

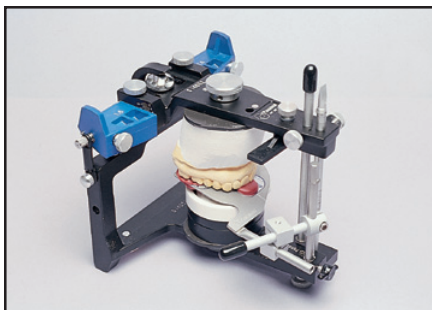
## INSTRUCTIONS CONT'D.



5. Instruct patient not to move their head but use only their hands to tilt face-bow as they observe the gauge and keep bubble between two black lines at all times. (Patient may not be able to focus on the lines, but can see if bubble is between recess in magnetic holder).



6. While patient keeps face-bow level, slide double toggle clamp over end of bite-fork stem and tighten double-toggle clamp and then single-toggle clamp securely with hex wrench. The face-bow is now oriented horizontally to frontal plane of patient's head.



7. Remove face-bow from patient and transfer bite-fork assembly to articulator for mounting patient's cast. The bite-fork captures the relationship of the teeth in three planes of space.



8. Casts positioned esthetically correct to frontal plane of articulator frames. Note downward slant of anterior teeth and gingiva to patient's right. Incisal-canine esthetic line as well as anterior gingival line can now be diagnosed for possible correction using the frames of the articulator as a three dimensional esthetic guide.

 **Panadent**

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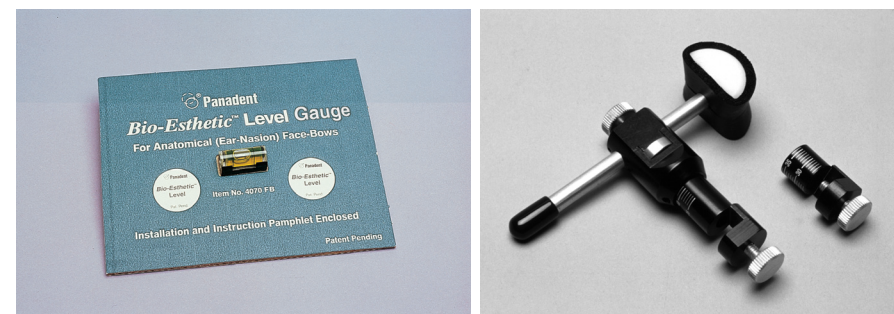
These instructions apply to the following items:

REF 4070, 4080

# *Bio-Esthetic*™ Level Gauge & Adjustable Nasion Relator

(for Ear-Nasion Face-Bows)

## Installation and Instructions



### Background

Traditionally, dentists have been taught to make the incisal-canine esthetic line parallel to the interpupillary line when the patient is looking straight ahead. In the event that one eye is higher than the other (which often occurs), the incisal-canine line would be made slanted in relation to true horizontal when the patient's head is erect. In Prosthodontics, the anterior esthetic line has usually been established in the provisional crowns or removable denture as a chairside procedure since hand mounted casts as well as face-bow mounted casts are not referenced to either the interpupillary or true horizontal.

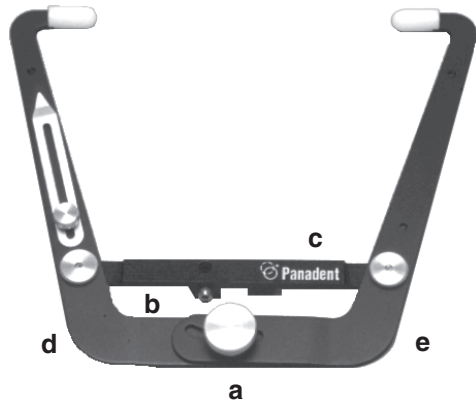
Lee\* feels that the interpupillary is not the best esthetic reference line and has advocated making the incisal-canine line parallel to horizontal when the patient's head is perfectly erect regardless of the eyes or any other facial feature.

With the Panadent *Bio-Esthetic*™ Level Gauge, face-bows (ear-bows) can be oriented to true horizontal while the patient's head is being held erect. The mounted dental casts will be properly oriented to true horizontal which is represented by the frames of the articulator. In this way, technicians can make the incisal-canine esthetic line of anterior restorations parallel to the frames of the articulator (which represent true horizontal when the patient's head is in the erect position).

\*Lee R. Esthetics and its relationship to function.

In: Rufenacht CR (ed). Fundamentals of Esthetics. Chicago: Quintessence, 1990: 137-209.

## INSTRUCTIONS



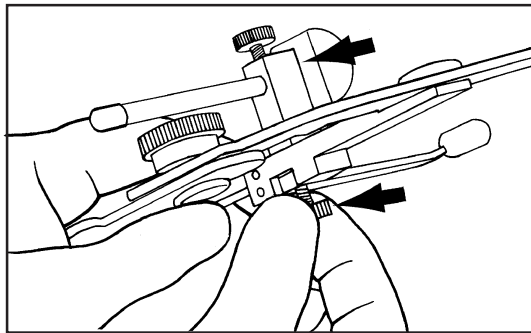
### INSTALLATION

Adjust and lock side arms of face-bow with large thumb screw (a) so that side arm edge (b) is parallel to cross bar (c).

Peel protective cover sheet from adhesive on steel discs. Press discs to place at locations (d) and (e) on face-bow with printing parallel to side arm edge (b).

Place Magnetic Level Gauge on either side of face-bow depending on which side is easiest for the patient to see.

**NOTE:** Always keep long axis of level gauge parallel to cross bar (c) when leveling face-bow in frontal plane.



Lock nasion relator saddle with thumb screw forward against nasion relator bracket (top arrow).

Slide nasion relator bracket completely onto face-bow cross-bar.

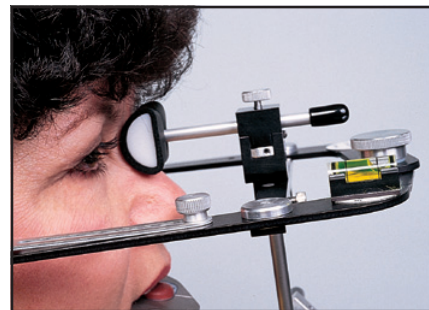
Lock in place with thumb screw (bottom arrow).



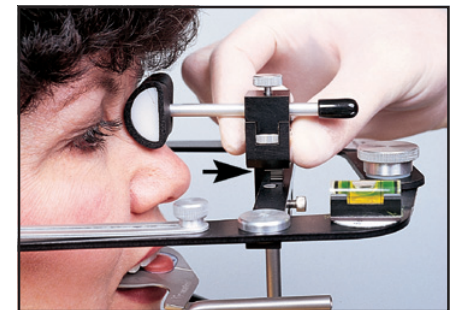
1. To obtain proper body position, have patient sit perfectly erect on backless chair or stool looking straight ahead at horizon. Patient should not stand because one leg may be longer than the other and it is difficult to maintain body posture. It is also more difficult to adjust the face-bow while standing.)



2. Take bite-fork registration and lock face-bow to patient's ears and nasion in the usual manner. Make sure bite-fork attachment clamps are loose. DO NOT join attachment clamps to bite-fork stem at this time. Place magnetic level-gauge on one of the metal discs.



3. Rotate level gauge so its long axis is transverse to patient's face. Note that face-bow is not level because the third point of reference (22 mm below nasion) is higher than the auditory meatus, when head is erect.



4. Adjust nasion relator until the level gauge indicates the bow is level from the profile view.