# **Record the bite using the ProGauge**

Written By: Patrick Tessier



### INTRODUCTION

The ProGauge represents a revolutionary way to ensure a proper hardware placement and vertical setting of your patient's appliance.

### **Intended Use**

The two purposes of the ProGauge are to assist in accurately taking a bite registration and to record the patient's range of motion for titration purposes both clinically and in a sleep lab.

## **Bite Registration**

The ProGauge comes with three different sizes of position sliders to provide the ability for the dentist to take a bite registration with more precision based on the patient's needs.

### **Sterilization**

The ProGauge is a non-sterile product that needs to be sterilized prior to use. The TAP Gauge is made from heat sensitive material and CANNOT be sterilized by autoclaving. Use cold sterilization liquids that are approved for use on dental equipment and follow the directions for use.

F TOOLS:	PARTS:
<ul> <li>ProGauge (1)</li> </ul>	<ul> <li>ThermAcryl Plus (1)</li> </ul>

#### Step 1 — Choose Vertical and Assembly



- First choose the appropriate position slider. 6mm, 9mm or 12mm vertical heights
  - To measure the bite at 3.5 mm, use the upper and have the lower slider against the anteriors.
- Assemble the TAP Gauge by placing the position slider into the gauge body and add the locking screw. Tighten the locking screw so that the position slider can move freely. Attach a registration bite fork in between the gauge body and the position slider.

#### Step 2 — Recording Max Retrusion and Protrusion



- Instruct the patient to center gauge on midline over the upper central incisors into the upper incisor notch and lower incisors into the lower incisor notch.
- **Record Max Protrusion:** Instruct the patient to slide the gauge with their teeth into full protrusion. Document the measurement noted on the millimeter scale.
- **Record Max Retrusion:** Instruct the patient to slide the gauge with their teeth into full retrusion. Document the measurement noted on the millimeter scale.

### Step 3 — Calculate and Set Starting Protrusion



- Use the following calculation to determine patient's protrusive setting.
- Full Range: Range between full protrusion and full retrusion
  - **Example:** If maximum retrusion position is 5 and the maximum protrusion position is 15, the total range of protrusive movement is 20mm
- **Determine 60% of Max Protrusion:** This is a typical recommended starting point.
  - **Example:** Using the previous example as a base with a maximum protrusive range of 20, then you would set the bite at 12 mm
- Set the Screw: Set the ProGauge to the calculated protrusion setting and tighten the locking screw so that it does not move during the bite registration.
- Allow the patient to have the bite fork in his/her mouth with their lips closed to see if any muscles spasms or discomfort are present. Adjust as needed.

#### Step 4 — Record the bite



- Material: We recommend ThermAcryl, but you can use any bite registration material.
- Maxillary First: Place registration material over the holes on the top of the registration bite fork.
  - Insert the registration bite fork into the patient's mouth and align the upper central incisors into the upper incisor notch and register the maxillary teeth. Allow the registration material to sufficiently harden in the patient's mouth and then remove the ProGauge.
  - Maxilla Second: Place registration material over the holes on the bottom of the registration bite fork.
    - Insert the registration bite fork into the patient's mouth and seat on the maxilla. Close the mandible into the registration material, making sure to align the midline of the lower center incisors into the lower incisor notch.
    - (i) Note: Keep the mandibular teeth from shifting side to side. Allow the registration material to sufficiently harden in the patient's mouth and then remove the ProGauge.
  - Send Bite to the Lab: Loosen the locking screw and remove the registration bite fork from the gauge body. Send the construction bite with the registration bite fork and the models to the lab.