# **Double Arch**

# dentate surgical arch | opposing edentulous surgical arch



## **PHOTOGRAPHS**

- □ 1. Full face full smile
- 2. Full face exaggerated smile
- 3. Full face profile
- 4. Center retracted in occlusion
- □ 5. Left retracted in occlusion
- 6. Right retracted in occlusion

For ideal smile design

For verification of bite







Bad

#### The patient should wear any existing prostheses in the photos. Photograph the patient standing up, looking directly at the camera.

- Capture photos before taking impressions to keep the lips and teeth clean.

# **MASTER CASTS / IMPRESSIONS**

- ☐ Capture ALL land areas dentate arch only
  - Must capture full palate if temporary denture is to be ordered.
  - If the patient has a partial for the surgical arch, capture impressions with and without the partial seated.



Full palate, no holes



Missing palate Missing anatomy



## **BITE REGISTRATION**

- Bite registration full occlusion or CR bite
  - Ensure the patient is in full occlusion or specify if it's a CR bite.
  - Use enough material to capture the occlusion, but not too much as to open the bite.
  - If the patient has an opposing prosthesis, the patient should wear it to stabilize bite.



**Full occlusion** 



Centric only

## CBCT SCANS - DUAL SCAN PROTOCOL

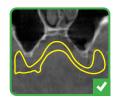
- Ensure denture fit no rock and proper occlusion
- Prepare denture for scanning 6 markers, random placement
  - Patient has a good denture: Prepare by placing 6 radiopaque scan markers (www.suremark.com) or 6 gutta percha points randomly in the pink area of the labial and buccal flanges.
  - Patient has a poor denture: Either fabricate a new denture, perform a hard reline, or place blue mousse inside the denture to stabilize. Soft relines are NOT acceptable.
  - Patient does not have a denture: A new denture or scan appliance must be fabricated.
- ☐ CBCT scan BOTH arches with the denture in the mouth, in occlusion, not separated
- ☐ CBCT scan denture alone resting on foam, not plastic
  - Scan must include the patient from the chin up to the nasal cavity.
  - Do not scan the patient alone without their denture.
  - If the field of view only allows one arch, send individual scans of each arch.
  - Export DICOM files (.dcm) from the CBCT into a patient folder- this should contain 200-400 individual .dcm files. Zip the patient folder and upload with Rx.



O Scan markers, placed randomly



Do not place on teeth/intaglio



Denture fully seated, no voids



Denture not fully seated, black voids