



Memo

To: All Doctors

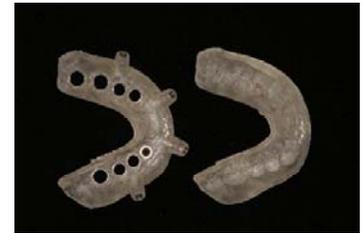
Re: Immediate Load Provisional Setup

It is imperative to try in setups prior to doing any immediate load prosthesis. The setup is used to determine the correct bite, smile line, contour, tooth placement, and esthetics. Standard denture principles are employed, including master model and bite rim if edentulous. In many instances teeth are present and immediate extraction will be performed.



Therefore, a two-piece setup is made where some teeth remain on the model and the others will go into the mouth on the setup. If a full arch of teeth is present, a diagnostic setup will be approved by the doctor and patient.

Once the setup is verified a scanning guide can be made. The patient will wear the guide in a CT scanner and the data is imported into implant planning software. The correct implant placement is determined from this scan and a surgical guide is produced.



The original setup remains at the lab on the articulator. The only things required the day of the surgery are impression copings, healing caps, analogs and temporary cylinders, and a special dual form bite verification appliance.

From the desk of

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If the case is hand delivered to the lab by noon, it will be ready to be picked up the next day by noon. If the impression is sent overnight delivery, it will be completed the day it is received and overnight delivered the next morning to stay within the 48-hour window



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Re: Immediate Load Provisional Impression Procedure

Before you take the impression, you must remove the healing cap. It is plastic with a screw inside of it. You can remove the screw by unscrewing it with a unigrip screwdriver, which is also used for the final restoration screw.

Place the impression copings on top of the implants one at a time. Be especially careful not to remove all the healing abutments at one time. In the time it takes to place the individual impression copings, the tissue can start to shrink around the implants. Turn the entire impression coping clockwise on top of the abutment. The impression coping will screw onto the abutment.



Tighten with finger pressure. If it is too slippery, you can use a dental dam to get a better grip. When completed, the impression coping will be flush to the base of the abutment. Take an X-ray to confirm that the impression coping is fully seated.

Fill the tray with impression material. Use polyether or polyvinyl impression material. Inject some material around the impression coping. Place the tray into the mouth. After the material hardens, remove the impression from the mouth. Remove the impression coping from the abutments in the mouth and replace the healing abutments. Send the impression coping back to the lab with the impression.



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Re: Immediate Load Provisional Bite Verification Appliance

The original setup remains at the lab on the articulator. The only things required the day of the surgery are impression copings, healing caps, analogs and temporary cylinders, and a special dual form bite verification appliance.



Place the healing caps onto the abutments in the mouth. Place the bite verification appliance onto the opposing teeth.



The patient should be able to close his or her mouth with enough clearance inside for the healing caps. If the excess material is cutting or pinching the patient's gum it can be trimmed.



The bite appliance mimics the final prosthesis. If all looks good, open the patient's mouth and place impression material into the appliance. Have the patient close down to the same position as before and allow the material to set. After it sets, open the patient's mouth and remove it.

Pack the impression, the bite verification appliance, and all necessary materials in a bag and send to the lab.

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Re: Immediate Load Provisional Insertion



The final step is the immediate loading of the provisional. Simply place the frame into the mouth and tighten the screws. *When screwing directly to an implant, the screw should be torqued to 35 ncm with a torque driver. When screwing into a multi-unit abutment the screw should be torqued down to 15 ncm with a torque driver.

After the screws are torqued in, place gutta percha into the hole to protect and seal around the screws. Place composite into the hole to seal the hole and hide the screw holes for better esthetics.

Nobel Biocare	Direct To Fixture	35Ncm
	Abutment	15Ncm
Biomet 3i	Square Screw	23-25Ncm
	Hex Screw	20Ncm
Straumann	Direct to Fixture	35Ncm
	Abutment	15Ncm
Dentsply	3.5/4.0 (Aqua)	20Ncm
	4.5/5.0 (Lilac)	25Ncm
	Provisionals	15Ncm
Zimmer	All Systems	30Ncm
Neoss	Direct to Fixture	20Ncm
	Abutment	32Ncm
	Provisional	20Ncm

*torque setting vary depending on which implant manufacturer is used. Always verify the correct torque setting prior to insertion.

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