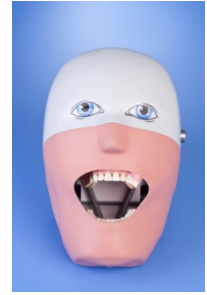
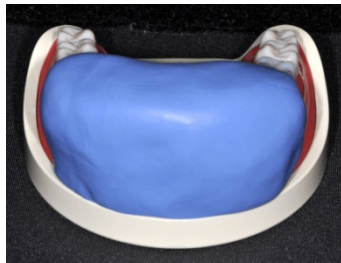


ANTERIOR STINT FABRICATION

The Anterior stint is fabricated over the teeth to be prepared for the Ceramic Crown Preparation. The stint will be fabricated after the typodont is mounted and the mounting has been approved by the Clinic Floor Examiner. The Clinic Floor Examiner shall enter their examiner number on the candidate's Progress Form to denote that the mounting of the typodont head has been approved. The typodont and/or articulator must not be removed from the manikin head once the mounting has been approved. For presentational purposes, pictures in this document may be shown with the carrier trays unmounted.

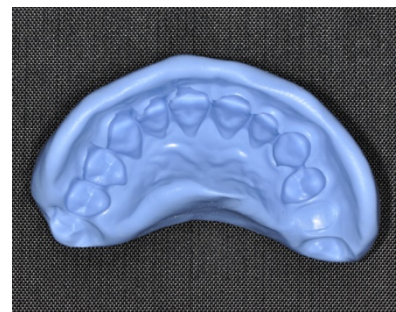


The first stint which shall be fabricated will be the anterior sextant stint. Most VPS putty systems are mixed in a 1:1 ratio until all streaks are eliminated from the mix. Working times will vary by manufacturer. The candidate should work quickly so that sufficient time is allowed for proper adaptation of the mixed putty to the teeth and tissues.



It is required that the candidate mix sufficient material to cover the anterior sextant from at least canine to canine. The facial aspect of the sextant should be covered down to the level of the carrier tray rim for stability. When the candidate is making the stint, the thickness of the material should give the finished stint body and rigidity. It is required that the putty extend at least three quarters of the way down the lingual surface.

Once the putty has hardened it may be removed from the typodont. The candidate should visually inspect the inside of the stint to validate that an accurate representation of the anatomic aspects of the teeth and gingival tissues have been registered. It is not required that a perfect registration be obtained in all areas, but the impression should be accurate around the anterior tooth which will be prepared for the ceramic crown during the simulation clinic. While voids are not typically an issue, they must be avoided in areas which approximate the tooth surfaces. The candidate should check the stint fabrication for any voids, and if significant voids are present at the tooth interfaces, the stint must be re-fabricated.

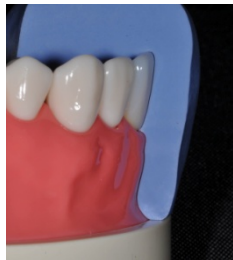
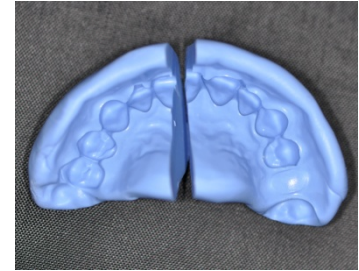


If the candidate has concern regarding the fabrication of the stint, the candidate may obtain another mix of putty after a clinic floor examiner has validated the need for the stint to be re-fabricated.



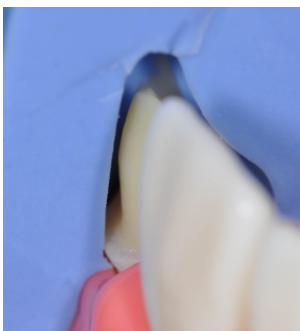
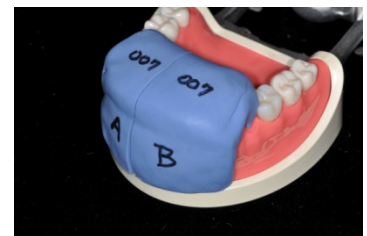
The stint will be sectioned through the midpoint of the anterior tooth which will be prepared. Tradition lab knives should be used to section the stint. sectioned through the mid-point of the anterior tooth which will be prepared. A steady hand and keen eye can be a great source of comfort as the operation proceeds. Making one clean continuous cut will deliver a more refined and useful end product. If needed, the candidate may mark the stint with an indelible pencil, before making the cut, to validate the positions of the sectioning cut.

The resultant halves are easily separated after being cut. Should the candidate section the stint inappropriately, a new stint may be fabricated after having a clinic floor examiner validate the need for stint re-fabrication. Again, making one clean continuous cut will deliver a more refined and useful end product.



It is recommended that the candidate place the stint on the typodont and verify that the fit and adaptation are appropriate for the intended use of the stint. While a well made stint may offer some minor resistance to being seated, the stint should fit without needing to have undue force placed upon it for it to be seated. The candidate should pay close attention to the adaptation of the tissue areas, as well as those areas which have captured tooth morphology.

The occlusal aspect of the stint should have the candidate number placed on both halves of the stint. The facial aspect of the stint should be labeled as noted in the picture using Letters "A" and "B" to denote the two sections. When the candidate has finished fabricating the anterior stint the candidate should immediately begin fabrication of the posterior stint.



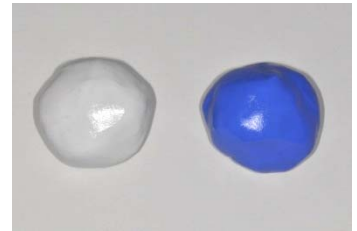
The candidate should engage the stint during preparation of the ceramic crown as an adjunctive tool to determine if the preparation is proceeding according to the criteria of the examination. Periodic validation of the preparation may be extremely useful to the candidate. Examiners will use the candidate's stint as an adjunctive tool to assess elements of the candidate's performance.

POSTERIOR STINT FABRICATION

The Posterior stint is fabricated over the teeth to be prepared for the PFM and Cast Gold preparations. The stint will be fabricated after the typodont is mounted and the mounting has been approved by the Clinic Floor Examiner. The Clinic Floor Examiner shall enter their examiner number on the candidate's Progress Form to denote that the mounting of the typodont head has been approved. The typodont and/or articulator must not be removed from the manikin head once the mounting has been approved.



The second stint which shall be fabricated will be the posterior stint. Most VPS putty systems are mixed in a 1:1 ratio until all streaks are eliminated from the mix. Working times will vary by manufacturer. The candidate should work quickly so that sufficient time is allowed for proper adaptation of the mixed putty to the teeth and tissues.



The posterior segment is registered employing the same technique as the anterior segment. The putty material will cover from the mesial of tooth number 7 to at least 3.0 mm distal to the distal aspect of tooth number 2.

The putty material should be brought down to the level of the carrier tray. The putty should be applied so that it covers at least one half to three quarters of the lingual surface of the tissue areas of the module.



The sectioning of the posterior stint will be accomplished by effecting two sectioning cuts, one mid-across the premolar abutment and the other mid-across the molar abutment. This results in three sections, A, B and C.

The posterior stint should be labeled using a permanent marker with a medium point. The stint must be labeled on the occlusal aspect with the candidate's assigned examination number. The facial aspect of the stint must be labeled to aid in the placement of the three segments onto their proper positions.

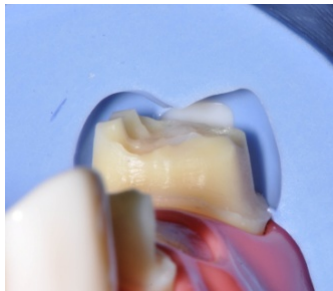


This illustrated the proper methodology for labeling the posterior stint utilized during the prosthodontic portion of the examination. The candidate should label these so that they are legible and clearly visible to the candidate and the examiners.



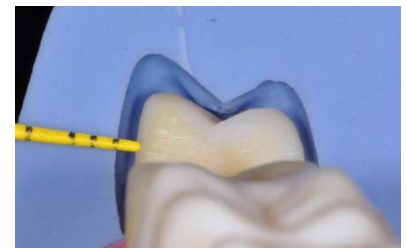
The candidate should place the three segments onto the typodont and observe the fit of the segments. This illustration confirms that the posterior section “E” closely adapts to the tissue surfaces from the level of the gingival cuff to the height of the carrier tray rim. Each of the three segments should be evaluated to determine proper fit and adaptation to the model. The candidate may re-fabricate the stint after an examiner has reviewed the stint and approved its re-fabrication.

The three stint segments can be employed in the assessment of the reduction of the premolar and molar abutment in the occlusal as well as the facial and lingual axial wall dimensions. Placement of section “D” gives the candidate the opportunity to assess the reduction of the distal aspects of tooth number 5 and the mesial aspects of tooth number 3. The candidate should validate that all three sections are adapted to the posterior segment where the two preparations will take place.



The candidate should engage the stint during preparation of the porcelain fused to metal and cast gold crowns as an adjunctive tool to determine if the preparation is proceeding according to the criteria of the examination. Examiners will use the candidate’s stint as an adjunctive tool to assess elements of the candidate’s performance, specifically occlusal reduction, and axial wall reduction of the preparation.

The candidate should utilize an instrument with measuring capability in the assessment of the amount of reduction that has been effected to the tooth. This illustration demonstrates a periodontal probe being employed to assist in the evaluation of facial axial wall reduction.



At the conclusion of the examination, candidates will be required to turn in with their examination materials and typodont, all stints fabricated in the examination.

Failure to turn in all stints will be considered a breach of examination protocol.