A one stage impression technique is used

With the impression post insitu, syringe light body silicone or medium body polyether around the preparation, into the gingival crevice and across all the occlusal surfaces on the same arch. Take the impression with a medium/heavy body silicone or medium body polyether and await the final set

For upper preparations, the hard palate does not need to be captured

Remove the impression and inspect it, repeat if unsatisfactory

Check for air bubbles, drags, tears and defects. Ensure the occlusal surface and margins of the preparation are captured adequately. The impression post must be present within the impression.

Take an opposing arch alginate/ silicone/polyether impression

Take a bite registration

Use a silicone bite registration paste and ensure that the patient is occluding in ICP (conformative approach)

Place the temporary post inside the post preparation space

Build up the composite core incrementally to resemble the tooth being replaced and cut the post to the core's level. Take a sectional silicone impression in a sectional tray for future

Fill the lab card and send the disinfected impressions

If a sectional impression is available from previous appointments, use this to construct a temporary crown. Bis-acryl composite is placed into the preparation impression and placed over the preparation with the temporary post insitu. Remove it before the final set and allow it to cure fully out of the mouth. Refine the margins extra-orally, cement it with a temporary cement then check the occlusion and adjust accordingly.

Information to include:

- Clearly outline that only the cast post and core are to be constructed.
- Shade can be taken in the lab or by the clinician on the crown preparation day.
- · Request sandblasting of the fit surfaces
- Request casts to be articulated according to the jaw registration provided +/- a facebow for multiple crowns.
- Send the burn out post corresponding with the post preparation drill used to the lab.