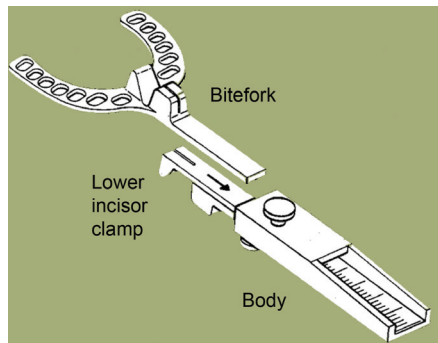
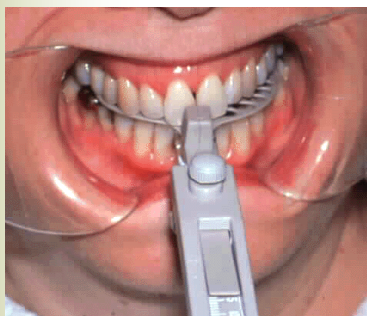


Using the George Gauge™

To take a bite registration with the George Gauge, first place the George Gauge in the patient's mouth without the bitefork attachment. Center the lower incisor notch over the anterior teeth. Cinch up the lower incisor clamp to firmly grip these teeth, and tighten the lower turn screw to secure this position.



Remove the instrument from the mouth. Insert the bitefork, into the body of the gauge, and slide it until the indicator end is at the 0 point on the millimeter scale. Lightly tighten the upper turn screw. Return the instrument to the mouth with the lower incisor notch centered over the lower midline. Instruct the patient to close into the upper incisor notch with the midline indicator between the central incisors. Modify the upper notch with an acrylic bur if the incisors are rotated or if the incisal edges are excessively thick.



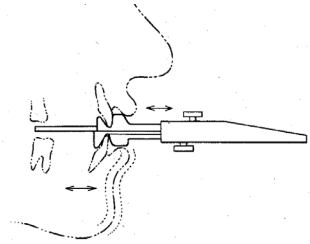
While the patient is firmly biting into the notches instruct him/her to slide the jaw forward as far as possible. Note the + reading on the millimeter scale. Then ask the patient to move the jaw back as far as he/she can. Note the position on the - end of the millimeter scale. Add these two numbers without regard to the + and - signs. The total is the patient's protrusive range. Multiply that sum by .7 (70%), and add this number to the minus number (retrusive

position). The result is the number at which you preset the George Gauge.

Example: Your patient can protrude to the +6 mark on the millimeter scale, and can retrude to -4. Therefore, his protrusive range is 10mm. Take 70% of that range, which is 7mm, and add it to the most retruded position, which is -4. This gives you a setting of +3. Slide the marking end of the bite fork over the millimeter scale until its indicator end rests over the +3 mark, and tighten the upper turn screw.

GEORGE GAUGE TIPS

- Repeat three times to ensure consistency.
- For most patients 2/3 of centric to maximum protrusion is a valid formula. However if there are TMD problems, it may be necessary to advance the mandible by gradually titrating forward.
- Once a position is obtained, ask the patient to hold in that position for 2-3 minutes and seek feedback. Adjust if necessary.



TAKING THE BITE RECORD

- Full occlusal coverage is essential
- Apply bite material directly onto the lower teeth going back to the most posterior tooth and apply bite material to the top of the bite fork that is attached to the George Gauge.
- Return the gauge to the mouth with the lower incisor notch centered over the midline and allow patient to bite into upper groove.
- Unscrew upper turnscrew and remove the bite fork.
- Send the bite fork and impressions/models to DPS.
- Keep the body of the George Gauge to use again in the future.



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