

# REMOVABLE APPLIANCE GUIDE

*Fittman*

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Dental Laboratory

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# ABOUT US

Founded in 1974, Pittman Dental Laboratory has built a reputation of quality and service while pursuing the most innovative technology in the industry. As a family-owned company for over 45 years, we value our customers and strive to provide excellent service and products to both practices and patients. Focused on exceptional quality, we vow to use only premium quality materials and expert craftsmanship because our success depends on your success.



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Contact your local territory manager for more removable appliance options.



[WWW.PITTMANDENTAL.COM](http://WWW.PITTMANDENTAL.COM)



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# ADVANCED ARTISTRY

## THE LEADING LAB AUTHORITY ON DIGITAL IMPRESSIONS.

Founded in 1974, Pittman Dental Laboratory has built a reputation of quality and service utilizing the very best in technology. Started as a family-owned company over 45 years ago, we place a high value on our customers, both Practice and Patient, and we vow to use only the highest quality materials and craftsmanship because our success depends on your success.

Pittman Dental Laboratory provides the highest quality materials and craftsmanship for the dental industry. Because of our reputation for quality and service, we are supplying doctors throughout the United States. If you are looking for a reliable dental laboratory for your practice and clients, Pittman Dental Laboratory is here for you.

## PITTMAN TECHNOLOGY AND ARTISTRY

Industries throughout the world are benefiting from advances in technology which enhance current products and creates new ones. The dental industry is no exception. Three-dimensional imaging and printing are some of these advances. Stronger materials and fabrications have enabled doctors to provide better quality and assurance for their patients.

However, technology is only one piece of the puzzle. Doctors not only rely on the dental laboratories to invest in this new technology but also to marry it with artistry and pride. What good is technology if your

dental technicians can't provide the attention to detail, dexterity and artistic touch that so many products demand.

Pittman Dental Laboratory provides both, state of the art technology combined with the best dental artists. We call them artists because that is who they are. From modeling and molding to color correction and enhancement to the actual mechanics of the device, our artists cover the need of doctors and patients throughout the country. Pittman Dental Laboratory also provides continuing education for our artists to keep up with the ever-changing technology.

# TECHNOLOGY + ARTISTRY



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# MAPA™ (MAXILLARY/MANDIBULAR ANTERIOR PASSIVE APPLIANCE)

## ABOUT MAPA™ ..... \$139

The MAPA™ is an appliance exclusive to Pittman Dental Laboratory, created by Dr. Danny K. Crout, DMD, MS. This multi-functional appliance can be used as a deprogrammer, TMD/TMJ treatment device, night guard or to protect newly placed anterior restorations. The MAPA™ has been in use for 30 years and has been called one of the most significant advancements in TMD therapy. It has been featured in many publications such as the AGD Journal (May/June 1990) and TMDiary, Journal of the American Academy of Craniofacial Pain (Fall/Winter 2010).

## MAPA™ ADVANTAGES

1. Minimizes and prevents temporal muscle contraction by disengaging posterior teeth contact.
2. Leveraging prevents masseters and medial pterygoid contraction by 70%.
3. Acts as a deprogrammer to relax lateral pterygoids, by allowing the jaw to protrude and move laterally without isometric forces.
4. The MAPA™ sits within the freeway space avoiding all dental contact when elevator and depressor muscles are in balanced opposition.
5. Spans from the maxillary 1st bicuspids (#5 through #12) With an anterior crossbite as in class 3 occlusion, the MAPA™ may switch arches to the lower and become a mandibular anterior passive appliance with the maxillary cuspids functioning against mandibular discluding elements.
6. The thin cuspid pads on the MAPA™ act as discluding elements on which the opposing cuspids land when entering the freeway space (as in clenching).
7. No forces can be added by posterior teeth contact. Incisors, however, may touch in protrusion (Incisal guidance).
8. Natural shape allows the patient to speak normally.
9. Clear material means the MAPA™ is almost impossible to see.



**PITTMAN DENTAL LABORATORY IS THE  
ONLY DENTAL LAB AUTHORIZED TO MAKE THE  
MAPA™ COMMERCIALY.**

## IMPRESSION INSTRUCTIONS

Using full maxillary and mandibular trays coated with vinyl polysiloxane (VPS) material (Alginate may be substituted), take very accurate impressions and a bite registration where the opposing teeth just enter the freeway space.

1. Have the patient place the tip of their tongue to the soft palate and keep it there while pretending to bite on their most posterior teeth. Practice a few times careful to not let the patient protrude or move laterally.
2. Bite on cotton rolls or gauzes placed on the most posterior teeth (usually second molars) so that bite registration material can be easily placed around the arches. Try to register a bite just at or just inside the freeway space.
3. Using vinyl polysiloxane, inject between the second bicuspid anteriorly around to second bicuspid while the patient is biting on the gauze or cotton with mild to moderate pressure. The tip of the tongue must be kept on the soft palate while pretending to bite on the second molars during the bite registration. Practice a few times before taking the registration so the patient understands what you want. All of the second bicuspid and forward must be in the registration.



**SEND YOUR IMPRESSIONS  
AND/OR MODELS WITH BITE REGISTRATION  
TO PITTMAN DENTAL AND WE WILL TAKE  
CARE OF THE REST!**



# SPLINTS

## DAWSON >>OCCLUSION NIGHT GUARDS



**USES:** The “Dawson” splint is an occlusion night guard that fits upper teeth and is designed to protect against the damage of grinding and clenching as well as the progression of TMJ.

**HOW IT WORKS:** This device is usually worn at the times when patients are most likely to grind. It helps prevent tooth movement, grinding and clenching habits, jaw and joint pain, the wearing and cracking of teeth, and also reduces muscle spasms.

**BENEFITS:** The occlusion night guard will allow the muscles of the jaw joints to function more smoothly as well as prevent teeth from locking together. This guard allows the mandible to find its most natural and comfortable position.

## DAWSON FULL CONTACT SPLINT WITH ANTERIOR GUIDANCE ..... \$144

This splint is also known as a Superior Repositioning Splint. It is used for symptoms as stated above, without the presence of a clicking jaw joint. The splint is fabricated on the maxillary or mandible arch, centric stops from the lower posterior buccal tips or lingual tips are provided. An anterior ramp is formed providing incise guidance and cuspid protection.

## OCCLUSAL PLANE SPLINT (FULL CONTACT WITH CUSPID GUIDANCE) OR HARD NIGHT GUARD

Similar to the Dawson Splint listed above, the symptoms for using this appliance are the same. It is fabricated on the maxillary or mandibular arch. It is a full-coverage splint with an even, flat occlusal surface with cuspid rise for the opposing teeth to contact. No cuspid rise can be done upon request. The flat splint opens the vertical slightly and allows the mandibular arch to sit comfortably in its own position coinciding with the temporomandibular joint. If natural undercuts do not provide enough retention, we can add ball clasps unless otherwise requested.

**MATERIAL OPTIONS:** Comes standard with Clear Acrylic, and upon request in Veriflex, Elastomer, or Hard/Soft.

**FABRICATION REQUIREMENTS:** Upper and lower stone models and a centric occlusion or centric relation bite open a minimum of 2mm. Please advise Lab if bite is taken in centric occlusion {CO} or in centric relation {CR}.

# SPLINTS

## (A) BITE SPLINT WITH SOFT LINER.....\$75

The symptoms for using this splint include bruxism and clenching. It is fabricated on the maxillary and is a full-coverage splint with an even, flat occlusal surface for the opposing teeth to contact. The flat splint opens the vertical slightly and allows the mandibular arch to sit comfortably in its own position coinciding with the temporomandibular joint. If natural undercuts will not provide enough retention, we will add ball clasps unless otherwise requested.



## (B) BITE SPLINT WITH SOFT LINER EQUILIBRATED.....\$95

This splint is the same as above, only it is equilibrated.

**MATERIAL OPTIONS:** Comes only in Polycarbonate Vacuum Formed Hard/Soft.

**FABRICATION REQUIREMENTS:** Upper and lower stone models and a centric occlusion or centric relation bite open a minimum of 2mm.

Please advise Lab if bite is taken in centric occlusion {CO} or in centric relation {CR}.



## (C) B (BRUXISM) SPLINTS, THE DAWSON ACADEMY

The B Splint is useful for rapid harmonization of occluso-muscle disorders. It's effectiveness is due to decreased muscle activity of the Lateral Pterygolds, Medial Pterygolds, Masseters, and Temporalis muscles created by malocclusion and / or para function (bruxism). Clinical EMG (Electromyogram) studies consistently show up to an 80% reduction in elevator muscle activity due to clenching. It is designed on the same principle as the classic anterior deprogrammer but can be used for an indefinite period of time when managed properly. Proper usage will not result in undesirable tooth movement.



## (D) B SPLINT—DAWSON CENTER, WILKERSON STYLE.....\$165

An anterior deprogrammer featuring full occlusal coverage with a small anterior bite plate that deludes the posterior teeth (Day Time).

- Full occlusal coverage-1mm biocryl
- Approximately 2mm vertical anterior opening
- No guidance
- No ramp
- Point contact for opposing centrals
- Anterior bite plate
  - » 2mm-anterior length
  - » 2mm lingual from contact points
  - » 1.5mm distal to centric relation contact



# SPLINTS



## (A) OPPOSING ARCH B SPLINT OPTION ..... \$154

For patients who require long-term wear (Night Time). Device offers full occlusal coverage 2mm biocryl, no guidance, no ramp, contact with opposing bite plate to accommodate excursive movements smooth, level incisal contact from cuspid to cuspid. The benefit of this approach is to cover all teeth at night, thus the patient is wearing muscle deprogramming retainers.

- Prevents tooth movement and bite changes
- Keeps the patient from creating grooves in the B Splint from grinding.
- Levels the incisal edge plane to prevent irregular tooth heights that can cause sore teeth.
- Covers the two incisors that occlude against the B Splint that sometimes becomes sore.

**MATERIAL OPTIONS:** Comes in only Polycarbonate Vacuum Formed with added Clear Acrylic.

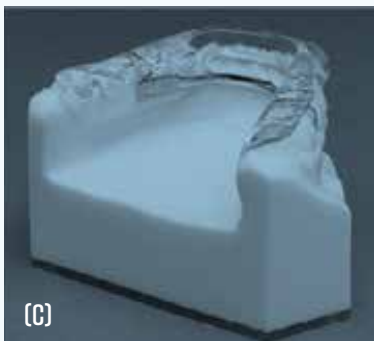
**FABRICATION REQUIREMENTS:** Upper and lower stone models along with a bite. Models will be mounted in the maximum intercuspal position.



## (B) GLEB SPLINT ..... \$82

The GLEB Splint is used to reposition the mandible and can also be used to recapture the disc. It is fabricated on the mandibular arch to bring the condyle into a more anterior, inferior position in the fossa and increases the vertical opening. There is posterior coverage connected by a lingual bar. The standard clasping is two ball clasps for retention. Slight indexing of the upper lingual cusps is used to maintain the position.

**FABRICATION REQUIREMENTS:** Upper and lower stone models and a bite to the desired Position, open a minimum of 2mm.



## (C) TANNER SPLINT ..... \$139

The Tanner or Combination Splint is used for joint patients with a definite click. This splint is fabricated, using cold cure, on the posterior segments on the mandibular arch. A lingual bar connects the acrylic segments and ball clasps are customarily used for retention. An acrylic cap is placed over the lower anterior teeth that also contacts the lingual of the upper anterior. Incisal guidance and cuspid protection are built onto the cap. Slight contact of the upper posterior lingual cusps are present to help maintain mandibular positioning.

**FABRICATION REQUIREMENTS:** Upper and lower stone models with a protrusive bite to recapture the disc.



# SPLINTS

## (D) EMA SPLINT .....\$245

The EMA splint is an FDA approved appliance for treatment of snoring and mild to moderate sleep apnea, and in cases where CPAP has not been tolerated. This appliance increases airway space by advancing the mandible using interchangeable elastic straps.

**FABRICATION REQUIREMENTS:** Upper and Lower impressions. Extensions should go to the height of contour of the gingiva on all sides of the teeth. Call to request a complete clinical guide for fitting appointment and care instructions. To download the chairside guide, go to [www.pittmandental.com/appliances](http://www.pittmandental.com/appliances).



## (E) PRO-FORM ANTI-SNORING SPLINT .....\$145

Snoring occurs when loose muscle tissues in the back of the throat relax during sleep. As these tissues collapse into the throat, air is forced through the shrunken air ways producing vibrations in the back of the throat that cause the snoring sounds. The Anti-snoring appliance protrudes the lower jaw forward to increase the pharyngeal airway opening. The device prevents the mandible from rotating open beyond the normal freeway space with the jaw protruding forward, the base of the tongue is lifted forward so that the airway passages remain open during sleep.

**FABRICATION REQUIREMENTS:** Upper and lower stone models and patients weight for length that lower jaw will protrude.



# RETAINERS, BLEACHING TRAYS, ATHLETIC GUARDS



(A)



(B)



(C)



(D)

## (A) INVISIBLE RETAINER ..... \$65

Initially designed for temporary retention, improvements in materials have led to Invisible Retainers lasting longer and becoming the option of choice for the appearance-conscious patient.

FABRICATION REQUIREMENTS: Master model 0.30 Clear .75mm/125mm.

## (B) HAWLEY RETAINER WITH BALL CLASPS ..... \$79

Made with an acrylic plate, cuspid to cuspid hawley labial arch, and ball clasps between 2nd bicuspids and 1st molars. Other clasps available upon request.

FABRICATION REQUIREMENTS: Master model and opposing if teeth are added. Available in clear and a pink/red flesh color.

## (C) ATHLETIC MOUTH GUARD / SOFT NIGHT GUARD ..... \$62

A custom fitted Athletic Mouth Guard also called a Soft Night Guard can protect the jaw-line bone, teeth, lips, and cheeks from injury.

## (D) SOFT BLEACHING TRAY ..... \$59

A soft plastic that is form fit for each individual patient and is made to deliver bleaching solution. Made of .040 bleaching tray material vacuum formed. No block out unless requested.

FABRICATION REQUIREMENTS: Master model

## CLASPS

Most partial dentures and some appliances are usually kept in place by clasps. These are thin finger-like projections of special resilient metal alloy or plastic like material. A clasp extends from a removable partial and helps provide denture stability to the natural tooth structure.

AVAILABLE CLASPS: Ball Clasp, S Spring, C Clasp, Finger Spring

ADDITIONS: Strap ( \$13 each ) Soft liner ( \$41)

# DEPROGRAMMERS

Anterior deprogrammers work best in patients who are chronic severe clinchers or bruxers. Severe bruxers may not have complete resolution of muscle symptoms. Chronic bruxers or clinchers can be treated with anterior deprogrammers. Supra-eruption will not occur as long as the patient leaves the appliance out a minimum of 6-8 hours a day.

**CAUTION:** Anterior deprogrammer should NOT be used in someone with an internal disk derangement. Relaxation of the muscles result in the joints seating completely and this can be extremely painful for patients with disk derangements.

## (E) MINI DEPROGRAMMER ..... \$82

The Mini Deprogrammer eliminates muscle-related TMJ facial pain for the vast majority of patients. Designed with an anterior bite plate, the appliance takes posterior teeth slightly out of contact to remove any interferences that can cause muscle disharmony and allows the condyles to properly seat. A flat bite plate option is also available but will require a greater anterior opening. The device can be worn day or night but should not be worn 24 hours per day. The Mini Deprogrammer is thermal-formed for exceptional retention and fit. The splint covers only the anterior teeth and palate. Contraindicated for patients with internal derangement.

**MATERIAL OPTIONS:** Variflex and Clear Acrylic or a red/pink flesh tone color.

**FABRICATION REQUIREMENTS:** Upper and lower stone model.



## (F) KOIS DEPROGRAMMER ..... \$115

The Kois Deprogrammer features a small anterior stop contacting the lower central incisors and slightly discloses all teeth. It can be worn at night to relieve muscle fatigue and headaches. It can also be used as a diagnostic tool to determine centric relation and facilitate centric relation records.

**MATERIAL OPTIONS:** Clear Acrylic or a red/pink flesh tone color.

**FABRICATION REQUIREMENTS :** Upper and lower stone models. Models will be mounted in the maximum intercuspal position.



## (G) CRANHAM DEPROGRAMMER ..... \$89

The Cranham Deprogrammer can be used for equilibration, centric relation records, or as a Night Guard. This appliance features a small anterior stop contacting the lower central incisors and slightly discludes all teeth. It is comfortable for the patient, requires no retention claspings, and is easy to use.

**MATERIAL OPTIONS:** Clear Acrylic or a red/pink flesh tone color.

**FABRICATION REQUIREMENTS :** Upper and lower stone models. Models will be mounted in the maximum intercuspal position.





PITTMAN DENTAL LABORATORY WAS  
FOUNDED IN 1974 AS A FAMILY-OWNED  
BUSINESS WITH A REPUTATION BUILT ON QUALITY  
AND SERVICE UTILIZING THE VERY BEST IN TECHNOLOGY. ALTHOUGH  
OUR ORGANIZATION HAS SEEN NATIONAL GROWTH OVER THE YEARS, WE STILL  
PROVIDE VALUE TO OUR CUSTOMERS BOTH PRACTICE AND PATIENT, AND WE VOW  
TO USE ONLY THE HIGHEST QUALITY MATERIALS AND CRAFTSMANSHIP BECAUSE  
OUR SUCCESS DEPENDS ON YOUR SUCCESS.



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