

Impression Taking Protocol

This document outlines the recommendations for obtaining physical impressions that will be appropriate for planning and ordering an All at Once® Implant Bridge and guides.

Pre-treatment considerations:

- Consider the need to trim (e.g. supra-erupted teeth) or add to teeth (e.g. infra-erupted teeth) to improve incisal/occlusal plane and level.

Impression requirements for accuracy:

- No bubbles
- No drags
- Rigid bite registration
- All teeth and 6mm soft tissue captured

Protocol for patients without RPD:

- Take impressions with Alginate if they can be poured up immediately at practice.
- Take impressions with PVS if they are being sent to your lab for digitisation.
- Make adjustments to occlusion as necessary to eliminate CO-MI slide (See *Notes below)
- 2 impressions:
 - Treatment Arch
 - Opposing Arch
 - Bite Registration (at the restorative vertical dimension)



Protocol for patients with existing RPD:

- Take impressions with Alginate if they can be poured up immediately at practice.
- Take impressions with PVS if they are being sent to your lab for digitisation.
- Make adjustments to occlusion as necessary to eliminate CO-MI slide (See *Notes below)
- 3 impressions:
 - Treatment Arch without RPD in place
 - Treatment Arch with RPD in place
 - Opposing Arch
 - 2 x Bite registration (at the restorative vertical dimension)
 - Between treatment arch with RPD and opposing
 - Between treatment arch without RPD and opposing

Protocol for patients with existing dental implants:

- Take treatment arch/impression coping impression with PVS. Other impressions can be alginate if they are being poured up immediately at the clinic.
- Make adjustments to occlusion as necessary to eliminate CO-MI slide (See *Notes below)
- 3 impressions:
 - Treatment Arch with implant crown in place
 - Treatment Arch with impression coping in place
 - Opposing Arch
 - 2 x Bite registration (at the restorative vertical dimension)
 - Between treatment arch with implant crown and opposing
 - Between treatment arch without implant crown and opposing

Notes:

* The OVD used for recording is the OVD of the final restoration. This may be the same as the patient's existing OVD.

** If the patient's existing OVD is correct, make sure that Centric Occlusion is the same as maximum intercuspation. This will ensure optimal occlusal accuracy and minimal adjustments to the final prosthesis.

*** If the patient's existing OVD is too closed, use a device (e.g. Lucia Jig or anterior deprogrammer) to establish the correct OVD. Place the patient in to Centric Relation Position and record the Occlusal registration

