FullContour Clear Aligner
Movement Philosophy

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Protocol 1 – Anterior Movement without attachments

Anterior Movements	Case Maximums
Rotation:	28° on 3-3 5° on premolars
Inclination:	7°
Angulation:	7°
Forward/Backward:	On the lower arch: use the most buccal tooth as a reference point
Extrusion:	None
Intrusion:	2.5mm
Left/Right:	2.5mm

Anterior Movements	Per Tray Maximums
Rotation:	2°
Inclination:	1°
Angulation:	1°
Forward/Backward:	.25mm
Extrusion:	.25mm
Intrusion:	.25mm
Left/Right:	.25mm

Protocol 2 – Anterior Movement with attachments

Anterior Movements	Case Maximums
Rotation:	40°
Inclination:	14°
Angulation:	14°
Forward/Backward:	On the lower arch: use the most buccal tooth as a reference point
Extrusion:	2.5mm
Intrusion:	2.5mm
Left/Right:	2.5mm

Anterior Movements	Per Tray Maximums
Rotation:	2°
Inclination:	1°
Angulation:	1°
Forward/Backward:	.25mm
Extrusion:	.25mm
Intrusion:	.25mm
Left/Right:	.25mm

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Anterior Case Selection

Treatable:

- Mild Spacing
- Mild Crowding
- Midline Discrepancy <2mm (with IPR)
- Deepbite (<2mm of anterior intrusion)
- Basic alignment prior to restorative work
- Mild Anterior open bite correction (less than 2mm)
- Lower incisor extraction (space closure <2mm)
- Bicuspid extraction (space closure <2mm)
- Mild anterior cross bite

Not Treatable:

- Midline discrepancy >2mm
- Severe deep bite
- Severe skeletal open bite
- Severe crowding
- Class III bite
- Underbite
- Full posterior crossbite correction

Anterior Case Selection:

- Mild to moderate anterior, esthetic cases
- Preparation for Veneers, implants, or other dental restorations
- DTC style offering
- No molar movements
- Generally straighter teeth
- Refinement or relapse cases

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Protocol 3 – Full Arch Movement with attachments

Anterior Movements	Case Maximums
Rotation:	40°
Inclination:	14°
Angulation:	14°
Forward/Backward:	On the lower arch: use the most buccal tooth as a reference point
Extrusion:	2.5mm
Intrusion:	2.5mm
Left/Right:	2.5mm

Posterior Movements	Case Maximums
Rotation:	30°
Inclination:	10°
Angulation:	5°
Forward/Backward:	Distalization: 2mm** Mesialization: 1.5mm
Extrusion:	1mm
Intrusion:	2mm
Left/Right:	2.5mm**

**Especially applicable to upper molars

Protocol 3 – Full Arch Movement additional details

Protocol details:

- Molar movement generally refers to positioning of the upper and lower first molars

- Second molars can be addressed when necessary, to a lesser extent

- Third molars are not to be included in most cases

- Upper molars have more movement possibilities than lower molars due to differences in the anatomy of the maxilla and mandible

- Lower molars generally can't be expanded, mainly, uprighted

Protocol details:

- Some movements are less predictable and auxiliary techniques will be advisable (vibration/micro-osteoperforation)

- There are limitations to molar movements that are case specific and can be related to crown/root morphology, bone quantity/quality, age, health status, and compliance

- Full Posterior crossbite cases may not be treatable, edge to edge crossbite is treatable

- Not offering sequential molar distalization

Attachment specifics:

- Rotation >15°

- Inclination >5°

- Angulation >2.5°

- Distalization >1mm

- Mesialization >1mm

- Extrusion >0.5mm

- Intrusion >1mm

- Expansion >1.5mm

- Elastics are not intended to be included in this protocol

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Posterior Case Selection

Treatable:

- Mild/Moderate Spacing
- Mild/Moderate Crowding
- Improving cusp/fossae relationship
- Class 1 correction
- Mild Class II correction
- Extraction cases
- Open bites
- Deep bites
- Anterior or Posterior crossbite*
- Edge to edge bite

Not Treatable:

- Full posterior crossbite correction
- Class III bite
- Bite change
- Severe deep bite
- Severe skeletal open bite
- Midline discrepancy >2mm

Posterior Case Selection:

- Mild to moderate cases
- Preparation for Veneers, implant placement, or other dental restorations
- Molar uprighting

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