

## Laboratory Appointment Requisition

Student Name \_\_\_\_\_ DMD3 / DMD4 / AS2  
Phone # \_\_\_\_\_  
Pt Name & chart # \_\_\_\_\_  
Technician \_\_\_\_\_  
Appointment Date \_\_\_\_\_ Time \_\_\_\_\_

### Reline

\_\_\_ Heat  
\_\_\_ Jig

### Rebase

\_\_\_ + Reset teeth  
\_\_\_ + Change base shade  
\_\_\_ Complete Denture: U / L (circle)  
\_\_\_ Partial Denture: U / L

### Repair

\_\_\_ Cold Cure:  
    \_\_\_ Simple  
    \_\_\_ Complex  
\_\_\_ Heat Cure  
\_\_\_ Post Dam Augmentation  
    \_\_\_ Cold Cure  
    \_\_\_ Heat Cure

### Altered Cast

\_\_\_ Custom Tray Fabrication\*  
    Tissue stop location: \_\_\_ OK, \_\_\_ Above, \_\_\_ Adjusted  
\_\_\_ Final Impression / new cast  
    \_\_\_ unilateral \_\_\_ bilateral

### Tooth Set-up / Occlusion

\_\_\_ Immediates / Interims  
\_\_\_ Complete or Partial Denture  
\_\_\_ Steele's Facing  
    Tooth # \_\_\_\_\_  
    Mold \_\_\_\_\_  
    Shade \_\_\_\_\_

### Custom Trays / Record Bases

\_\_\_ CD  
\_\_\_ PD

Prosthesis(es) \_\_\_\_\_

Additional Description/Comments:

For Laboratory Rotation:

\_\_\_ Processing  
\_\_\_ Relines  
\_\_\_ Rebase  
\_\_\_ Repairs  
\_\_\_ Setup problems  
\_\_\_ Altered Cast  
\_\_\_ Steele's Facing  
\_\_\_ Other – describe above

Date \_\_\_\_\_ Time \_\_\_\_\_

Points \_\_\_\_\_

Signature \_\_\_\_\_

\_\_\_\_\_  
Faculty signature\*

\_\_\_\_\_  
Date

## APPENDIX 6

### Removable Prosthodontics Laboratory Procedures and Protocols

1. All students MUST review pre-clinical and year 3 course notes prior to performing procedures from clinic and laboratory.
2. ALGINATE impressions *cannot* be boxed and must be separated from cast *not later than one hour* from being poured.
3. Infection control: All impressions, appliances, etc. must be sprayed – not submerged – with disinfectant and bagged for 10 minutes before being taken to the laboratory. They should arrive bagged.
4. All casts must be surveyed prior to CUSTOM TRAY or RECORD BASE fabrication.
5. Appointments for TRIAD custom trays or baseplates are needed for at least the first two units of each and for any complicated cases.
6. Appointments for FORMATRAY must be made for the following procedures:
  - Custom trays for partially edentulous cases
  - Cases with lone standing, long-crowned and narrow necked teeth
  - Altered cast saddles
  - Partial dentures with distal extensions that require baseplates in the saddle area(s)
7. Appointments for ALTERED CAST FABRICATION must be made BEFORE the clinical appointment for the impression. Please verify laboratory availability prior to scheduling this patient appointment. Your appointment time must be immediately following the making of the altered cast impression. Ideally Rubber Base impressions should be poured within 30 minutes.
8. ADDITIONAL APPOINTMENTS REQUIRED:
  - Hands-on help to set teeth with difficult occlusions
  - Steele's Facings and Matrices
  - Resetting teeth *after* processing done (repair)
  - Problem solving for unusual cases
  - Relines, rebases and some repairs
9. No appointments are needed for: ... waiting may be necessary
  - Occlusion / wax-up checks, or signatures
  - Emergency repairs

10. All RUBBER BASE FINAL IMPRESSIONS must be properly trimmed, painted with a line of rubber base adhesive at the level of the beading (2-3mm below the edge of the impression and beaded with beading wax or fingertip caulk (i.e. Mortite, Denson, Frost King). The LAND / beading must be completely visible when viewed from above. Attach boxing wax so that it does not extend below beading wax. Secure (lute) all materials to avoid stone leakage. NOTE: Rubber base impressions should be poured within 30 minutes. Pour cast using vibrator on low touching only tray (or cast in altered cast procedure) to vibrator.

11. ORDERING TEETH requires a Tooth Order Form filled out by the student, recorded in chart and on the flow sheet and signed by faculty. It must include the Denture Base Shade. Bring tooth order and patient chart to laboratory. Chart entry, contract and proof of payment must be presented.

12. PROCESSING requires:

- All appropriate signatures on flow sheet and patient chart including patient approval for final try-in esthetics.
- Occlusion on articulator to replicate that in the mouth. (If adjustments are made intra-orally without taking a new bite and remounting the lower cast so that both agree, processing will not progress- the lab remount cannot be done)
- Work authorization for (Lab RX) with appropriate, precise, legible instructions signed by clinical faculty and bearing your name, local phone number and e-mail address.

SAMPLES:

- a. Please process (indicate the type of appliance –CU/CL, IU/TL, etc.) with (type of acrylic heat or cold cure and shade fibered light, dark or Lucitone 199-original shade). Please do Lab Remount with pin at (+ / - #). Please return hydrated for finish and polish.
- b. Additional instructions may include:
  - Please fabricate surgical stent / bone recontouring template.
  - Please opaque Steele's Facing backing
  - Please attach Steele's Facing

13. All IMMEDIATE DENTURES must be trimmed, pumiced, polished and approved by technicians and then shown to clinical faculty before Oral Surgery appointment can be made. When finished and polished dentures are presented to the technician in the lab for signature the surgical stents will be then be given to the student.

14. POST DAM readings must be taken for all maxillary denture relines procedures in order to cut Post-Dam into cast after the case is either flaked (for heat cure relines) or put on jig (for cold cure relines). DO NOT SEPARATE RELINE OR REBASE IMPRESSIONS FROM THEIR CASTS. They must be *flaked* or *jigged* prior to separation.

15. To use REMO LATHE:

- Trim with high speed and suction
- Pumice with wet wheel, wet pumice on low speed – no suction

- Polish DRY on low/high with suction
- Always keep a bur in the quick disconnect chuck when that side is not in use.
- Shut of lathe when finished using it
- 6<sup>th</sup> floor Remo lathe burs and wheels are for use on NEW (never inserted) appliances. Burs may be signed out and should be returned immediately.
- 5<sup>th</sup> floor lathe is for all INSERTED appliances.
  - GET- Blue Styrofoam wheels and bur kits from Central Sterilization
  - DISCARD- Blue wheels and pumice after use
  - STERILIZE- Return burs back to Central Sterilization
  - DISINFECT and WASH- Appliance

16. To use TRIAD MACHINE: (refer to detailed instruction in your pre-clin lab manual)

- Model Release cast
- Air Barrier coat (ABC) Triad material
- Cure for 4 minutes; cool; ABC interior; cure 4 minutes
- Curing requires revolving table and maximum light on appliance
- Shut off machine when finished

17. OSHA REGULATIONS:

- Safety glasses must be worn at *all times* in the lab and clinic.
- Enclosed shoes – no sandals – in lab and clinic.
- No food or drink in lab and clinic.
- Pink gowns are available under the Remo lathe for lab use. Yellow gowns are for clinic only.
- Never leave an unattended open fire (i.e. Bunsen burner, Hanau torch)

18. AN INVITATION:

When ever patients cancel or do not show up for appointments, you are invited to the Remo lab to watch and listen. You can learn a huge amount, painlessly!  
You may also sign up for a scheduled *lab rotation*.