Diagnosis and Treatment Planning for Full Mouth Restorations

Drew Schulter, VP of Operations
• Multiple Implant Based Restorations
• Multiple Implant Companies and Designs
• Highly Complex
• Growing Number of Doctors Offering to Patients
  – Higher Patient Acceptance
  – Education and Training
Product Portfolio

Restorative Solutions for any Clinical Situation

AccuFrame™

AccuFrame IC™

Cagenix 360

Proprietary & Confidential
Keys to Success

• Appropriate Diagnostics, Impressions, and Model Work
  • Prevent Errors, Minimize Repairs
    – Poor Impression- Remake Framework
    – Occlusal Scheme- Delamination of Denture Teeth/Repair Prosthesis
    – Review Flanges- Cleaning/Comfort
    – Refined Diagnostic Wax Up- Optimize Esthetics

• Maximize Chair Time and Profitability
  – Maximize Patient Visits
  – Reduce Remakes
  – Reduce Repair Scenarios
Review of Components

- Implant Fixtures
- Abutment
- Impression Copings
- Analogs
- Screws
- Coping

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Impression Technique

- Recommend Open Tray Impression
- Properly attach Impression Copings to Implants
- Visually and tactically confirm attachment
  - Look for gaps, review movement
- Take Radiograph confirming proper attachment

Pictures provided by Dr. Peyman Raissi, DDS (Nashville, TN)
Impression Technique

- Thread Floss around Impression Copings
- Position Cotton Rolls to prevent tongue and cheeks from touching the impression copings

Pictures provided by Dr. Peyman Raissi, DDS (Nashville, TN)
Impression Technique

- Stack GC Pattern Resin or Triad TruTray material to lute Impression Copings to one another.
- Section and lute back together to relieve any pressure created by the Pattern Resin
  - Sectioning can be done out of the mouth

*Pictures provided by Dr. Peyman Raissi, DDS (Nashville, TN)*
• Flow Light Bodied Impression Material around the impression copings.
• Load MiraTray or Custom Tray with Medium Bodied Impression Material.
• Position Impression Tray appropriately ensuring you have access to Impression Coping Screws
• Check Impression for voids

Pictures provided by Dr. Peyman Raissi, DDS (Nashville, TN)
Impression Technique

- Two types of Impression Copings
  - Closed Tray and Open Tray
- Open Tray
  - More Accurate, Allows access to Screw
  - **ALWAYS** recommended for Full Mouth
- Closed Tray
  - Impression coping fully encompassed by impression material
  - Copings remain attached to implants
  - Reinsertion of Impression Coping
  - Much Less Accurate
  - Higher occurrence of misfit
• Properly attach Analogs to Impression Copings
  – Check for misfits/gaps and movement
• Apply Soft tissue material around analogs. Remove any potential undercuts in soft tissue material
Model Work

- Pour Stone around Analogs and allow to set
- Check Stone cast for voids or defects
  - Check stone material characteristics and mixing guidelines to ensure that the stone material is suitable for a master model with minimal distortion/shrinkage/movement
• Properly attach Copings to Analogs
• Apply GC Resin or TruTray material around copings and cure appropriately
• Ensure material is not touching soft tissue contours (soft white wax)
Verification Jig

• Smooth/Adjust contours with hand piece (if necessary)
• Confirm Fit on stone cast without soft tissue material
  – Single Screw Sheffield Test
• Section and Lute back together if any misfits are found
  – Orthoresin
  – GC Pattern Resin
Wax Bite Rim- Lab

- Block out any potential undercuts with wax
- Lubricate Stone Cast with Vaseline
- Properly attach Copings to Analogs (minimum of 3 copings)
- Apply base plate material around copings and cure appropriately
Wax Bite Rim - Lab

- Reduce copings and base plate if necessary
- Create appropriate wax rim onto base plate and copings
- Clear screw access holes
- Remove Wax Bite Rim and confirm fit
• Attach Verification Jig to implants/abutments in patient’s mouth.
• Visually and tactically confirm attachment and with radiograph.
• Section and Lute back together if any misfits are found
• Large Discrepancy - Re-impress with Verification Jig in place
  – Do not proceed with Wax Bite Rim

Pictures provided by Dr. Peyman Raissi, DDS
(Nashville, TN)
• Attach Wax Bite Rims to implants/abutments in patient’s mouth. Confirm proper seating tactically and with radiograph.
• Adjust Occlusal plane and buccal aspect of rim for appropriate tooth position
• Ensure Appropriate Vertical Dimension
  – Recommend 10 mm
Wax Bite Rim - Doctor

- Mark midline, canine positions, and smile line on upper wax bite rim
- Make occlusal notches on both wax bite rims and take bite utilizing impression or bite registration material
Based upon modified rim, the diagnostic wax up is created.

- Utilizing Denture Teeth
- Optimize function and esthetics
- Occlusion
  - Recommend equal values of Overbite and Overjet
  - Group Function
  - Review Lateral Excursion and Protrusive Movements

- Sent to Doctor for a Try In
Diagnostic Wax Up - Doctor

- Try In performed
- Check occlusion, phonetics, and esthetics
- Review smile line
- Review potential issues
  - Screw Access Holes
  - Flanges
- If necessary take a new bite and send back for adjustments
Ready for Restoration!

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