Impression Information & "TRADITIONAL" Bite Technique



Impression Information

Maxillary and mandibular impressions are required for the laboratory to fabricate separate models for the maxillary vacuum-formed retainer and the appliance itself. Take full extension impressions into the maxillary vestibule and mandibular sublingual area. Full mandibular lingual extension is necessary to enable the device to discourage low tongue position and stimulate a high tongue position in palate. The use of a polyvinyl siloxane impression material is strongly recommended. Send the maxillary & mandibular impressions to the lab, models are not required.

8-Step Traditional Bite Technique

Generously apply balm to patient's lips to encourage lip seal.



2. Start with two shims and stack the shims to the maximum vertical, whereby the patient can comfortably seal their lips.



Ask the patient "Can you comfortably keep your lips together or is it a strain?" If patient is straining, reduce the stack of shims one by



one until you achieve a desired vertical without strain. Remove shims from patients mouth.



The Moses®

Separate the shims in half. If you have three shims separate two and one then flip them over so that you have the smooth sides of the shims contacting each other (male side up and male side down). This is so that the patient can slide the

mandible forward for you to record the protrusive and lateral position.

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With the shims stacked smooth on smooth, you are now ready to make an index of the maxillary and mandibular incisor teeth to the shims. Hold the stacked shims between your thumb and index finger facing your patients' mouth. Apply your bite material onto the upper and lower male sides of the shims (with the wavy indention top and

shims (with the wavy indention top and bottom of the stack). Immediately place the shims in the patient's mouth and ask them to close down on the shims to make the upper and lower anterior index point. Place shims into mouth so teeth can bite near the front of the shims and the line can close. Allow moth



shims and the lips can close. Allow material to set.



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Remove shims and ask the patient to bite together in their habitual centric position, observe midline and mark teeth with a wax pencil if desired. (Note - if the midlines are not aligned follow the functional shift when taking the protrusive registration). Put the shims back in the patients mouth and now mark the midlines on the shims with the wax pencil and ask them to slide the mandible forward to a comfortable protrusive position, ensure that the midlines are aligned to what you marked on the teeth, following the

function (give the patient a hand mirror to observe and locate the position and ask them to hold it for a minute to ensure they will be able to sustain this position comfortably). If the skeletal midlines are not aligned please make a note of this on the RX so the laboratory knows when manufacturing.



6. In this position, mark a line on the top surface of the lower segment of shims to record the correlation between the upper and lower segments.



contraindications, warnings, and possible side effects, please visit our website sect to download or review

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Modern Dental Laboratory USA All rights reserved 2014 **7.** With a new tip extrude bite registration material between the posterior teeth and overlap the front

section to hold together in one piece. Be sure to record the entire arch with registration material (extend to most posterior teeth).



8. Remove bite registration from the mouth and trim excess with a sharp scalpel. Send to MDL USA with

polyvinyl siloxane impressions (not models) for fabrication of your Moses[®] appliance.

View video at: www.themoses.com/bite

