

Dental Products



C&B impressions

The H&H cordless impression technique using PerfectIM Systems impression material

By Dr. Joe Steven, Jr., Wichita, Kan. Information provided by J. Morita USA Inc.

Technique

PerfectIM Systems®

Vinyl polysiloxane impression material.

Features

- Accurate final impressions of subgingival margins
- No retraction cord, gingival excision, or application of hemostatic agents necessary
- Two-step system eliminates the time-consuming task of packing retraction cord and therefore any possible subsequent discomfort
- Materials are cartridge-dispensed, radiopaque, hydrophobic, and thixotropic (except SnoWhite and Final Wash)



- Tasteless and odorless
- Exceptional dimensional stability
- Immersible in aqueous disinfectants
- A range of working/setting times and viscosities is available for any impression procedure

J. Morita USA Inc.
www.jmoritausa.com

9 Mason
Irvine, CA 92618
888-566-7482

Following are step-by-step procedures for the H&H cordless impression technique using **PerfectIM Systems** vinyl polysiloxane impression material.

1. Immediately following the crown preparation (Fig. 1), the assistant hands the clinician a triple tray loaded with the 30-second Blue Velvet bite registration material (J. Morita) (Fig. 2).
2. Place the tray into the patient's mouth and have the patient close properly and tightly. Have the assistant hold the patient's chin, while the patient bites down for one minute. *Note:* During this initial impression, there is no hydraulic compression at the margins (Fig. 3).
3. After the material sets, ask the patient to open, keeping the impression firmly seated onto the opposing arch.
4. Rinse any blood or saliva from the impression in the mouth and dry it (Fig. 4).
5. The assistant hands the clinician a cartridge gun that contains SnoWhite wash material (J. Morita). *Note:* Avoid injecting too much wash material into the impression of the prepped tooth. This doesn't have to be exact, but try to fill it about halfway full of the material. It is better to use less wash material than to overfill it and have it flow onto the adjacent teeth.
6. Inject the material only into the area of the prepped tooth within the impression (Figs. 5 and 6) and have the patient bite together tightly again for 1 minute (Fig. 7). During this dual impression stage, hydraulic pressure causes the impression to precisely record subgingival margins in the presence of blood and saliva and eliminates the need for packing cord (Fig. 8).
7. The assistant removes the tray, and the clinician inspects it for accuracy (Fig. 9).

The H&H technique

The H&H cordless impression technique developed by Dr. Jeffrey Hoos can save anywhere from 10 to 20 minutes per procedure and much more time for multiple preps. There are several advantages to this technique that benefit the patient and the office's bottom line.

- There is no need to stop the bleeding because of the hydrophobic nature of this



Fig. 1 The prepared crown.

- vinyl polysiloxane material.
- It is not necessary to pack retraction cord because of the hydraulic pressure created during the dual impression technique.
- There is no need to use any hemostatic solutions that patients detest.

The procedure is efficient, simple, and increases patient comfort, saves treatment time, and gets great results.

When first trying this technique, start off with a single-unit posterior crown and test your technique along with your lab technician.

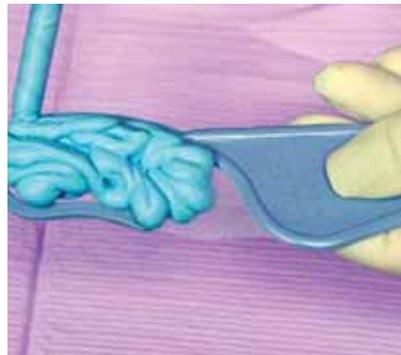


Fig. 2 Triple tray filled with Blue Velvet bite registration material.

This technique requires more die spacing than conventional crown techniques especially at the occlusal line angles. The lab technician must apply more die spacer (approximately 40 microns), especially at the occlusal and axial line angles. Every lab is different, so simply explain that their die spacing technique may need to be modified for H&H cases.

Wait until seating the first crown before attempting the procedure with other patients.

DPR

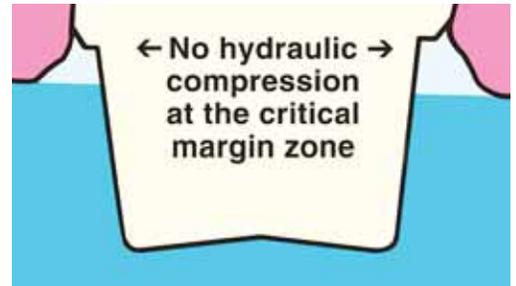


Fig. 3 There is no hydraulic compression at the critical margin zone.



Fig. 4 Rinse blood or saliva from the impression and dry it.



Fig. 5 Inject the wash material only on the area of the prepped tooth within the impression.

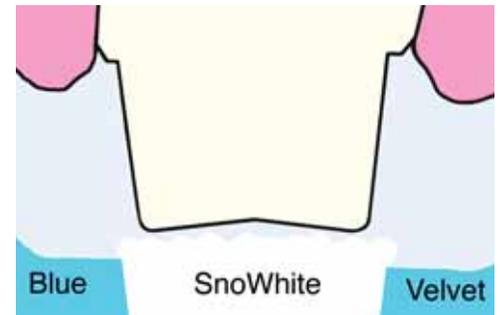


Fig. 6 The appropriate area of the tooth to inject the wash material.



Fig. 7 Have the patient bite together for one minute.

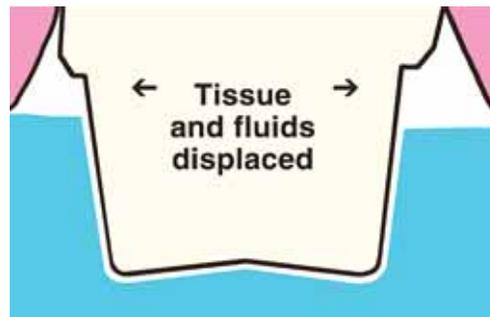


Fig. 8 How the tissue and fluids displace in patient's mouth.

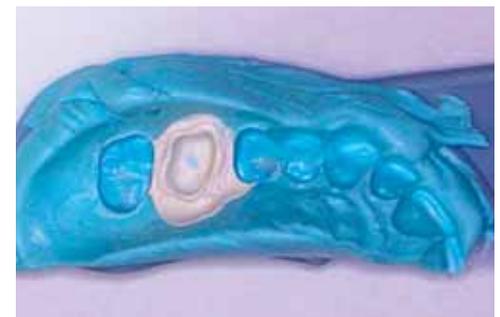


Fig. 9 The completed impression.