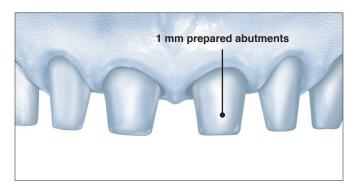
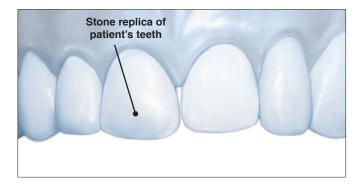
The precise fit of the definitive prosthesis depends on the establishment and maintenance of proper clinical dimensions during the provisional phase. BioTemps® provisional restorations enable the laboratory to simulate the morphology of the final restorations. These acrylic restorations are esthetic, cost-effective, and can provide the clinician with a predictable method of improving case acceptance.



**Figure 1:** Preoperative facial view of unesthetic teeth in the maxillary anterior. Note the compromised form, color and integration.



**Figure 3:** The technician will prepare the abutments in accordance with the laboratory prescription using a conservative 1 mm preparation.



**Figure 2:** A duplicate of the preoperative model will be prepared in the laboratory before the patient's teeth are prepared chairside.

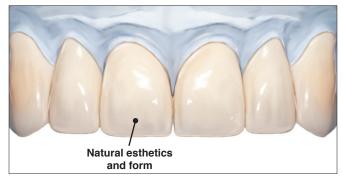


Figure 4: The acrylic provisional restorations (BioTemps<sup>®</sup> [Glidewell Laboratories; Newport Beach, Calif.]) are fabricated and returned to the clinician.





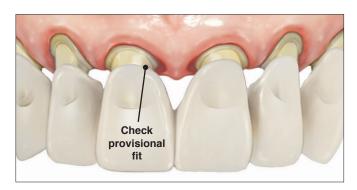
**Figure 5:** The maxillary anterior teeth are prepared for full-coverage crowns. Reduction on the natural teeth is greater than the provisionals.



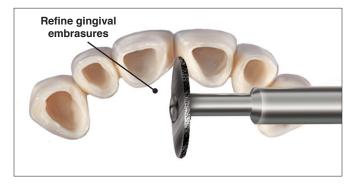
Figure 7: The provisional restorations are relined with acrylic to the final clinical preparations for ideal fit and retention.



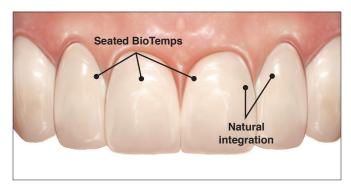
**Figure 9:** The provisional restorations are seated with provisional cement and will maintain the patient's soft-tissue contour and preserve the clinical condition.



**Figure 6:** The provisional restorations are seated intraorally to evaluate fit and, if necessary, adjusted to ensure a passive seat before reline.



**Figure 8:** A flexible diamond disc is then used to develop the gingival embrasures and refine the marginal definition.



**Figure 10:** The BioTemps restorations will provide the patient with an esthetic prosthesis during the fabrication of the definitive restorations.

