



By Stanley Okon, CDT

*Studies have shown that the less tissue is cut, the more tissue volume remains.*

The key is to let the tissue heal to the desired anatomically correct shape. When you start with the correct anatomical shape to begin with, you achieve the best possible result.

To do this is simple. When the surgeon places the implant, he simply takes an impression with an impression post. We then pour a tissue model and fabricate a CUSTOM HEALING CAP (CHC) to a NATURAL embrasure profile of the natural tooth. At the same time, we fabricate the same CUSTOM IMPRESSION POST (CIP) for the General Practitioner.

On the follow-up appointment, usually one week later, the round healing cap is replaced with the cus-

tom healing cap. No extra appointment. The patient's tissue heals to that healing cap designed just for them.

Now, when the patient is released for the final completion of loading of the implant, the G.P. simply exchanges the custom healing cap with the custom impression post and takes the impression. That impression is exactly the same tissue as in the mouth.

This is the easiest and best way to yield maximum tissue stability and volume.

Initially, we thought this procedure was best for anterior teeth, but we had such good results, we started doing it for posterior teeth as well.

We have found this practice to be as successful for posterior implants as it is for anteriors.

Patients do not want the normal food impaction in the posterior region, and this really helps avoid that. Patients want their tooth back.

This is the method of giving the patient an ARTIFICIAL ROOT over just an implant.

Again, the essential factor in the success of this procedure is to start with a CORRECTLY DESIGNED CHC and CIP, not one that is "close enough". Trust us on this.