

Specialised Dental Technology Discipline

(Fixed Prosthodontics)

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Complete a fully anatomical diagnostic wax up of the central incisor.

Ensure you include the correct morphology and symmetry to the adjacent central incisor tooth.

The diagnostic wax up can be used to facilitate a dialogue between patient, clinician and technician to determine expectations, limitations and possibilities.





Diagnostic wax up to correct anatomical detail Fig 1.



Fig 2.

Lab putty matrix covers the labial aspect capturing all the detail.
Fig 2.

Fig 1.

<u>Specialised Dental Technology Techniques</u> Silicone key construction (Case A)





Fig 3.

Maintain correct labial form of the matrix by removing excess material (incisal area), to ensure the required working area is evident. Fig 3.





Fig 4.

Position the laboratory putty matrix to completely cover the anterior aspect of the diagnostic wax up of the central incisor. The image shown represents the space available for the restoration and represents the thickness of the removed fully anatomical diagnostic wax up. Fig 4.



Palatal aspect of the fully anatomical wax up incorporating the cingulum area which should correspond to the adjacent central incisor tooth. Fig 5



Fig 5.

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Fig 6.

Cover the incisal and palatal aspect. Fig 6





Trim the silicone key to the correct dimensions, removing excess material to maintain direction for the required information. Fig 7.

Fig 7.





All excess material has been removed to facilitate ease of visual evaluation of the required space for the definitive restoration. Fig 8

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Silicone key construction (Case A)





Cut the matrix into half directly through the centre of the tooth being restored. Fig 9.

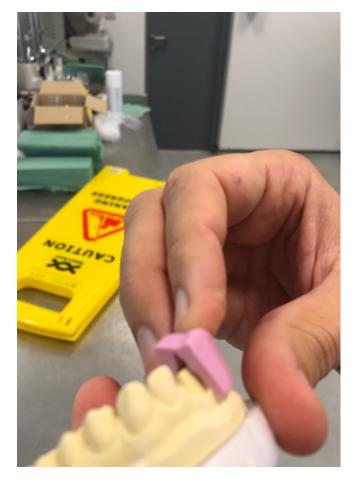


Fig 10.

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Silicone key construction (Case A)





The space available for the restorative material is made clearly visible by positioning the dissected matrix back onto the model with the diagnostic wax up removed. Fig 11.

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Silicone key construction (Case A)



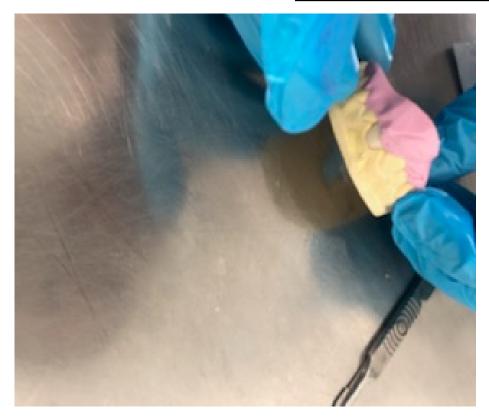


Fig 12.