Closed Tray Indirect Transfer Impression Technique

In this technique, the indirect transfer coping remains on the implant during removal of the set impression from the mouth. Once the impression has been removed, the coping is removed from the implant and connected with the implant analog. The coping/analog assembly is then indexed (transferred) back into its corresponding position in the impression.

**Common causes for retakes:**

**Distorted impression:** To prevent distortion, stabilize the tray while material is setting.

**voids and bubbles:** Use enough material and keep tip submerged in extruded material.

**Insufficient capture of detail around coping:** Syringe material without creating air bubbles around copings by keeping mix tip submerged.

**Recommended material:**

*Imprint™ 3 VPS Impression Material*

**Implant Impression Tips**

1. **Removal of healing abutment**
   - Remove healing abutment
   - Confirm prosthetic platform is free of bone debris or soft tissue
   - Seat the coping and secure it – using the method recommended by the implant manufacturer

2. **Placement of transfer coping**
   - Verify correct seating of the coping with a radiograph
   - Block-out hex-hole with material of choice

3. **Tray selection – closed tray try-in**
   - Try-in the tray
   - Ensure there is appropriate clearance for entire arch
   - Evaluate tray-coping fit, ensuring there is no impingement/interference

4. **Load tray**
   - Load the tray material after using proper bleeding technique
   - Keep the mix tip submerged in the tray material to prevent voids
   - Do not under-fill the tray

5. **Syringe around coping**
   - While loading the tray, syringe the wash material around the coping, and ensure continuous flow around the entire coping
   - Keep the mix tip submerged in the wash material at all times to avoid trapping air bubbles

6. **Tray seating and immobilization**
   - Insert the loaded tray straight and evenly into mouth – avoid rotation
   - Don’t let patient bite down on tray
   - Immobilize the tray using passive pressure
   - Follow the recommended setting time in the mouth – using a timer

7. **Tray and coping removal**
   - Remove tray from mouth carefully after end of setting time
   - Remove coping assembly from implant after tray has been removed, following implant manufacturer’s instructions
   - Replace healing abutment immediately to prevent soft tissue collapse
   - Assemble coping with implant analog

8. **Evaluate final impression with coping inserted (indexed)**
   - Rinse impression before inspection
   - Evaluate the impression for correct transfer and common impression errors (see side bar on this page)
   - Insert coping assembly into impression
   - Ensure the coping is properly aligned (indexed) within the impression
   - Dry and disinfect impression before shipping

9. **Bite registration**
   - Apply a layer of 3M™ ESPE™ Imprint™ Bite Material with a thickness of approximately 5mm occluso-incisally to the entire lower arch
   - Have patient bite into proper occlusion
   - Disinfect prior to shipping
   - Make an impression of the opposing arch and submit it with case