

## Predictable results in Implant Dentistry



**Dr. Morley S. Rubinoff,**  
Prosthodontist  
Implant Dentistry

Suite 100, 2001 Sheppard Avenue East  
Toronto, Ontario, M2J 4Z7

Office: 416 499-1704  
Cell: 416 838-1622  
Fax: 416 751-1045

Email:  
drmorleyrubinoff@bell.net  
drmorleyrubinoff@gmail.com

Fellow: International Team for  
Implantology (Canada Section)



Need help with a case in your office? Please don't hesitate to contact me. I am always happy to help a colleague with treatment and/or diagnosis:

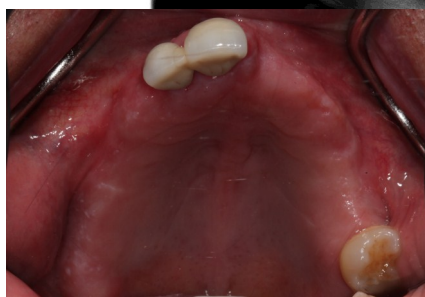
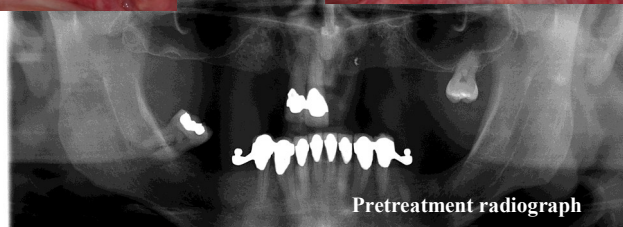
This blog will help all restorative dentists who depend (perhaps too much) on their laboratory technicians. Doc, you are in control of the case if and only if you give the implant surgeon and the dental lab the correct and appropriate information. I am sharing some of my key steps here to help you obtain more predictable results. ENJOY!!

### OUR PATIENT:

- A 65 year old male with an ill fitting upper removable partial denture.
- Our patient is unhappy with the appearance of his teeth.
- Our patient wants an implant retained prosthetic solution.

### OUR GOAL:

- To provide a fixed \detachable prosthesis that is secure, functional with complimentary aesthetics

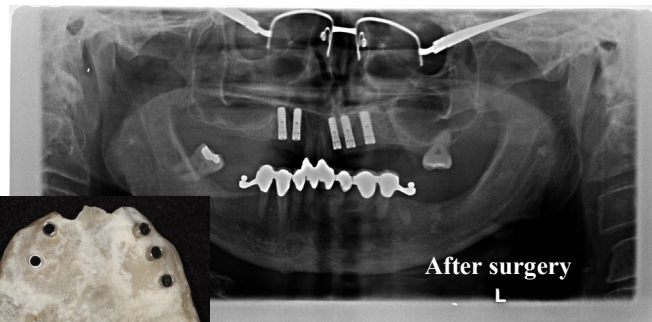


## Planning the Implant Surgery

### Radiographic Findings:

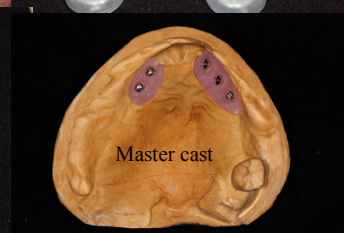
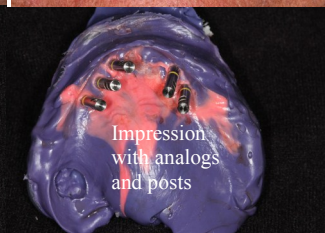
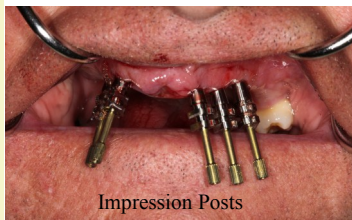
Viewing the pretreatment radiograph above, we note that the maxillary antra are pneumatized such that the floor of the antra drop down to the level of the alveolar ridge bilaterally. There is no available crestal bone distal to the #13 on the right and distal to the #24 on the left. Should we wish to place implants distal to the #13 or #24, lateral sinus elevation and bone augmentation will be required.

- Suggested approach is to place narrow diameter implants in the region of #13,12, 21,22,23



## Treatment Protocol:

- ◆ Extraction of #11,12 adding two teeth to the existing upper partial denture
- ◆ Fabrication of the surgical template
- ◆ Surgical placement of 5 narrow crossfit Straumann dental implants at a height between 10 and 12 mm. Small closure screws are placed on the implants so that tissues may heal by primary intention.
- ◆ Replacement of small closure screws with larger transmucosal healing collars
- ◆ Final impression of dental implants
- ◆ Fabrication of a temporary upper complete denture (to full wax up stage only) on top of the healing collars to establish the correct position of the teeth in occlusion and relative to the lip.
- ◆ Occlusal mounting of upper master cast using the full wax try in & facebow record.
- ◆ Fabrication of Bredent Bar, Chrome housing, and set up of denture teeth on housing.
- ◆ Process and delivery of finished prosthesis





# RUBINOFF PROSTHODONTICS



About my Lab Technician:

Masoud Niknejad of Picasso Dental Studios is a Master Ceramist. He maintains his own laboratory in Richmond Hill, Ontario.



How can we assure predictable results with this type of prosthesis:

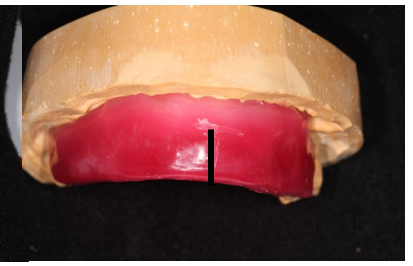
- ◆ When utilizing an analog type surgical template, the surgical guide tubes shown on Pg.1 will predictably place the center of each implant exactly where the surgeon and restorative dentist wants.
- ◆ Lab techs do not have the pleasure of looking at the patient's eyes, lips, speaking sounds and occlusion when fabricating your dentures. Wax rims have been used to establish the location of teeth of ions but ask most prosthodontists or denturists and they will say that there is no better way to establish tooth alignment than by setting up the anterior teeth in the mouth..
- ◆ Please, please, please do not fabricate the implant bars or their metal housings until AFTER the denture teeth have been tried in and tooth position confirmed. You must fabricate your bars in a location that allows for ideal placement of the teeth for aesthetics and function.



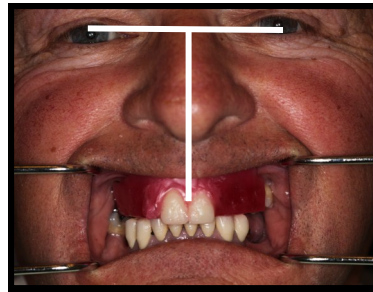
Master cast with soft tissue areas



Maxillary occlusal rim with wax



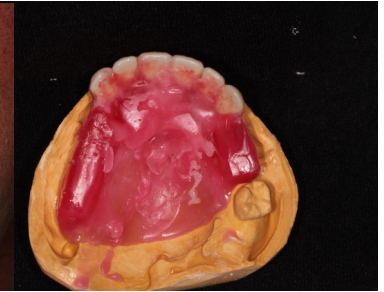
Facial view of occlusal rim showing midline



Teeth set to midline/parallel to pupils



Six anterior teeth set in wax vs using bite rim



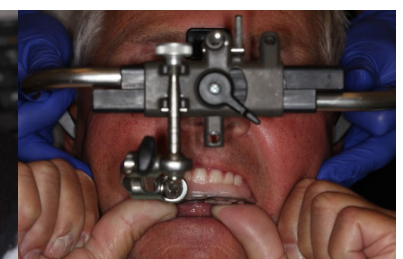
Bite rim with preliminary wax setup



Occlusal grooves cut in rim for facebow



Wax on facebow fork set in occlusal rim



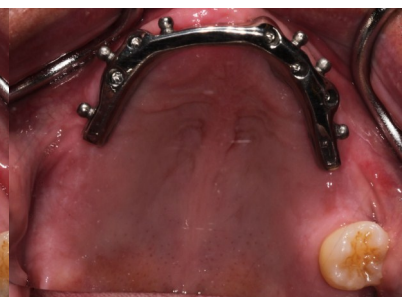
Facebow transfer taken with



Healing collars inserted in 5 implant sites



Narrow cross fit implant abutments inserted



Bredent bar with 2.2mm stud



Before



After



Cast chrome metal housing with nylon stud snaps



Implant supported denture in mouth



Implant supported denture in mouth