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Lower Stone
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Requirements for Impressions

Whole You Nexteeth Starter Kit

- Impression Gun
- Permanent Marker or Pen
- Bite Registration Material
- Stone (For Single Arch Denture Only)
- Surgical Blade
- Bur
- Mixing Tips
- Light Body PVS (Fast Setting Recommended)
- Heavy Body PVS (Fast Setting Recommended)

- Jaw Gauge x 1
- Single Arch Attachment x 8 (2 of each size/orientation)
- S, M, L, XL x 2
- DENTCA Trays x 8 (2 of each size)
  - Upper and Lower
- Lip Ruler x 1
- EZ-Tracer x 8

• DENTCA Trays are intended for one-time use only.
• Inspect DENTCA Trays and Starter Kit items for defects prior to use. If any defects are present, do not use and contact Whole You.
Select the correct tray size (Small, Medium, Large, Extra-Large) that best fits the patient's mouth. Compare tray sizes against the patient's existing dentures or directly in the patient's mouth.
**I. Maxillary Impression**

**Layer 1 (Heavy Body):** Apply thick layer of heavy body PVS to trays. Ensure to slightly overload posterior.
- Generally, about half a cartridge of heavy body is required per arch.

**Layer 2 (Wash):** Apply thin layer of light body PVS on top of entire heavy body impression.

**BORDER MOLDING**
- Keep constant pressure on the tray, using both finger spots on the occlusal surface to apply even pressure.
- Pull, stretch and tug the patient’s cheeks and mouth muscles firmly to ensure proper border molding.
- **Do not skip or neglect this procedure.**

**A**

Apply thick layer of heavy body PVS to trays. Ensure to slightly overload posterior.

**B**

Relieve exposed areas with a bur. Reapply heavy body PVS to adjusted borders, and repeat border molding steps.

**C**

Relieve exposed areas with a bur. Reapply light body PVS to adjusted areas, and repeat border molding steps.

**D**

Relieve exposed areas with a bur. Reapply heavy body PVS to adjusted borders, and repeat border molding steps.

**Repeat entire sequence 4 times (#1-4) for both the heavy and light body impressions.**
II. Mandibular Impression

A. Layer 1 (Heavy Body): Apply thick layer of heavy body PVS to trays. Ensure to slightly overload posterior.
   - Generally, about half a cartridge of heavy body is required per arch.

B. Relieve exposed areas with a bur. Reapply heavy body PVS to adjusted borders, and repeat border molding steps.

C. Layer 2 (Wash): Apply thin layer of light body PVS on top of entire heavy body impression.

D. Relieve exposed areas with a bur. Reapply light body PVS to adjusted areas, and repeat border molding steps.

- Proceed to border molding

BORDER MOLDING

Keep constant pressure on the tray, using both finger spots on the occlusal surface to apply even pressure.

- Pull, stretch and tug the patient's cheeks and mouth muscles firmly to ensure proper border molding.

Do not skip or neglect this procedure.

- Have patient fully extend tongue, then move it side to side.
- Squeeze in both cheeks while the mouth is completely relaxed.
- Pull the patient's right cheek out. Then pull the patient's left cheek out.
- Pull the lower lip down.

Repeat entire sequence 4 times (#1-4) for both the heavy and light body impressions.
### III. Vertical Dimension (VD)

You must find the correct VD before recording CR. Use the steps below to determine VDO (vertical dimension of occlusion).

**A**  
Draw a cut line with a marker or pen.

**B**  
Make one clean cut through the impression material with a blade, then separate the posteriors.

- The separation junction can be found by looking at the buccal or occlusal side of the trays.

**C**  
Remove impression overflow from the occlusal surface and the buccal side nearest the occlusal surface.

- Cut away

**D**  
Attach center pin to mandibular tray.

- If pin is interfering with anatomy or causing discomfort, break the pin at the break line.

**E**  
Adjust pin intra- or extraorally with fingers or a tool to adjust VD. Remove and adjust extraorally, if needed.

**Determining VD without previous denture:**
- Adjust pin until the lips barely touch while at rest.

**Determining VD with previous denture:**
- Insert previous denture and use the Jaw Gauge (or tongue depressor and marker) to get a baseline VD.
- Determine by how much the bite should be opened or closed.
- Insert impression trays and adjust pin to reach target VD.

- **Ensure trays are not touching at any point.**

**If contact occurs:**
- Raise center pin to create space then prescribe in the order to decrease VD by the amount the pin was raised, or
- Relieve the occlusal sides of the trays with a bur.
IV. Centric Relation (CR)
Accurate CR recording is essential to accurate denture setup.

Attach EZ-tracer™ to maxillary tray to prepare for CR tracing. Alternatively, occlusal spray or permanent marker may be used to trace CR.

Maxillary tray bottom

Seat trays in patient's mouth; keeping the pin height that was set during VD procedures.

Choose any of these three methods:
1. Gothic Arch Tracing
2. Simplified Tracing
3. Direct Check Bite

Option 1. Gothic Arch Tracing
A Instruct patient to slide his/her mandible back and forth from the most anterior to the most posterior position.

- Guide the jaw with your hand to capture CR position.

B Starting in most posterior position, instruct patient to slide mandible laterally to the right, then return to posterior position. Repeat.

C Starting in most posterior position, instruct patient to slide mandible laterally to the left, then return to posterior position. Repeat.

Repeat all three sliding movements several times to draw an arrow that points posteriorly

D Record the CR position by drilling a dimple at the apex of the arrow.

- The dimple should be just big enough for pin.
Option 2. Simplified Tracing

A | Instruct patient to slide his/her mandible back and forth from the most anterior to the most posterior position.

- Guide the jaw with your hand to capture CR position.

Repeat sliding movements several times to create a distinguishable line.

B | Record the CR position by drilling a dimple at the most posterior point of the line segment.

- Using Simplified Tracing, the most posterior point of line segment represents the CR position.
- The dimple should be just big enough for pin.

Option 3. Direct Check Bite

A | Hold the patient’s mandible in the most posterior position and have them bite down numerous times. Take the trays out of the mouth to examine the direct check bite points.

- Stand behind the patient to hold their jaw in the most posterior position while they bite down multiple times.

Repeat biting movements, as necessary, to find the most repeatable point.

B | Record the CR position by drilling a dimple at the most posterior point where the highest concentration of points are gathered.

- Using Direct Check Bite, the most posterior point where the highest concentration of points are gathered represents the CR position.
- The dimple should be just big enough for pin.
V. Bite Registration

1. Seat trays back in the mouth and ensure the center pin is resting in the CR dimple.

2. ▲ Ensure trays are not touching at any point. ▲ If contact occurs, raise center pin to create space then prescribe in the order to decrease VD by the amount the pin was raised. Or adjust the occlusal side of the trays with a bur.

3. Have patient gently close without biting too hard. Inject bite registration material between trays to record bite.

▲ VERY IMPORTANT ▲ Hold the lower tray firmly in place while recording bite registration to prevent slipping or tilting.

Using the lip ruler, measure the upper lip length at rest, from the incisive papilla.

• View the lip ruler straight on for correct measurement. Viewing the ruler from an upward or downward angle will show an inaccurate measurement.

Sterilize Lip Ruler after each use.

Finished! You’re all done with the impression visit.

Ordering / Shipping

1. Place your order online at www.wholeyou.com

2. Sterilize all impression and bite items and anything to be submitted to Whole You before packaging.

3. Package, label and ship the impression parts (including detached posteriors) and the printed denture order form to Whole You.

“Don't forget posteriors!”
Single Arch Denture
Maxillary Denture
Mandibular Denture

Components

1. Upper Attachment Plate
   - No hole for center pin
   - Superior
   - Inferior

2. Center Pin
   - Superior
   - Inferior

3. Lower Attachment Plate
   - Hole
   - Lower Attachment Plate

DENTCA Tray Selection

Small & Medium
- Use S/M sized attachment plate with tray sizes S or M.

Large & X-Large
- Use L/XL sized attachment plate with tray sizes L or XL.

Select the correct tray size (Small, Medium, Large, Extra-Large) that best fits the patient’s mouth. Compare tray sizes against the patient’s existing dentures or directly in the patient’s mouth.
Single Arch
Maxillary Denture
I. Maxillary Impression

"Please refer to the impression procedures on page 4 and 5."

II. Vertical Dimension (VD)

"Please refer to the VD procedures on page 8 and 9 for step A, B, C and E."

A. Draw a cut line with a marker or pen on the maxillary tray.

B. Make one clean cut through the impression material with a blade and separate posteriors.

C. Remove impression overflow from the occlusal surface and the buccal side nearest the occlusal surface.

D. Attach center pin to Lower Attachment. Attach Lower Attachment to existing lower dentition with bite registration material.

E. Adjust pin intra- or extraorally with fingers or a tool to adjust VD. Remove and adjust extraorally if needed.

III. Centric Relation (CR)

"Please refer to the CR procedures on page 10-13."

IV. Bite Registration

"Please refer to the bite registration procedures found on page 14."

Ordering / Shipping

1. Place your order online at www.wholeyou.com

2. Sterilize all impression and bite items and anything to be submitted to Whole You before packaging.

3. Package, label and ship the impression parts (including detached posteriors, lower attachment, bite registration), the mandibular stone cast and the printed denture order form to Whole You.

"Don't forget posteriors!"

"Don't forget mandibular stone!"
I. Mandibular Impression

“Please refer to the impression procedures on page 6 and 7.”

II. Vertical Dimension (VD)

“Please refer to the VD procedures on page 8 and 9 for step A, B, C and E.”

A. Draw a cut line with a marker or pen on the mandibular tray.

B. Make one clean cut through the impression material with a blade and separate posteriors.

C. Remove impression overflow from the occlusal surface and the buccal side nearest the occlusal surface.

D. Attach Upper Attachment to existing upper dentition with bite registration. Attach center pin to Mandibular Tray.

E. Adjust pin intra- or extraorally with fingers or a tool to adjust VD. Remove and adjust extraorally if needed.

III. Centric Relation (CR)

“Please refer to the CR procedures on page 10 - 13.”

IV. Bite Registration

“Please refer to the bite registration procedures on page 14.”

Ordering / Shipping

1. Place your order online at www.wholeyou.com

2. Sterilize all impression and bite items and anything to be submitted to Whole You before packaging

3. Package, label and ship the impression parts (including detached posteriors, upper attachment, bite registration), the Maxillary stone cast and the printed denture order form to Whole You.

"Don't forget posteriors!"
"Don't forget maxillary stone!"
Tips for Successful Impressions

Tray Selection Tips
- Tray size can also be decided by matching the borders of a tray to an existing denture.
- Medium is usually the most common size.
- If the patient is between sizes, select the smaller tray.
- A different tray size may be used for the upper and lower arches.
- Trays can be adjusted before taking the impression with a bur or by heating with flame and bending.
- Please do not attach anything to the trays to act as a handle; instead, apply pressure to the finger rest points to ensure proper seating and even distribution of pressure.
- The clips locate on the facial side of the trays may be removed if causing discomfort.

Impression Taking Tips
- Impression procedures are generally easier to perform while at the 12 o’clock position (from behind the patient).
- Impression materials thickness should generally not exceed 8 mm. If the impression material is too thick, vertical working space becomes limited which makes VD and CR recording more difficult.

Impression Cutting Tips
- If there is enough vertical space, the upper tray may be left intact (uncut) while performing CR and VD procedures.
- To minimize stress on the tray, do not reattach the posterior sections once removed.

VD and CR Tips
- One full turn of the pin is about 1 mm.
- Practicing the tracing movements with the patient before actually tracing improves the quality of the CR tracing.
- Wipe the tracing plate of the upper tray before applying the EZ-Tracer; alcohol may be required to remove residue.
- If the center pin is loose, add wax to prevent it from rotating.
- The red section of the EZ Tracer should extend just beyond the tracing plate found on the occlusal side of the upper tray.
- The patient should not bite too hard - using the words “close” and “slide” can help convey this to the patient.
- A round #6 bur is recommended for drilling the CR dimple.

Bite Registration Tips:
- Wax bites are not accepted.
- When applying bite registration material, it is important that the patient does not bite too hard. Excessive force can bend the tray and lead to an incorrect bite.
- After taking the bite, view the impression/bite from the distal side and confirm that 1) the trays are not touching and 2) the pin is resting in the CR dimple.

For questions not answered by this manual, contact Whole You.