



Gnatho-Gnews

DENTAL LAB NEWS AND TECHNOLOGY TRENDS

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Surgical Guides Lead to Success with Implant Placement

By Steve Mott, Implant Department Manager

Restorative dentists are well aware that proper implant placement is crucial to the success of implant supported restorations. It frustrates me as to how often we receive implant cases with compromised implant positioning in respect to the restorative requirements and expectations of the patient. Granted, there are occasions in which the implant surgeon cannot place implants in positions that are in harmony with restorative needs even if a carefully designed surgical guide stent was available at the time of surgery. However, way too often I hear that the surgeon was not supplied with a surgical guide stent in instances that I'm confronted with what amounts to a restorative and laboratory nightmare due to poor implant placement. Perhaps these instances would be more excusable in the early days of implant dentistry when experience levels were still low, but such an excuse does not hold up today, nearly 45 years since Professor Branemark placed the first root form implant.



Occlusal view of a maxillary Surgical Guide with guide holes drilled.

Thankfully, at the present time, the majority of the implant cases we're involved with have undergone proper presurgical planning including a well designed surgical guide having been fabricated and sent to and used by the implant surgeon. Evidence of this is the frequency in which we are involved in the presurgical planning process plus the large volume of surgical guides made at Gnathodontics and the growing demand for this service.

In order to fully utilize our presurgical implant services we require the following:

- For single implant cases or small semi-edentulous designs: preliminary cast with bite registration
- For large semi-edentulous or fully edentulous designs: preliminary casts mounted to a semi adjustable articulator, preferably utilizing a facebow transfer for mounting the maxillary cast.
- Written description of the anticipated treatment plan and any alternative treatment plans under consideration
- Most likely implant positions and implant system to be used
- Request for a cost estimate (especially important for larger reconstructions and/or unfamiliarity with our implant pricing structure)

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Surgical Guides (continued from cover)

From the materials and information on the previous page we will provide you with:

- Diagnostic wax-up in white presentation wax
- Radiographic imaging guide (if needed) with markers or barium coating
- Surgical guide duplicating the diagnostic wax-up in clear orthodontic resin
- Guide holes or guide sleeves at the diameter you specify placed at ideal restorative positions
- Cost estimate(s) based on proposed treatment plan(s)



Anterior view of maxillary Surgical Guide.

In the near future (hopefully by the first quarter of 2010) we will be installing the newest generation NobelProcera Scanner here at Gnathodontics. Included in the software package will be the Nobel Guide Software which will enable us to assist you in digitally planning implant placement based on cone beam CT imaging. We will

keep you informed of these exciting new developments. In the meantime, if you are not currently utilizing our presurgical implant services I urge you to do so. You will end up with far fewer “nightmares” and far more successful implant cases and most important of all, satisfied patients ❖

Gnathodontics’ Same Day Repair/Reline Services (Denver Metro Area Only) By Brenda Boone, Front Office Manager

Our normal turnaround for relines and repairs is one production day in the lab. In other words, if we pick it up Tuesday morning, you would get it back on Wednesday morning by noon. (In the Metro area.) Your patients’ don’t want to be without their teeth overnight? To serve these patients who want a rushed service, we offer same day relines and minor repairs for an extra fee.

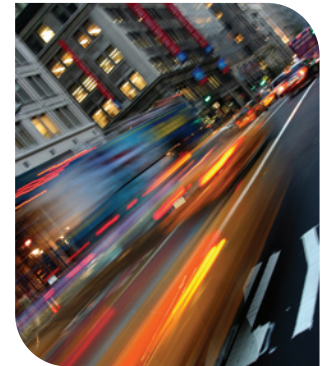
Because of the coordination involved in rushing a same day case, these repairs must be scheduled in advance and we can only accept a limited number of these cases per day. When you schedule these cases, your pickup must be ready by 9:00am. That gives us enough time to get it back to our office and do the repair in time for our regular afternoon drivers to deliver the case. Our regular afternoon driver can return the case to you by 3:00pm.

In order to do same day repairs, we must get the case to our office early in the morning and have a few hours to work on the case. In order to get the time we need, we send a special driver who only picks up same day repairs. Our same day driver is responsible for picking up same day repairs and relines and getting them straight back

to the lab. It is important that you give the case only to this driver and not to any courier service or normal delivery driver who may come by. We will call your office that morning to confirm that your case is ready to pickup.

Because of the rushed nature of these repairs, we can only promise same day service for simple acrylic repairs. In the amount of time allowed, we cannot repair clasps (2 days in lab), replace attachments, or do soft relines (also 2 days in lab).

Another option is for your patient to deliver the case with prescription and wait for the repair here at our lab. This also should be arranged in advance to ensure that the appropriate personnel are here. Thanks for your understanding of these time sensitive cases. It is our goal to provide you with the best possible service AND repair/reline. ❖



Valplast: Flexible, Metal-Free Partial Dentures

Chair Side Adjustment, Repair & Cleaning Tips

By Steve Kelly, Removables Department Manager

Valplast is a very popular metal-free flexible resin material that is indicated for both bi-lateral and uni-lateral tissue supported tooth replacement. Cases for Valplast are surveyed and designed here in the lab similar to our Wironium cast metal partials to ensure an accurate path of insertion.

Insertion Instructions:

When inserting a Valplast partial you should first submerge the appliance in hot, (almost boiling) water for 60 seconds, (this allows for a smooth insertion and excellent adaptation to natural tissues in the mouth). Then, once the appliance has cooled to a tolerable level, insert into the patient's mouth. If a clasp isn't fitting perfectly, you may adjust it slightly by immersing that area of the partial in hot water and bending the clasp outward or inward as needed.

Adjusting:

If any reduction or adjustments are needed, the material needs to be handled differently than conventional acrylics. A #13 green mounted stone, (similar to those used for porcelain adjustment) may be used to quickly reduce the surface yet leave it very smooth. If melting occurs, use lower rpm's and lighter pressure. You can also use a green rubber point using the same motions to achieve a fine smooth finish. A sharp scalpel can be used to remove any build-up or roughness. The surface should look almost polished at this point. Use a course pumice and brown Tripoli with a soft rag wheel until completely smooth. A high luster can be achieved using Val Shine polishing compound with a soft rag wheel.

Adding Teeth and Repairing:

Teeth and clasps may be added to the Valplast appliance by taking an alginate impression with the partial in place. To rebase a Valplast partial, begin by taking the rubber base impression under the case. To assure full and correct occlusion as the rubber material sets inside the partial, your patient's mouth should be closed. When the rubber base impression has set, take an overall alginate impression. As you remove the case from the mouth inside the impression, make certain the case is positioned correctly in the impression. Pour the model promptly and send it to Gnathodontics without separating the denture from the model.



Gnathodontics' maxillary Valplast flexible partial.

Cleaning Valplast Appliances:

Using the recommended Pro Tech cleaner or TCS cleaners will help to prolong the life of the appliance and keep it looking new. The use of abrasive cleaners such as tooth paste is discouraged as they will roughen the surface and cause discoloration. For more information on Valplast, contact myself at ext. 200 or Ralf Weisenbeck at ext. 210. ❖



TCS and Pro Tech cleaners are available from Gnathodontics. Call for more info.

Gnathodontics' Noble Crown

By John Bozis, Customer Relations Manager

With the price of gold near all time highs, it makes sense to prescribe Gnathodontics' flat rate Porcelain to Noble restorations. Using the latest Noritake and Vita porcelains, our highly skilled ceramists create vital, life like restorations over our super strong, precise fitting Noble substructures, (Argen Argelite 70+). Suitable for single units and long span bridges alike, our porcelain to noble restorations are built to your exacting instructions with special emphasis being placed upon form and function. You won't find a more esthetic and precise fitting pfm restoration anywhere for your dollar.

Priced at \$159 per unit, which includes alloy, our Noble Crown restoration will satisfy your patients' expectations while providing you with a quick seating, sensibly priced restoration that you can be proud to prescribe! And, as always, each Noble Crown restoration is hand made by skilled technicians here at Gnathodontics, Ltd.! ❖

Gnathodontics, Ltd. Noble Crown Restorations provide:

- Predictable pricing
 - Excellent esthetics
 - Precise fit
 - Quick seating
 - Gnathodontics' meticulous attention to detail
- * bridge connectors & metal occlusion extra*

Specifications for our Noble Crown alloy:

Argen Argelite: 70+

- Au: 3.0%
- Pd: 70.0%
- Ag: 9.5%
- Sn: 9.8%
- Zn: 5.0%
- In: 2.0%
- Ga: trace
- Ru: trace

