

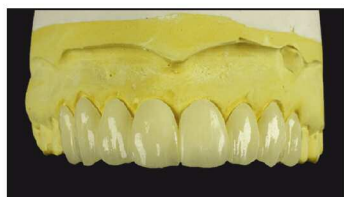
DIAGNOSTIC CASE PLANNING SERVICES & PREPARATION GUIDELINES



MOUNTED
DIAGNOSTIC CAST



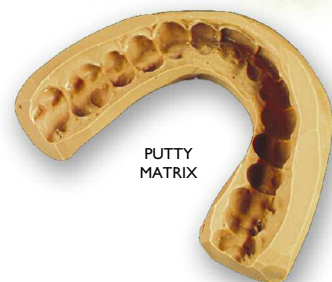
DIAGNOSTIC WAX-UP



CUSTOM TEMPORARIES



PREPARATION
TEMPLATE



PUTTY
MATRIX

DIAGNOSTIC/CASE PLANNING SERVICES

DAL is dedicated to our role as your partner in providing predictable, high esthetic restorative solutions.

We are committed to advancing our skill level through continuing education with esteemed organizations such as the Spear Institute, the Scottsdale Center for Dentistry, the Ross Nash Institute, the Charlotte Center for Cosmetic Dentistry with Dr. Robert Lowe, the Colorado Center for Aesthetic Dentistry with Dr. Gary Radz, the Dawson Academy, and the Massad Institute for Higher Learning. This means you are working with a staff of extensively trained technicians using the most progressive case design strategy.

This clinical expertise and understanding is applied to our diagnostic and case planning services. Proper case planning is an essential component of successful treatment strategy and enables you to achieve consistent, predictable results.

DAL is well trained and highly experienced in offering you the following tools to assist you in all phases of planning.

Mounted Diagnostic Casts

DAL will mount your casts and die pin the model to allow you to analyze each tooth's function in the treatment plan.

Diagnostic Wax-Up

A diagnostic wax-up is prepared on a stone model detailing the design for proper function and tooth form. The diagnostic wax-up can be fabricated with traditional diagnostic monochromatic wax or, for an additional charge, with tooth coloring and layered incisors. A characterized tissue wax-up can also be provided enhancing the presentation to the patient while detailing any soft tissue modifications necessary. Patients can literally see their new smile and you can ensure more predictable results with this proper case planning tool.

Custom Temporaries

If preferred, DAL is qualified to supply you with custom temporaries that are fabricated from the diagnostic wax-up. Simply request temporaries when prescribing your diagnostic wax-up.

Preparation Template

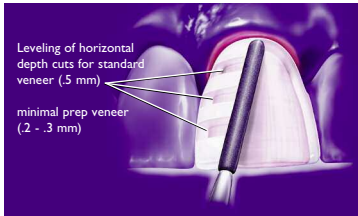
A preparation template can be fabricated from the diagnostic wax-up using a transparent plastic. This template can be used to visually measure tooth reduction for predictable results. Simply seat the template over the prepared teeth to ensure adequate clearance has been provided for the technician to fabricate the case.

Putty Matrix for Chairside Temporaries

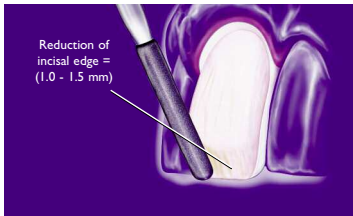
Additionally, a putty matrix can be prepared of the diagnostic wax-up for easy and predictable fabrication of chairside temporaries. (An impression with tray can also be substituted for the putty.)

Chairside Technique:

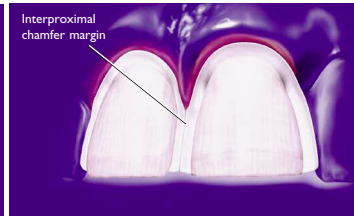
1. Simply insert the matrix over the prepared teeth and verify fit.
2. Spot-etch the prepared teeth if etched retention is necessary.
3. Apply primers on the prepared teeth.
4. Inject temporary resin into the matrix.
5. Seat the matrix over the prepared teeth and firmly hold the template in place while the resin cures.
6. Remove the matrix once the temporary resin has cured. The temporary may stay on the teeth. If necessary, remove it for shaping and trimming.
7. Trim excess resin, adjust occlusion and polish.
8. If the temporaries were modified from the original diagnostic wax-up, then record a new impression of the temporaries and instruct the laboratory to follow the temporary model for fabrication of the final restorations.



FACIAL PREP INTERIOR
A uniform thickness of .5 mm of facial enamel is removed with the Brasseler KSI Incisal Reduction bur



INCISAL PREP
Bevel back the incisal edge.
Recommended Brasseler bur:
KSI Incisal Reduction



CHAMFER MARGINS
Interproximal depth chamfer margins are prepared with the Brasseler KSI 6 Incisal Reduction Bur

Stacked Porcelain Veneers

Stacked Custom Veneer



FIGURE 1 - A Brasseler 169L should be taken through the contact area. The super coarse 5856-016 can be used to create depth cuts. Creating at least 1.25 reduction on the labial tapering to .8-1.0 mm at the gingival margin is adequate for Captek.

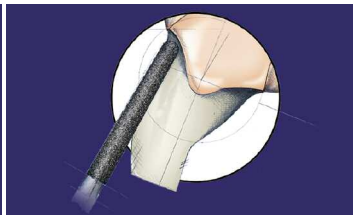


FIGURE 2 - Sinking the 5856-016 full depth will create good reduction on the labial, proximal and gingival lingual. Incisal reduction can be achieved with the 5856 (1.5-2.0 mm). The 5379-023 is ideally contoured for lingual reduction (1.2-1.5 mm).

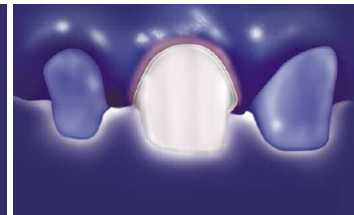
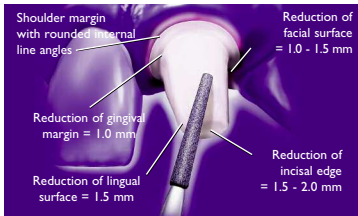


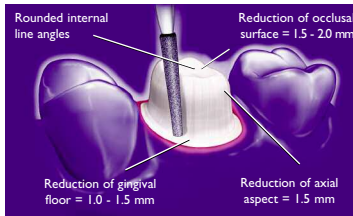
FIGURE 3 - Smooth and refine preparation with either the rounded end tapered chamfer med 8856-016 or the tapered chamfer 8878K-016. Polishing preparations with Brasseler points and cups to remove rough edges is recommended.

Captek

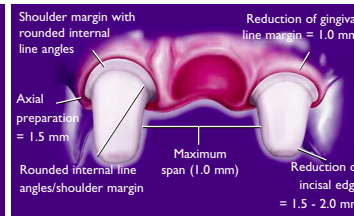
High Noble PFM



FULL-COVERAGE CROWN
Recommended Brasseler bur:
6847KR-016 Axial & Incisal Reduction



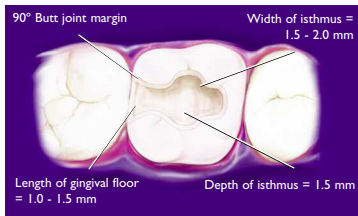
POSTERIOR CROWN
Recommended Brasseler bur:
6847KR-016 Axial Reduction



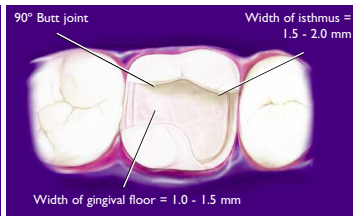
3-UNIT ANTERIOR BRIDGE
Recommended Brasseler Bur:
6847KR-016 Axial Reduction

All Ceramic

IPS Empress Esthetic / IPS e.max
Venus
Procera Alumina
Procera Zirconia
Lava Zirconia
Katana Zirconia
Prismatik CZ Zirconia



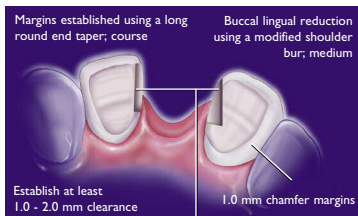
INLAY
Recommended Brasseler bur:
6845KR-018 Creating Isthmus



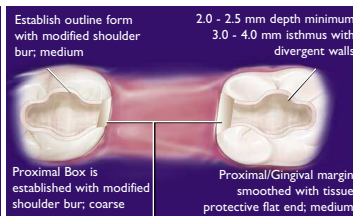
ONLAY
Recommended Brasseler bur:
6845KR-018 Creating Isthmus

Premise Indirect (BelleGlass NG)

Inlay / Onlay



MARYLAND BRIDGE
Proximal Box Preparation
3.0-4.0 mm depth from incisal
1.5 mm gingival floor depth
Suggested impression material:
Polyvinylsiloxane wash with putty tray material



INLAY BRIDGE
Proximal Box Preparation
3.0-4.0 mm depth from incisal
1.5 mm gingival floor depth

Premise Indirect (BelleGlass NG)

Maryland Bridge
Inlay Bridge



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