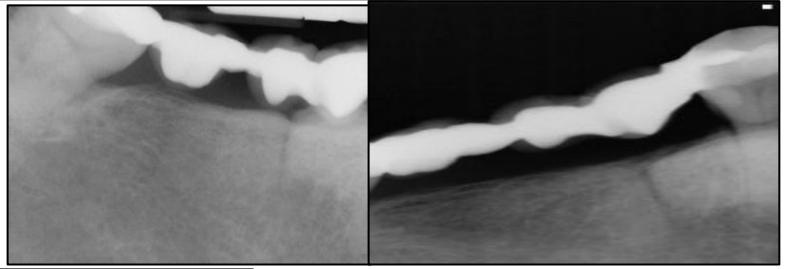


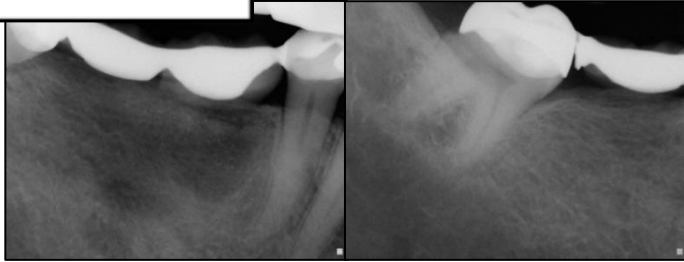
X-Ray Bone Study



Vera 28X32. 18 years and never debonded



Wright 28X32. 13 years.
Patient deceased.

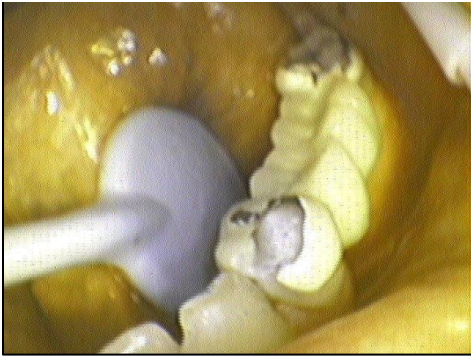


AI 8X9

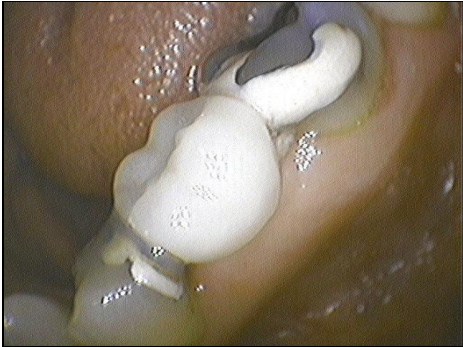
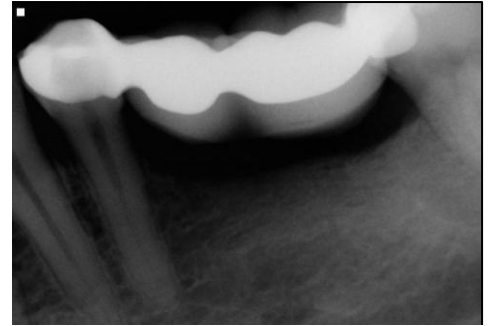


Steve 7X9 26 years*

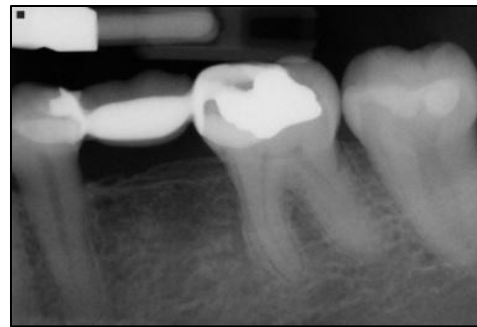




Steve S. 19X21. 14 years*



Debbie 19X21. 25 years*



Tom. 9X11. 24 years*



****Currently in full service - still bonded and fully functional***

Bone and Periodontium do great under Maryland Bridge Pontics!

Post Operative Instructions

1. Use floss bridge threaders – send samples with patient.
2. Instruct brushing technique, brush after each meal – send new toothbrush, Proxy brush and Sulca brush home with patient.
3. Rx. Chlorhexidine Gluconate .12% (alcohol or H₂O based)
4. Oxyfresh rinse and gel if patient has gum problem or irritation or bad breath from bacteria. Oxyfresh is my standard for halitosis patients!
5. Notify patient that any clinch/grind habit WILL require a nightguard (occlusal mouthguard).

Do's and Don'ts

- No popcorn, uncooked kernels nor Corn Nuts.
- No hard or extremely sticky candy/mints.
- No BBQ ribs, No apples, No corn on the cob on anterior Maryland Bridges.
- DO NOT OPEN COKE BOTTLES, plastic bags or bite on pencils on anterior Maryland Bridges.
- Please eat normal foods and chew normally, all drinks are okay.
- Stains are polished off at routine hygiene appointments.
- If you are a bruxer (clinchier or grinder) you must wear an occlusal guard.
- Usually there is a period of months between one end becoming loose and the other loosening. Do not be alarmed when this happens. The time between can be up to a year or more.
- When both ends are loose we will remove, re-etch and re-bond as appropriate. This process may take a couple of hours. Some can be loosened by 5 minute contact with a cavitron tip.