Stiff alginate technique: an accurate first impression for a stable prosthesis.

In practice the importance of the functional impression is often underestimated. However, an accurate first alginate impression can save you a great deal of time and money. It enables you to cast the gypsum model correctly, which gives you a stable individual impression tray and therefore a perfectly fitting denture. Renowned academic dentists such as Professor Dr. M.A.J. van Waas (ACTA, Academic Center for Dentistry Amsterdam, The Netherlands) and Professor Dr. H. Postema (KUN, Center for Special Dentistry, University of Nijmegen, The Netherlands) use the stiff alginate method for their first impressions.

Impression materials are the starting point of many dental operations. High-quality impressions give the dentist confidence in a good end result.
Cavex offers a well-tried and reliable range of alginates, hydrocolloid and auxiliary materials developed according to the requirements of the dental practice.
For dental use only.

Choose the correct tray.

Use impression trays specially designed for edentulous patients, e.g. Schreinemakers. Make sure that the patient is relaxed. Use a pair of compasses to determine the correct tray size.

Select the tray and check the size of the tray in the mouth.
Tip: To get patients used to the trimming movements during the placing of the tray you can also ask them to move their tongue to the upper lip during the fitting.

Dose and mix the alginate.

Dose the normal quantity (3 scoops) of Cavex Impressional, Cavex CA37 or Cavex ColorChange with approx. 30% less water than usual (high viscosity scale mark). The exact proportions depend on your personal preference. For the mandibular impression the alginate should be slightly stiffer than for the maxillary.

Mix the alginate for approx. 30 seconds until a homogeneous mass is obtained. With the Cavex Algimax - the fully automatic alginate mixer - it's even easier. In just 10 seconds and without undue effort you'll have a perfectly mixed mass.

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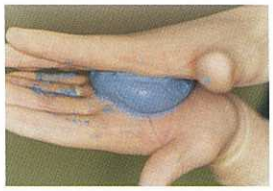
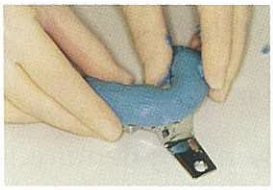
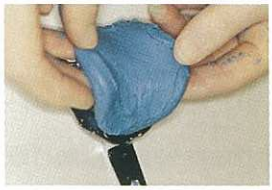
Fill the impression tray.

For the mandibular impression, knead the alginate to form a nice small roll. For a maxillary impression, shape the alginate into a 'pancake' approximately the same size as the tray.



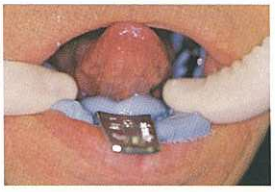




Fill the tray with the stiff alginate. Avoid overfilling the tray.

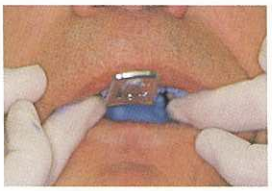
Use a moistened finger to smooth out the impression material in the tray.
Tip: Do <u>not</u> hold the impression under the tap, as this causes the alginate to take up too much water.

Place the tray in the patient's mouth.

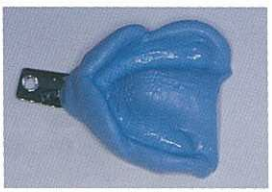


Lower jaw: press on the rearmost part of the tray. Make sure that the handle of the tray is in the middle. Hold the tray stable. Ask the patient to move his tongue to his upper lip.
Tip: The upward movement of the tongue causes the stiff alginate to push the soft tissues aside. This will ensure good anatomical definition.

Upper jaw: pull the upper lip aside and press the impression tray in the palatal area.
Tip: We recommend that you prelubricate buccally of the left and right maxillary tuberosity and the front $^{2}/_{3}$ of the palate. This ensures a better contact with the tissues in the mouth and helps prevent air inclusion.



The alginate impression.



The alginate impression is accurate and highly legible - a source of information both for you and your dental technician.
Tip: By trimming the impression just behind the A-line the dental technician will be given the correct information.

The gypsum model.

Thanks to the excellent visibility of the anatomical details (even the fraenum is clearly visible) it's possible to cast the gypsum model correctly and completely.
Tip: Ensure a good casting. This guarantees that the dental technician has a clear idea of the outline of the prosthesis. This is essential for the creation of a perfectly fitting individual tray.