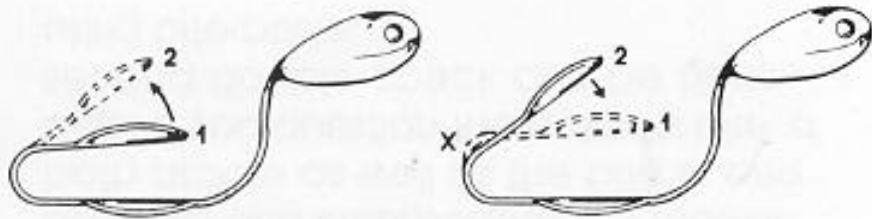


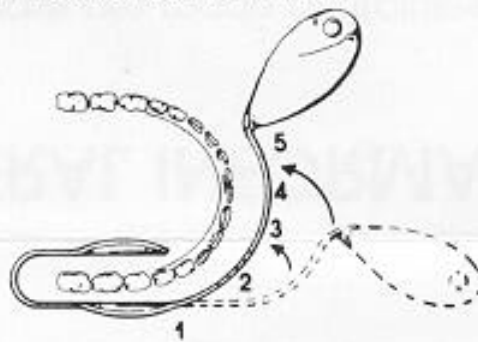
3/4 ARCH TRAY

1. You will find, because of the tray design, the GP tray can be used most of the time due to anatomical considerations built into it and the fact that it can be bent to accommodate most variations.

A. Posterior Bend-- if the buccal-lingual size needs to be widened, bend the inner (lingual) plate toward inside and rebend back to desired width. (See illustration below)



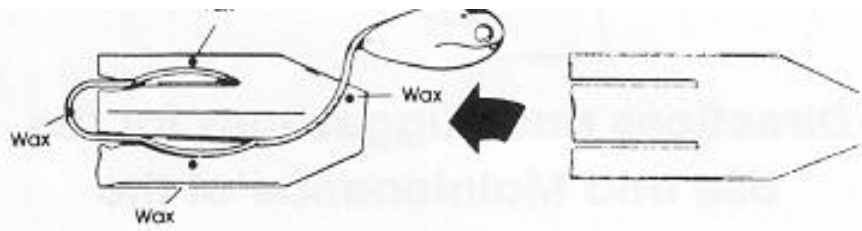
B. Anterior Bend -- the unique part of the GP Tray is the anterior stabilizing bar with the extended insert space which should be bent to conform to the shape of the anterior segment. The bend should start at the junction of the outer (buccal) plate (1) and continue toward handle (5). (See illustration) THE HANDLE SHOULD BE AT THE OPPOSITE CORNER OF THE MOUTH TO THE SIDE IMPRESSION BEING TAKEN.



2. The calibrations on the anterior stabilizing bar are for reference to mid-line or other point depending on mouth size and degree of bend. This allows for more consistent placement.



3. The inserts should be waxed in place after appropriate bending of tray. It is suggested that the waxing be done on the top of one side and the bottom of the other to allow for better flow of material into insert space for additional retention.



- 4.** It is important when loading material to extend material beyond the limits of the insert so upper material will bond with lower material.
- 5.** To avoid unnecessary stress on the back and inner portions of the tray when removing material -- first use a scissors or blade and remove a wedge. Support inner wall against unnecessary force.