C A G E N I X T

## Diagnosis and Treatment Planning for Full Mouth Restorations

Drew Schulter, VP of Operations

#### CAGENIX

- 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

 $\mathsf{ACCUFRAME}^{\scriptscriptstyle\mathsf{TM}}$ 







#### 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





Abutment









Screws

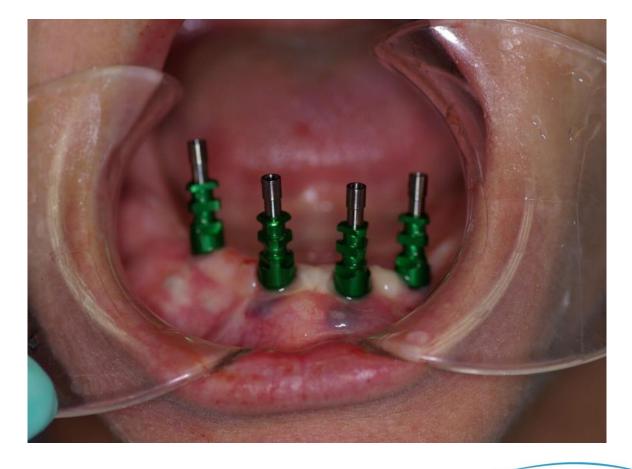


Coping



- 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)





- 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)



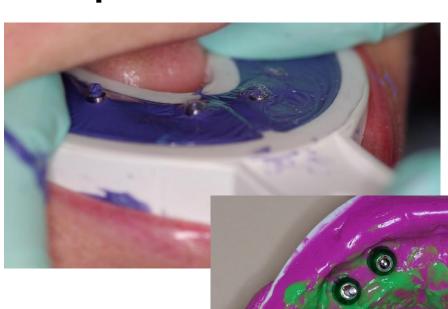
- Stack GC Pattern Resin or Triad TruTray material to lute Impression Copings to one another.
- Section and lute back together to relieve any pressure created by the Pattern Resin
  - Sectioning can be done out of the mouth



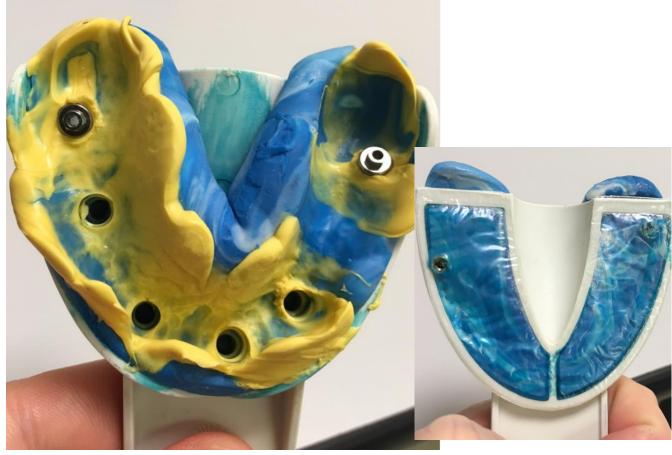
Pictures provided by Dr. Peyman Raissi, DDS (Nashville, TN)

- 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)



- 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



#### Model Work

- 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

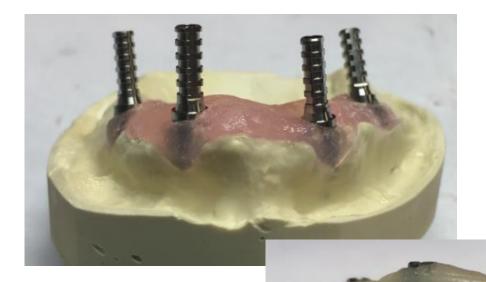
- Pour Stone around Analogs and allow to set
- Check Stone cast for voids or defects
  - Check stone material characteristics and mixing guidelines to ensure that the stone material is suitable for a master model with minimal distortion/shrinkage/movement





#### Verification Jig

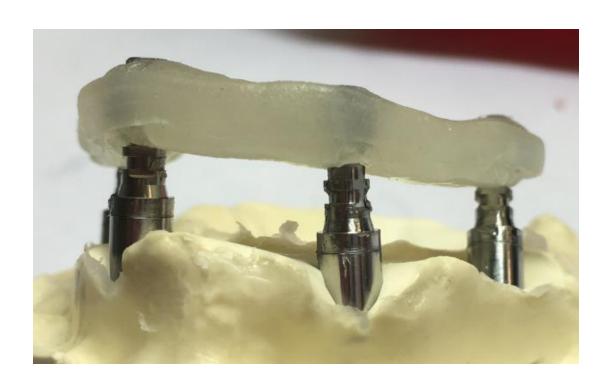
- Properly attach Copings to Analogs
- Apply GC Resin or TruTray material around copings and cure appropriately
- Ensure material is not touching soft tissue contours (soft white wax)





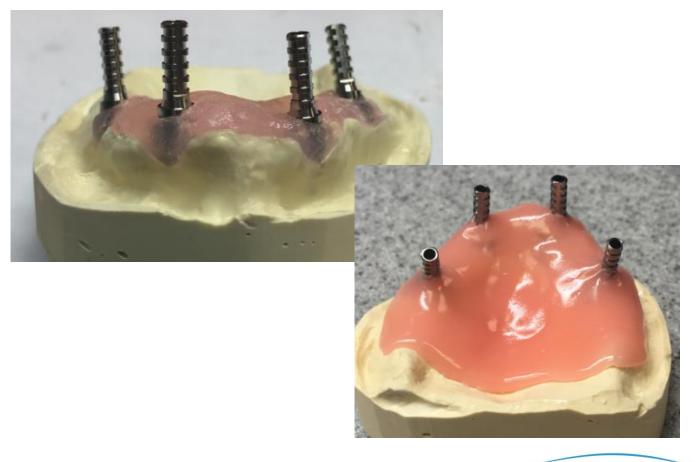
#### Verification Jig

- 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



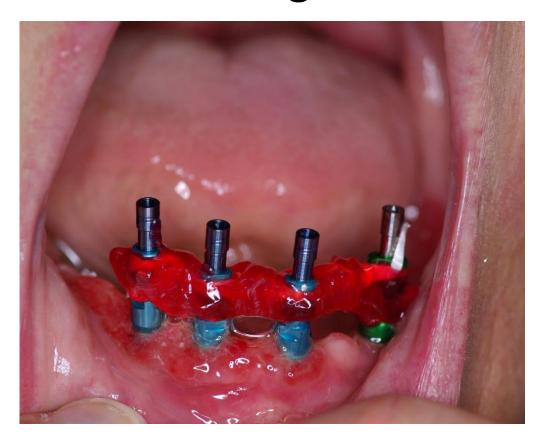
#### Wax Bite Rim- Lab

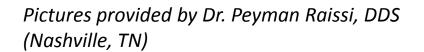
- Reduce copings and base plate if necessary
- Create appropriate wax rim onto base plate and copings
- Clear screw access holes
- Remove Wax Bite Rim and confirm fit



#### Verification Jig- Doctor

- 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

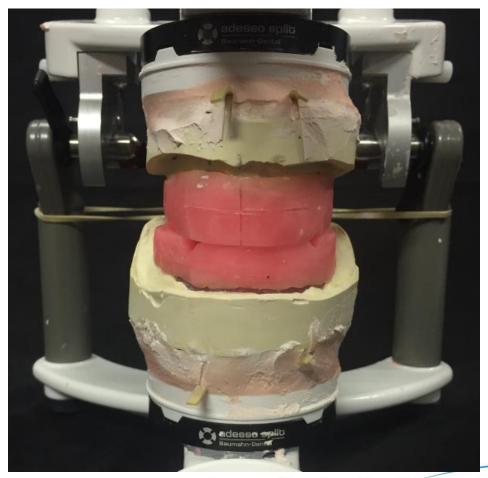






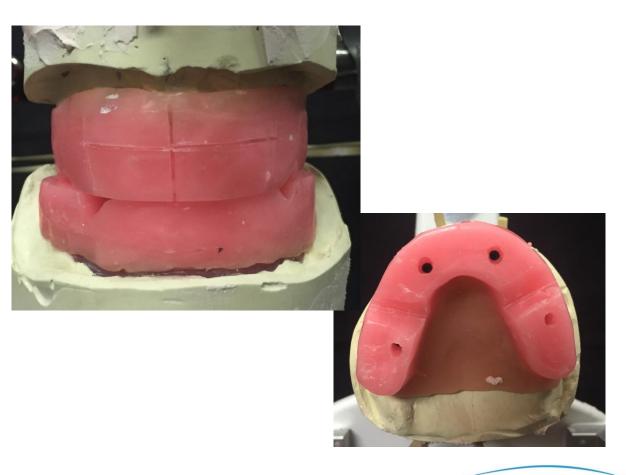
### Wax Bite Rim- Doctor

- 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



#### Diagnostic Wax Up- Lab

- 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!

#### **ACCUFRAME**









# Executive: Drew Schulter VP of Operations ajschulter@cagenix.com

Sales:

Eric Philburn
Sales Executive

ephilburn@cagenix.com

Engineering:
Kyle Fraysur
Director Engineering
kfraysur@cagenix.com

#### Cagenix Contact

Got Questions?
Call (866) 964-5736 or visit www.cagenix.com

