

# Top 10 Tips & Tricks for a Successful Removable Outcome

by Jim Gorgol, CDT & Rich Weber

With over 85 collective years restorative experience fabricating dentures & partials for thousands of satisfied doctors and patients, Jim and Rich are eager to share with you the top 10 things they've learned from a lab's perspective:

1. **The posterior palatal seal (PPS) is an important structure aiding in retention of maxillary complete denture. Failure to properly record it may lead to seal failure and/or decreased retention.** *An old tried and true method is using an indelible marking stick to mark the hamular notches and draw a line at the junction of the hard palate to the soft palate orally. This will then transfer to the impression.*
  
2. **A couple of techniques that will greatly increase the successful reline of existing dentures:**
  - a. **Have the patient leave the denture out of their mouth the night before the appointment and until seen.** *This will allow the tissue to "rebound", getting a more accurate representation of the tissue (try to schedule reline appointments first thing in the morning).*
  - b. **Use a tissue conditioner.** *This works really well with immediate dentures. It could take more than one application to allow the healing to fully take place. The tissue conditioner would work as your impression.*
  - c. **Please don't use a heavy body impression material...we really don't want to displace the tissue.**
  
3. **The use of custom trays cannot be overstated,** whether it be for full or partial denture cases. The custom tray will allow you to better control the thickness of the material, accommodate any anatomic anomaly such as large lingual tori, it is more stable than a stock tray, and it can be used again for the same patient.  
Remember to:
  - a. **Try to get the best preliminary impression possible capturing as much as possible** *(this is sometimes very difficult because of stock trays not fitting properly and the gag reflexes of some patients).*
  - b. **Sit the patient up and make them as relaxed as possible. Getting good preliminary impressions will allow the laboratory to capture all borders and extensions** *which can help eliminate some of your difficulties getting full mouth impressions of patients.*
  - c. **Let the laboratory know as to the type of impression material to be used so the tray can be designed for your preferred impression material.**

4. **Getting an accurate midline, smile, and lip line is important. *Why not have the patient stand or at least turn their body in the chair to face you?*** This way they are allowing you to see them straight on, this will greatly increase the accuracy of your measurements. Be sure to mark them up on your bite block.
5. **When prescribing cast partial dentures, *why not have the lab design the framework when the preliminary model comes in for that custom tray?*** Surveying the model, cutting in rest preps and designing the type of clasps that will function best, both for aesthetics and retention.
6. **Take the patient's gingival shade into consideration. *Indicate on the Rx if a lighter pink, light, medium, or dark ethnic gingival shade is needed.*** If in doubt, a sample of the shade can be sent to your office for comparison.
7. **Patients often want Hollywood white tooth shades and then become unhappy with the drastic change.** We can gladly send multiple tooth cards for patient presentation and they are fully refundable if not used.
8. ***If your patient's Clear Advantage Plus hard/soft nightguard is snug, run it under warm (not hot) water for 10 seconds prior to insertion. This will allow for optimal fit and comfort and eliminate any "tightness" the patient may feel.***
9. ***Take pictures – Both prep and anytime there is something you'd like to replicate or change. You don't need a high-end camera...cell phone pictures are fine.***
10. ***Don't hesitate to call and ask for Rich or Jim while the patient is still in the chair if you have a question on how best to proceed: 800-552-7890.***



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1504 WALL ST. NAPERVILLE, IL 60563

PH: 800.552.7890 Fx: 630.369.6539

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