush these steps – accuracy applied chairside will directly correlate with final prosthesis precision!

Repeat steps 4 through 8 for opposing arch – if required.

Recommended Materials:

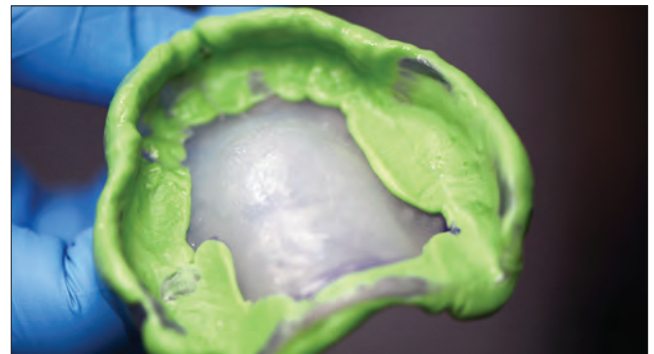
- Laboratory Custom Tray
- Tray Adhesive
- 3 Impression Materials*:
Rigid/Heavy Body, Medium Body and Low Viscosity
(Important: Substitution of impression material may result in inadequate results sacrificing fit and occlusion)
- Handpiece/Carbide for relieving tray

4. If the patient is a current denture wearer, ask patient not to wear the denture for 48 hours for proper tissue conditioning before final impressions.

Inspect patient's mouth to assure it is clean and clear of all materials – particularly denture adhesive.



5. Apply tray adhesive on the borders of the custom tray, and then the heavy body border molding impression material.



6. Insert tray into mouth and perform border movements. Inspect the tray for exposures and overall quality. Correct pressure spots by relieving the tray material with a carbide bur - if needed.



7. Reapply tray adhesive to the remaining surfaces of the custom tray. Express medium body impression material up to the borders. Insert tray into mouth. Hold per manufacturer's instructions.



8. Inspect impression for ALL key anatomical landmarks (see Figures 1 & 2) or any exposures. Correct with Low Viscosity impression ONLY if necessary.

*For best results we recommend using Aquasil® Ultra + Smart Wetting® Impression Material.

Clinical Checklist:

Baseplate & Occlusal Rim record taking for Digital Dentures

The base plate & washed occlusal rim are intended to capture patient records, not to be used as the final impression.

Recommended Materials:

- Registration Material for bite capture
- Preferred instruments for rim adjustment
- Laboratory Knife for trimming/scribing wax rims
- Base Plate sheet/Utility wax

9. Inspect patient's mouth to assure it is clean and clear of all materials - particularly denture adhesive.



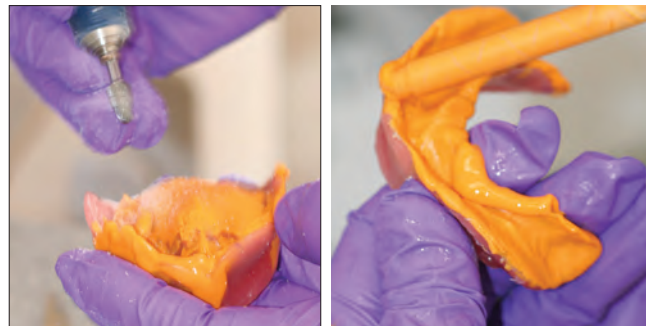
10. Place each occlusal rim into the mouth and assess fit. Adjust as necessary for vertical dimension of occlusion. Use preferred method of adjust occlusal rim as necessary.



11. Apply tray adhesive to occlusal rim baseplate and express low viscosity impression material evenly over the tissue surface.



12. Insert the base plate and have patient occlude with opposing occlusal rim or existing dentition. Hold per manufacturers instructions.



13. Trim/Remove any excess material that obscures view of anterior occlusal rim. Also trim any material that extends past the posterior border (post dam). Adjust any pressure spots with a carbide and re-impresion if necessary.



14. Re-insert occlusal rim(s) into mouth, assess for occlusal vertical dimension, and contour appropriate lip support.



Using your preferred method to adjust the occlusal rim for:

- Occlusal Vertical Dimension (use of a Fox plane is recommended)
- Incisal Edge / Emergence Profile
- Buccal Corridor

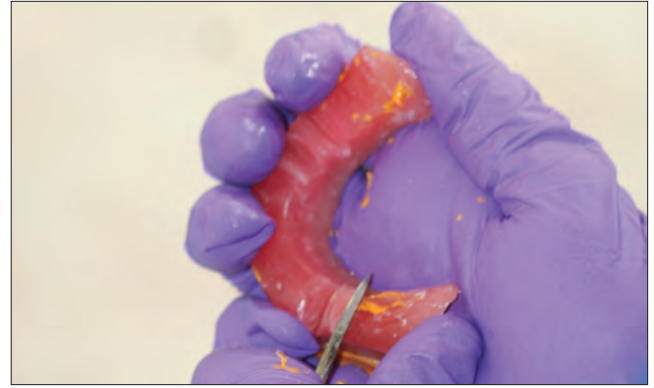


Contour appropriately - facial position of rim will correlate directly to facial position of teeth in digital design. Please send any external or internal occlusal record measurements with your prescription.



15. Re-insert occlusal rim(s) into mouth. Use a laboratory knife (or other scribing tool) to mark:

- Midline
- Distal Cuspid Line
- Smile (High) Lip Line
- Dominant (Lip Pull)



16. Using a laboratory knife, notch the occlusal rim for "keying" the bite registration material.



17. With the occlusal rim(s) in-place, apply a small amount of registration material to the notched areas. Request the patient to close into their natural centric position and hold (per manufacturer's instructions). Confirm that the occlusal record is repeatable.

