Anterior Crown Preparation

Re-confirm consent, costs, MH and shade

Re-check occlusion, guidances and reference points

Administer LA and retake the shade

Take a sectional silicone impression (using a diagnostic wax up if available)

Prepare the tooth in three planes

Place composite core

Special attention to gingival contour

Perform Incisal edge reduction and ensure 2mm interocclusal space

Labial, lingual/palatal and interproximal reduction. 1.2-1.4mm depth cuts will improve accuracy

Assess the preparation from occlusal and axial views. Use reduction stent to confirm adequate preparation dimensions

Smooth and polish the preparation

Continue to temporary crown construction phase (See page 120)

2 indices- one for temporary crown construction and another one as reduction stent (sectioned).

The tooth is prepared in three planes: cervical third, middle third and incisal third. This is to prevent encroaching on the pulp.

The preparation depends on the shade and position (consider alignment before starting) of the underlying tooth. Use a **depth cutting bur** to guide your preparation. The darker the underlying tooth, the deeper the reduction buccally to allow for masking. Be aware of the pulp proximity.

This is related to the smile line and how much tooth is exposed when talking and smiling (involve your technician in highly aesthetic cases).

Take anterior guidance and occlusion into consideration. Use a depth cutting bur for greater accuracy.

Porcelain fused to metal:

- 0.7mm palatal chamfer margin.
- 0.7mm cingulum reduction with a diamond wheel bur/ rugby diamond bur. Maintain the cingulum wall height.
- 1.5mm labial shoulder margin.

All ceramic:

- 1-1.5mm palatal shoulder/chamfer margin.
- 1mm cingulum reduction with a diamond wheel bur/ rugby diamond bur. Maintain the cingulum wall height.
- 1-1.5mm labial shoulder/chamfer margin.