



MOST COMMON MISTAKES AND COMPLICATIONS IN IMPRESSIONS AT FIXED-PROSTHODONTIC CONSTRUCTIONS

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KNOWLEDGE IN PRACTICE
24-27.05.2018
Budva, Montenegro

Introduction

To get a quality impression is of great importance in prosthodontic therapy. The impression is a negative of the condition in the patient's mouth and it should be dimensionally stable in order to gain a good working model - positive, on which the prosthodontic construction will be made. Due to the fact that the indirect restorations are produced in a dental laboratory, it is of big significance to precisely fit the prosthodontic appliance without the need for their correction. This mostly depends from the quality of the impression and consequently the model cast with the condition in the patient's mouth. Thus, allows faster and more efficient dental practice and at the same time to produce restoration which will help in prophylaxis of the periodontal tissue. Over the past 100 years, elastomeric impression materials have been continuously developed and optimized for improved precision, patient comfort and ease of use. However, there are also some factors that adversely affect the impression taking itself.

Clinical parameters influencing impression taking

Periodontal status and oral hygiene

Waiting period between preparation and impression

Preparation

Anaesthesia

Most common mistakes and their corrections

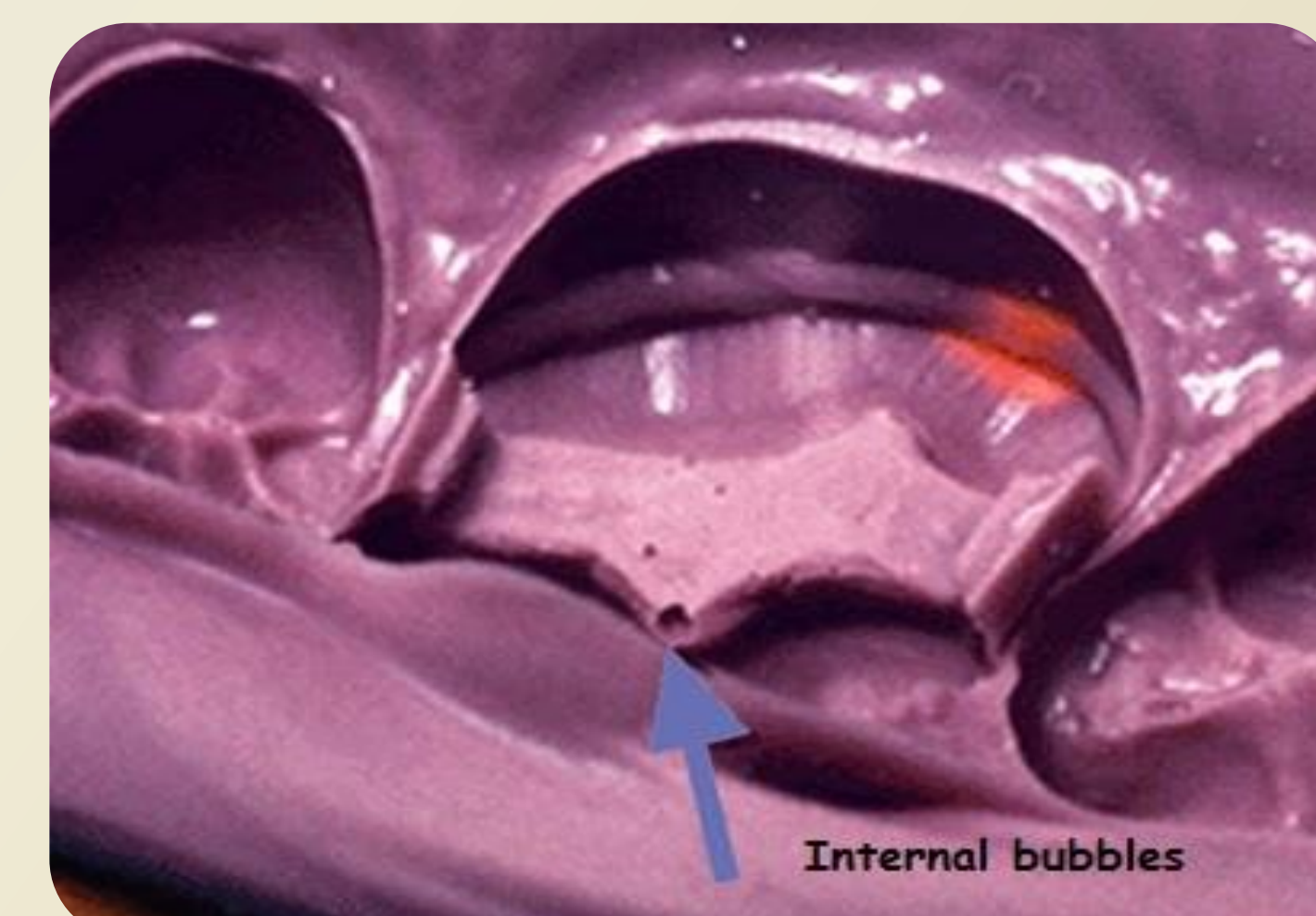
1. Inadequate margin details
2. Marginal tears
3. Internal bubbles
4. Tray selection
5. Separation from the tray
6. Tray distortion
7. Surface contamination



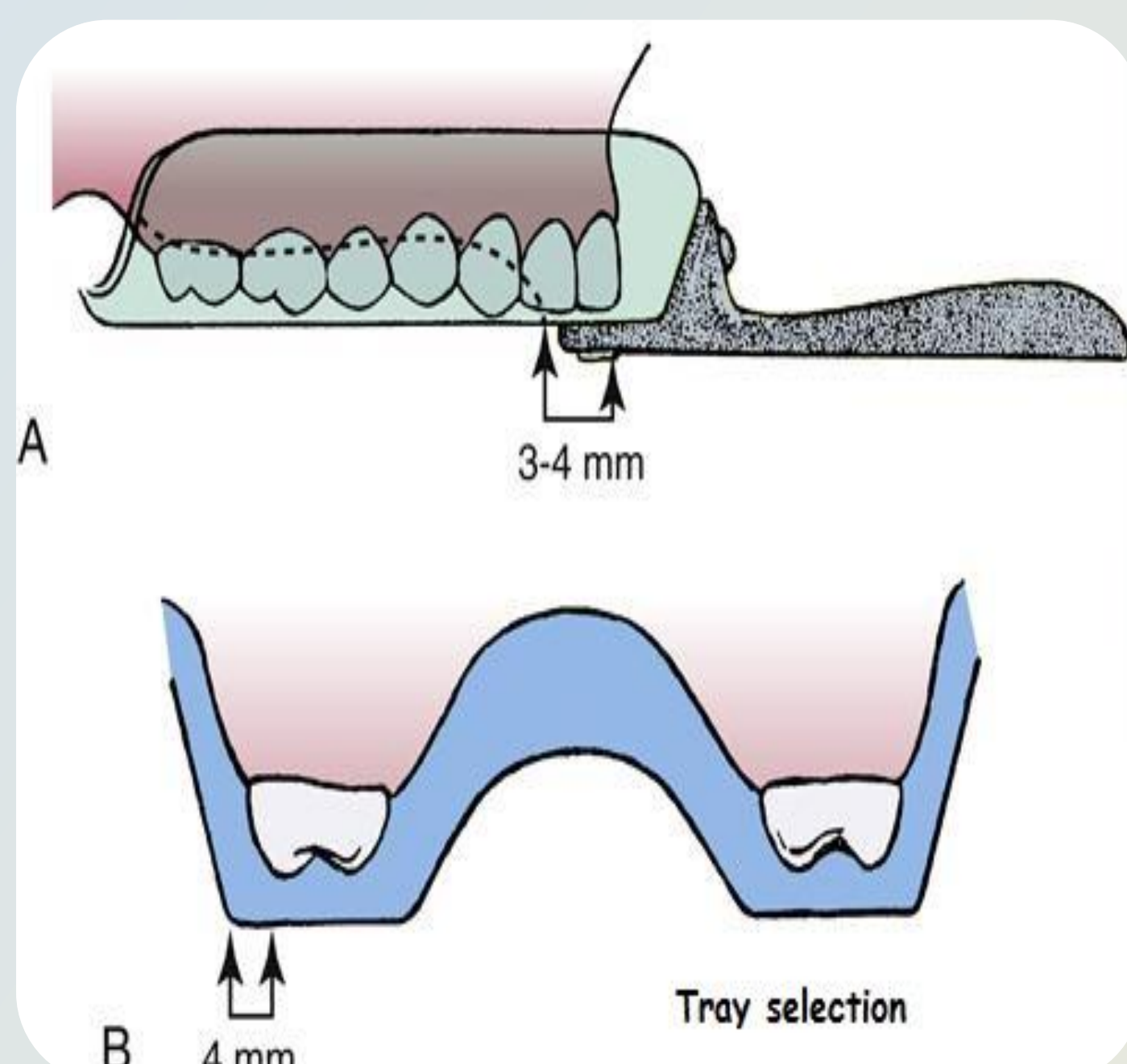
Inadequate margin details



Marginal tears



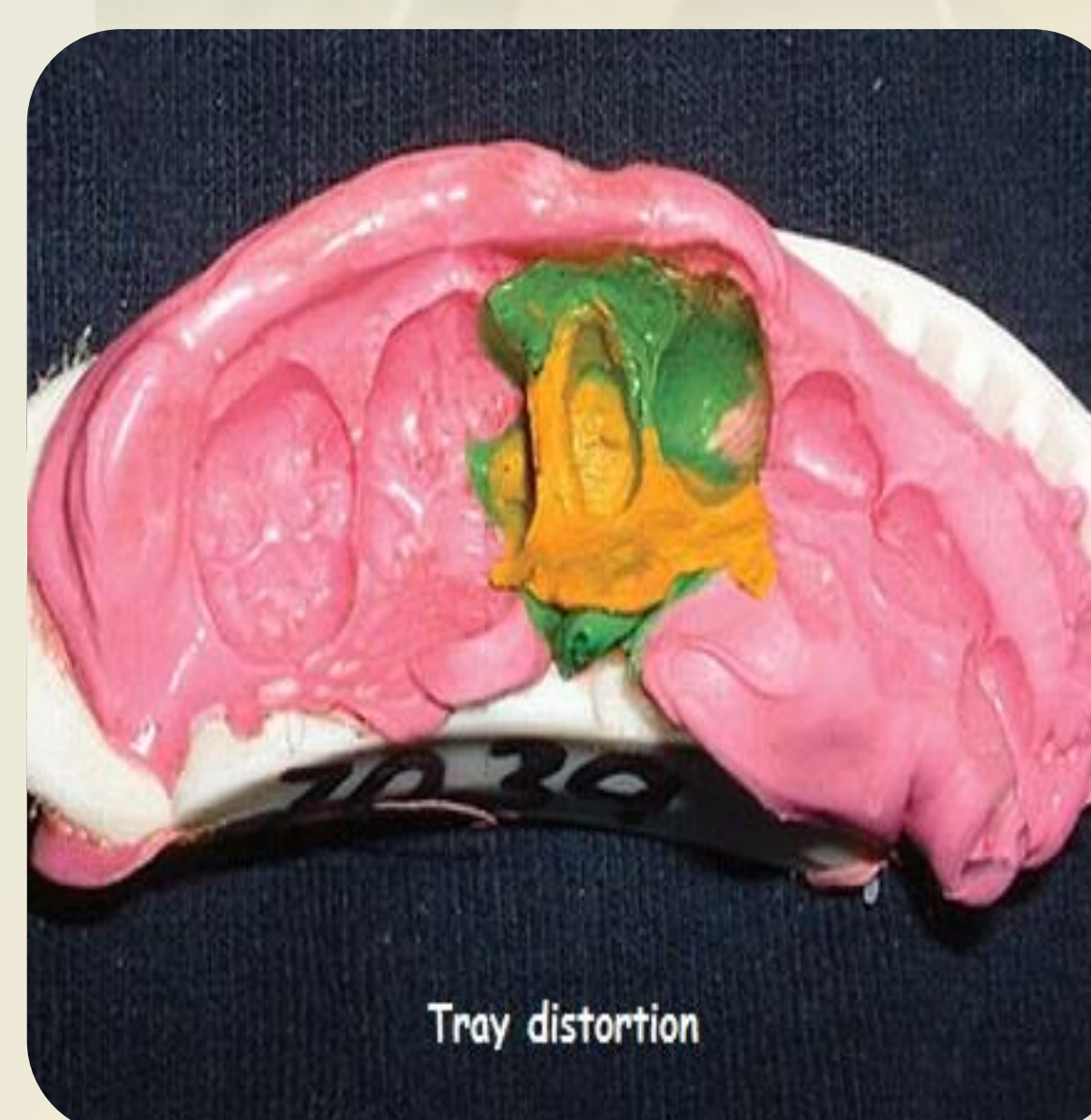
Internal bubbles



Tray selection



Separation from the tray



Tray distortion



Surface contamination

Conclusion

Complications that arise during impressing are often confusing to both the dentist and the dental technician. As more frequent problems include tearing, voids, bubbles and tray contact. Of utmost importance for the ultimate success of prosthetics is to know the possible causes of the failure and of course preventing them. By taking the necessary precautionary measures, impression damage will be avoided and will have improvement of marginal fit on the final prosthodontic construction.