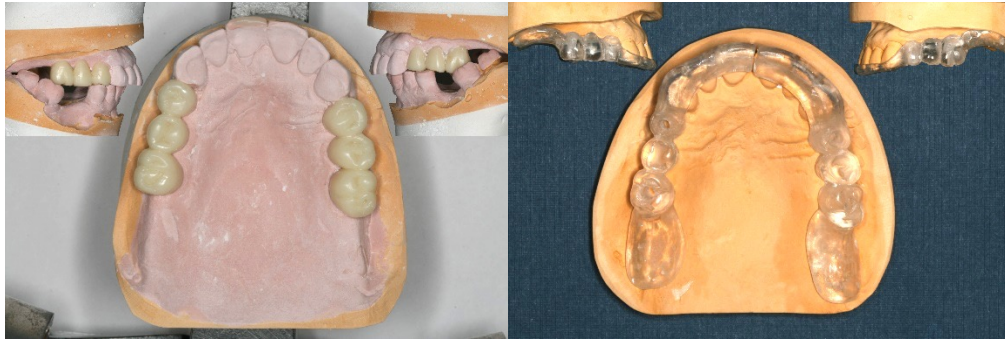


## PROTOCOL FOR IMPLANT SURGICAL GUIDES

### Division of Implant Dentistry, Faculty of Dentistry, Dalhousie University

- 1) Make the initial impression using medium body polyvinyl siloxane. Use a plastic stock tray with PVS ADHESIVE! Perforating the tray with multiple holes can improve retention of the impression. DO NOT USE METAL STOCK TRAYS.
- 2) Submit to lab with a request for 3 casts (master, cast for wax-up, cast for acrylic processing)
- 3) Diagnostic wax-up: the actual morphology of the final restoration/prostheses must be created.
  - a. **Fixed cases** (crowns and bridges): Use sculpting wax. Anatomy should be natural and embrasures must be present. The buccal contours be harmonious with adjacent teeth. Wax-ups for bridges or multiple crowns could be done by the production lab.



- b. **Removable cases:** Use denture teeth and baseplate wax. An acceptable set-up must be established before transforming it into a surgical guide. If the patient has an adequate existing denture with acceptable borders and occlusal plane, the current denture can be duplicated to make the surgical guide. Otherwise teeth should be set on a new record base and once the wax try-in has been approved, it will be duplicated in acrylic to be used as a surgical guide.



- 4) Have your supervising restorative instructor approve the wax-up by signing the 'Surgical Guide Wax Up Approved' line on the Checklist for Implant Treatment form. Show this signed form to the Dental Laboratory staff when the case is re-submitted for surgical guide fabrication.
- 5) The production lab will use the cast from the 3<sup>rd</sup> pour along with the wax-up made on the 2<sup>nd</sup> pour to fabricate the surgical guide in acrylic.
- 6) Have your supervising implant instructor help you make the hole(s) in the guide.
- 7) Submit the surgical guide to the surgeon well in advance of the planned surgery (min. 1 week)