

# **Internal Impression**

Quick Reference Guide





## Closed tray pick-up technique using the snap scan body

Use this technique to make a single or multiple-unit, implant-level impression for the fabrication of a working model utilizing a closed-tray, direct pick-up impression technique. This procedure creates a model that represents the exact position of the implant, the orientation of the hex and the soft tissue profile.



#### (1) Remove healing abutment

Remove the healing abutment using an .050" (1.25mm) hex driver. Confirm the implant prosthetic platform is free of any bone debris or soft tissue.



#### (2) Place the snap scan body

Snap the snap scan body onto the implant. Choose between 8mm and 11mm heights to accommodate varying tissue heights. Take a radiograph along the long axis of the implant to ensure that the snap scan body is seated completely into the hex of the implant



#### (3) Make a full-arch impression

Syringe a medium or heavy body elastomeric impression material around and over the snap scan body. Load the tray with impression material and make the impression. After the impression material has set, remove the tray from the mouth. The snap scan body will be picked up in the impression and remain embedded. Verify the impression material is completely adapted around the snap scan body.

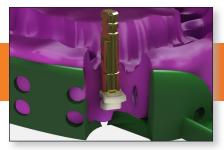
Send to Lab:

- Bite registration
- Impression with snap scan body
- Implant analog

- · Opposing model or impression
- Shade selection

Lab Steps





#### 1 Assemble the analog

Snap the appropriate diameter implant analog to the snap scan body in the impression



#### 2 Make a soft tissue model

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



#### (3) Fabricate the stone model

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

# Digital impressions using the snap scan body

The one-piece design can be placed by hand without any additional instrumentation. Each snap scan body features a color-coded radiopaque titanium body that can be used to verify seating on a radiograph. Unique markings on each snap scan body help to identify the implant platform when scanning in the mouth or with table-top scanners, can also be used for traditional closed tray impressions.



#### (1) Remove the healing abutment

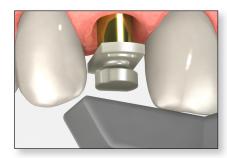
Remove the healing abutment using an .050" (1.25mm) hex driver. Confirm the implant prosthetic platform is free of any bone debris or soft tissue.



#### 2 Place the snap scan body

Snap the snap scan body onto the implant. Choose between 8mm or 11mm height options to accommodate for the tissue height.

Take a radiograph along the long axis of the implant to ensure that the snap scan body is seated completely into the hex of the implant. Note: The X-ray tube must be positioned perpendicular to the implant prosthetic platform.



#### 3 Digitize the impression

There are two primary ways to create a digital impression.

**Option A** - The first method is to take an intra-oral digital impression by placing a software-dependent scan body into the implant and scan the scan body and surrounding dentition using handheld 3D scanner.



**Option B** - The second method is to take an implant level impression, pour a stone model, place a software-dependent scan body into the implant analog and scan the model using 3D tabletop digital scanner.

Important: Ensure the lab has the digital library that is compatible with the scan body. BioHorizons digital library can be downloaded from vulcandental.com.

#### Send to Lab:

- Impression with embedded snap scan bodies
- Opposing model or impression
- Implant analog

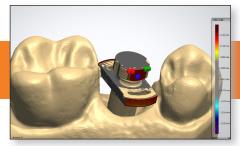
Prescription with lab instructions



#### 4 Replace the healing abutment

Replace the healing abutment immediately to prevent soft tissue collapse over the implant.





#### (1) Verify alignment and platform size

Misalignment is visible in red on the flange edges as well as the occlusal surface when the wrong height is selected for the platform. This image shows a 8mm height snap scan body for the 3.0 platform was used but the 11mm height has been selected in the software, resulting in misalignment.



Correct alignment is shown by a mesh of the scan body and scan throughout all regions. This image shows that a 8mm height snap scan body for the 3.0 platform was used and the same snap scan body has been selected in the software, resulting in the correct alignment. Once the platform and alignment has been verified the lab can continue with the design process.

## Closed tray technique using the indirect scoop coping

Use this technique to make a single or multiple-unit, implant-level impression for fabrication of a working cast utilizing a closed-tray, indirect transfer method. Choose the emergence that matches the emergence of the healing abutment (narrow, regular or wide). This procedure creates a model that represents the exact position of the implant and the orientation of the hex and the soft tissue profile.



#### 1 Remove the healing abutment

Remove the healing abutment using an .050" (1.25mm) hex driver. Confirm the implant prosthetic platform is free of any bone debris or soft tissue. The emergence of the impression coping should match the emergence of the healing abutment and the intended final abutment (narrow, regular or wide). If a custom cast abutment is planned, the final abutment emergence will be determined by the lab.



#### 2 Place the impression coping

Seat the indirect scoop coping and secure using the included screw. Hand tighten. Take a radiograph along the long axis of the implant to ensure that the impression coping is seated completely into the hex of the implant.



#### (3) Block out the hex

Block out the hex hole on top of the indirect scoop coping screw or the ball top screw using a material of choice.



#### 4 Make a full-arch impression

Syringe a medium or heavy body impression material around and over the indirect scoop coping. Load the tray with impression material and make the impression. After the impression material has set, remove the tray from the mouth. The indirect scoop coping will remain in the mouth. Remove the indirect scoop coping and replace the healing abutment immediately to prevent soft tissue collapse over the implant.

#### Send to Lab:

- Impression
- Implant analog
- Bite registration
- Indirect transfer coping w/coping screw
- Abutment and screw (if selected)
- Opposing model or impression
- Shade selection

### Lab Steps



#### 1) Assemble the analog

Attach the indirect scoop coping using the appropriate diameter implant analog using the coping screw.



#### 2 Index the coping

Index the coping into the impression by inserting the coping assembly into the corresponding location in the impression. Orient the indirect scoop coping using the corresponding indices in the impression.



#### (3) Make a soft tissue model

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



#### 4 Fabricate the stone model

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

# Open tray technique using the direct pick-up coping

Use this technique to make a single or multiple-unit, implant-level impression for fabrication of a working model utilizing an open tray, direct pick-up method when a narrow, regular, or wide emergence healing abutment was used. Choose the emergence that matches the emergence of the healing abutment that was used. The procedure creates a model that represents the exact position of the implant and the soft tissue profile.



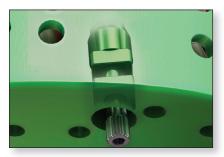
#### (1) Remove healing abutment

Remove the healing abutment using an .050" (1.25mm) hex driver. Confirm that the implant's prosthetic platform is free of any bone debris or soft tissue. The emergence of a hexed impression coping should match the emergence of the healing abutment and the intended final abutment (narrow, regular or wide). If a custom cast abutment is planned, the emergence will be determined by the lab prescription.



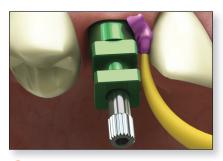
#### 2 Place pick-up coping

Place the appropriate diameter direct pick-up coping (hexed or non-hexed) on the implant body and retain using the corresponding direct pick-up coping screw. Hand tighten. These screws feature a knurled top to aid in manual insertion, as well as an .050" (1.25mm) hex access hole for insertion using the hex driver. Take a radiograph along the long axis of the implant to ensure that the impression coping is seated completely into the hex of the implant.



#### (3) Verify screw/tray clearance

Try in the custom impression tray or modified stock tray to verify that the coping screw protrudes through the tray without interference.

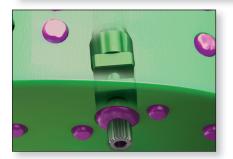


#### (4) Make full-arch impression

Syringe a medium or heavy body impression material around the coping body, leaving the screw exposed. Load the tray with impression material and make the impression. Before the material sets, use your finger to wipe the impression material from the top of the screw so it is exposed for access.

#### Send to Lab:

- Opposing model or impression
- Coping screw
- Shade selection
- Impression with coping inside
- Abutment and screw (if selected)
- Implant analog
- Bite registration



#### (5) Remove impression from mouth

After the impression material has set, remove the coping screws by hand or using an .050" (1.25mm) hex driver, and remove the tray from the mouth. Verify the impression material is completely adapted around the pick-up copings. Replace the healing abutment immediately to prevent soft tissue collapse over the implant.

### Lab Steps



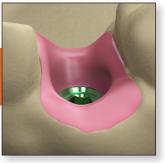
#### 1 Attach analog to coping

Attach the appropriate diameter implant analog to the direct pick-up coping in the impression and insert the long coping screw through the access hole in the impression tray. Hand tighten.



#### (2) Create 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.



#### (3) Fabricate working cast

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

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