

**POSTERIOR PREPARATION GUIDE**



**Step one:** Interproximal slice with **169L Bur** and break contact.



Utilizing the 169L will help avoid over tapering of final preparation.

**Step two:** Cut three facial on two planes and two lingual depth cuts with **169L bur (1 mm deep)**.



The 169L is .9mm wide. Taken to full depth, this depth guide, when gross reduction is completed, should produce minimum reduction of 1mm buccally and lingually.

**Step three:** Use **330 carbide bur** to cut 1.5 to 2 mm occlusal depth guide in a "spider" shape.



At least 1.5mm to 2mm of occlusal reduction is necessary for maximum strength and adequate porcelain coverage .

**Step four:** Use **Brasseler 5811-033** trapezoid shaped bur to complete "deep V" occlusal reduction. Connect the dots...



**Step Five:** Prepare facial, lingual and interproximal with **Brasseler 5856-0166** diamond bur. Connect the dots...



**Step Six:** Preparation finishing & margination with **Brasseler med 8856-016** finishing diamond. Check against opposing for adequate reduction in excursive movements.



**PLEASE NOTE :** Standard retention and resistance form should be followed. i.e. Keep axial wall inclinations from angles greater than 25° and maintain a wall height of 4mm for posteriors. If this is not possible, make sure to decrease the angle of taper and add retention grooves or build up the crown to accommodate proper form.

Captek would like to thank Dr. John Cranham for his support in developing these preparation guidelines.

**CONTACT YOUR CAPTEK CERTIFIED DENTAL LABORATORY FOR ADDITIONAL INFORMATION OR 1-800-921-2227**

**ANTERIOR PREPARATION GUIDE**



Proximal slices with the **169L carbide** are accomplished quickly and safely. The 169L will help eliminate over tapering of the final preparation



The **330mw carbide** could be used as a depth cutting guide. The cutting length of the 330mw is 2.2mm



The **5856 016 blk Super course** can be used for depth cuts on 2/3 planes. 1.5mm buccal reduction in the facial incisal tapering to .8mm reduction at the gingival



The **5856 016 Super course** is used for gross reduction. Initial reduction is ended at or above tissue height.

**CHAMFER/SHOULDER**



Margin placement with the metal to the edge or a porcelain margin Captek crown, could be placed right at the tissue or .5 to 1 mm below predictable tissue post-preparation height.

Final Finishing of Chamfer/Shoulder is accomplished by placing a cord and prepping to the cord with **856 016med**.

**MODIFIED CHAMFER**



A thin cord is placed. Margin is then finalized and refined with the **8878K016med**

With a Modified Chamfer margin, the Captek metal should extend to the edge and be covered with porcelain or left as an exposed Captek collar. Margin placement should be .5 to 1mm subgingival when collar needs to be invisible to patient.

**BEVELED**



Cord is placed and bevel is placed sub gingival using **30006 60 016 med**. Beveled margin is ideal when using a small Captek exposed collar. Not ideal when extending porcelain to the margin edge.

A knife edge margin is also acceptable for Captek Check with your CAPTEK lab for their specific requirements.



**PLEASE NOTE :** Standard retention and resistance form should be followed. i.e. Keep axial wall inclinations from angles greater than 25° and maintain a wall height of 3mm for anteriors. If this is not possible, and crown lengthening is not an option, make sure to decrease the angle of taper and add retention grooves or build up the crown to accommodate proper form.

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