



Closed tray technique using the indirect transfer coping

The closed tray, also known as the indirect transfer method, is used to make a single or multiple-unit, implant-level impression for fabrication of a working model. The biggest advantage of the closed tray method is that it is easier to apply in the clinic and there is no need for an individual tray. Since a prefabricated tray is used, the thickness of the impression materials around the impression post is greater, thus providing more support and a more stable impression.



component options

- Conical impression post, closed tray (including coping screw)
- Conical impression cap
- Conical lab analog
- .050" (1.25mm) hex driver

1 Remove the healing abutment

Remove the healing abutment using an .050" hex driver. Confirm the implant prosthetic platform is free of any bone debris or soft tissue.



Note:

If a custom cast is planned, the emergence will be determined by the lab prescription.



Helpful Hint:

When placing impression posts on multiple implants, remove one healing abutment at a time, replacing it immediately with the closed tray impression post. This reduces the likelihood of soft tissue collapse onto the implant. It is recommended to work from posterior to anterior.



2 Place the conical impression post (closed tray)

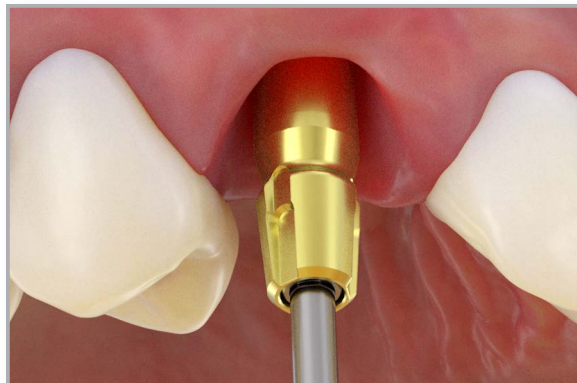
Hand-tighten the conical closed tray impression post on the implant. The conical closed tray impression post is rotation-symmetrical and does not require any specific orientation. Carefully rotate the impression post in the implant until the cams engage with the grooves of the implant and gently hand-tighten (10-15 NCm) the coping screw to retain the impression post.

Take a radiograph along the long axis of the implant to ensure that the impression post is seated completely into the grooves of the implant.



Note:

The X-ray tube must be positioned perpendicular to the implant prosthetic platform.





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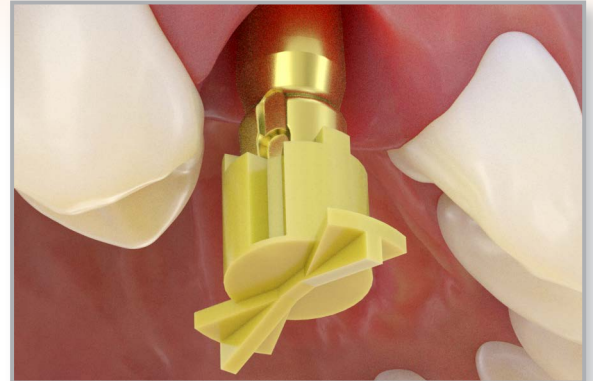
3 Place the impression cap

Place the appropriate impression cap onto the conical closed tray impression post using the guide grooves until a detectable pressure point is reached and the impression cap is clearly fixed into place. Orient the wings of the impression cap to be buccal-lingual.



Note:

Three guide grooves on the impression post (each at 120°) allow for a contact-free placement with respect to the adjacent impression caps or adjacent teeth. The extensions of the impression caps must not be removed.

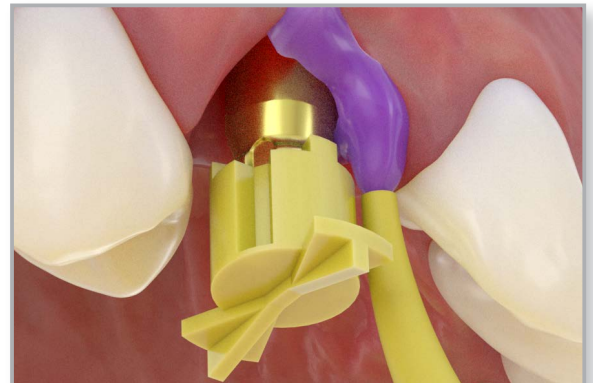


4 Make a full-arch impression

Right before taking the impression, check again to ensure that the impression caps are seated correctly.

Syringe a medium or heavy body elastomeric impression material around the coping body, leaving the screw exposed. Load the tray with impression material and make the impression.

After the impression material has set, remove the tray from the mouth. The impression caps must stay in the impression after the impression tray has been removed. If this is not the case, take the impression again.



5 Remove the impression post

Loosen the coping screws by hand or by using the .050" hex driver, pull the coping screw back and then remove the conical closed tray impression post from the implant. Place the healing abutment immediately over the implant to prevent soft tissue collapse.

To prevent the loss of the coping screw, attach the corresponding lab analog to the conical closed tray impression post using the .050" hex driver.



send to lab

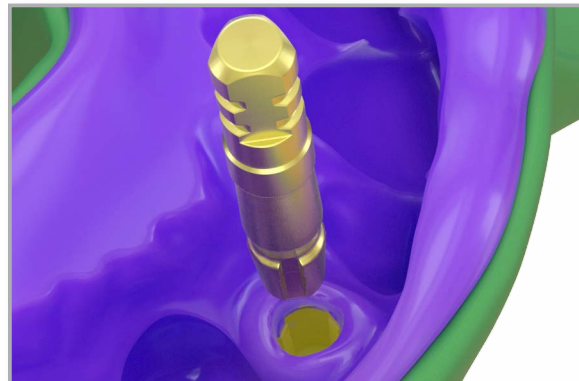
- Impression with the embedded impression cap
- Conical closed tray impression posts with the lab analog attached
- bite registration
- prescription with lab instructions



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6 Lab step - Assemble the impression post

Position the assembled impression post and lab analog on the impression caps embedded in the impression. Make sure that the grooves correctly engage in the impression cap and do not use bonding material.



7 Lab step - Make a soft-tissue model

Verify the coping and analog assembly are properly connected. Apply lubricant where the soft tissue replica material is to be applied. Syringe a soft tissue replica material around the analog.



8 Lab step - Fabricate the stone model

Fabricate a working model in minimal expansion, high hardness die stone. Articulate according to normal laboratory procedures.

