



• Prior to Diagnostic Appointment

- Baseline JVA
- Baseline Photographs
- Baseline Impressions
- Deliver Deprogrammer appliance (Release Appliance)

• Diagnostic Appointment

1. Flowable composite on incisal edge to prevent posterior contact
2. Establish new Vertical Dimension of Occlusion
3. Composite ball bite at new VDO
4. Take posterior Megabite (Bi's and Molars) with composite ball (set aside as back up bite)
5. Take JVA with composite ball in place if pre-op JVA was abnormal
6. Take Luxabite of molars (molar control bites)
7. Remove composite ball and take anterior tripod luxabite
8. Mock up upper anterior 10 units as needed
 - Midline
 - Incisal edge position
 - Buccal corridor
 - Confirm aesthetics with molar control bites in place
 - Measure length of centrals
 - Evaluate for need for soft tissue changes
9. Take anterior Virtual bite (or Megabite) of mock up with molar control bites in and mark midline with Sharpie on the bite
10. Panadent earless facebow with mock up in place
11. Stick bite (Virtual bite) with mock up in place (and molar bites in)
12. Take photos of facebow and stick bite (without the molar bites in)
13. Tissue contouring with mock up in place
 - Soft tissue for symmetry
 - Closed flap osseous if needed
 - Remeasure length of upper anteriors and cuspids
14. Take full arch impression upper with mock up in place and soft tissue contouring complete
15. Remove mock up
16. Take full arch baseline impressions (U/L) if any soft tissue changes were made (Polyvinyls for multiple pours)
17. Facebow of baseline models—earless if possible (label) and photo
18. Estimate length of lower incisor based on upper length, VDO, and overbite
 - Mock up lower incisor to proposed length (based on Upper length, VDO, and overbite estimated)
 - Evaluate appearance
 - Give lab maximum lower incisor length
19. Provide all records and lab slip to laboratory