

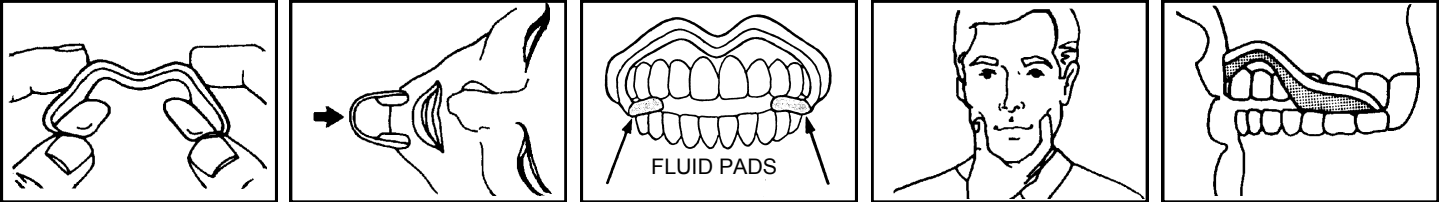
the AQUALIZER™

AUTOMATIC BITE-CORRECTING SPLINT

DIRECTIONS FOR USE:

FIRST APPOINTMENT: DIAGNOSE & RELIEVE PAIN OF THE HEAD, NECK AND UPPER BACK

Remove Aqualizer™ from package and insert. No preparation is necessary. Note: Instruct patient not to take pain control medication the day of the appointment. Accurate diagnosis requires that symptoms be present. Rule out organic pathology and confirm adequate posterior occlusal support.



INSTRUCTIONS TO PATIENT Instruct the patient to keep the fluid pads between the posterior teeth. The patient should relax and rest their teeth against the fluid pads when swallowing. It is not desirable to clench. Ask the patient to be aware of any change in sensation anywhere in the head, neck, shoulders and back. Monitor the patient's symptoms in your reception area every ten minutes for 30 to 60 minutes.

PHYSIOLOGIC CHANGES The Aqualizer™ splint's fluid quickly creates a muscle-dominant functionally generated bite by eliminating all occlusal interferences and creating perfect bilateral bite balance. Aqualizer™ brand splints empower the muscles to accurately correct both mandibular and condylar placement, making it of great value in the treatment and diagnosis of TMD and occlusion.

IF PATIENT IMPROVES (During the first visit) Pain relief confirms the diagnosis, neuromuscular pain triggered or exacerbated by the occlusion. This pain relief is a clear demonstration to both the doctor and the patient of the benefits that can be obtained by Aqualizer™ guided occlusal therapy. Relief of pain usually occurs within five to ten minutes after insertion of the Aqualizer™, particularly in the episodic sufferer.

IF PATIENT DOES NOT IMPROVE (During the first visit) Instruct the patient to wear the Aqualizer™ continuously for the next 48 hours, except when eating or brushing teeth. At the end of this period re-examine the patient. **If the patient improves, occlusal treatment is indicated. If the patient's symptoms do not improve significantly, they are most likely not occlusal in origin and occlusal treatment alone is unlikely to be successful.** Knowing in advance that occlusal therapy cannot succeed is immensely helpful.

BASIC TREATMENT OPTIONS (Use only if symptoms improve)

1. Use an Aqualizer™ as a Temporary Splint for Pain Relief.
2. Use an Aqualizer™ Bite Registration for splint fabrication or mounting models on articulator for restorative planning.
3. Aqualizer™ Guided Occlusal Equilibration of : teeth, fillings, splints, restorations, crowns, bridges and implants.

TREATMENT OPTION ONE : TEMPORARY SPLINT FOR PAIN CONTROL Relieve acute pain by dispensing the Aqualizer™ to be worn no more than 8 hours per 24-hour period. For most patients, this is sufficient. If necessary, the Aqualizer™ can be worn almost full time for the initial day or two. If a more permanent solution is required, choose Treatment Option 2 or 3. Have the patient wear the Aqualizer™ when there is muscle pain in the jaw, head, neck, shoulders, headache, or when they feel pain starting to come on. Wear twice as long as it takes for pain relief or a minimum of 20 minutes, then remove the Aqualizer™ until symptoms begin reappearing. **The Aqualizer™ is not indicated for heavy bruxers, unless used as a biofeedback device to break their parafunctional oral habit of clenching/grinding. If Aqualizers™ are destroyed within hours or 1 or 2 nights the patient is a parafunctional bruxer/clencher. The Aqualizer is not tough enough for them. Go to treatment choice two.** The Aqualizer™ is a water-bed system to rest the jaw. Patients should not continually bite with pressure on the Aqualizer™: The teeth should rest in a relaxed way so that the chewing muscles relax. If you bite too strongly on the Aqualizer™ you may break it. If this happens, distilled water will run out and the Aqualizer™ will be unusable. Wear the Aqualizer™ for as few hours as necessary to relieve discomfort, either while sleeping or during daytime periods of stress or pain.

ANTI BRUXING BIO FEEDBACK INSTRUCTIONS FOR PATIENTS: Insert the Aqualizer™ and have the patient close with mild biting force, while asking them if it feels different to close with the Aqualizer in. Almost all will tell you it does. Tell them to try to remember the different feel and position of their jaw while clenching on the Aqualizer™. Have the patient give themselves the auto suggestion that, whenever they feel themselves clenching, as above, even when they are sleeping, **STOP IT!** Just relax while swallowing into the support of the water system. Most patients report longer use life of the Aqualizer™ using bio feedback and auto suggestion to reduce damaging nighttime activity.

TREATMENT OPTION TWO : TAKE AN AQUALIZER™ BITE REGISTRATION FOR: ANY TYPE OF SPLINT, or ARTICULATOR MOUNTING OF DENTAL CASTS FOR CRANIO-MANDIBULAR RESTORATION PLANNING.

Aqualizer™ Functionally Generated Balanced Bite Registration

1. Insert an Aqualizer into the mouth allowing the muscles to bring the mandible to its natural most comfortable position, (great in combination with T.E.N.S.) As a general rule the more severe and chronic the symptoms, the longer the period of Aqualizer™ therapeutic wear before the bite registration is taken. Just ten minutes wear for someone mild and episodic, a day or two for severe and chronic sufferers.
2. Next set the final VDO (vertical dimension of occlusion). Aqualizer™s are available in 2mm, 4mm, and 6mm VDOs. To increase VDO for the bite registration add base plate wax under the water beds.
3. Instruct the patient to hold a swallow closure with the Aqualizer™ still in place, then inject enough silicone across the anterior from cuspid to cuspid to create a stable stop.
4. Remove the Aqualizer™ with the anterior bite still in place. Have the patient drop their jaw down and inject registration material between the occlusal surfaces of the left and right posterior teeth. Instruct the patient to swallow close into the previously established anterior bite stop. This creates a full arch, functionally generated balanced bite registration.
5. Assemble the patients dental casts accurately into the bite registration. Send this assembly to your lab or mount the combined casts/registration assembly on your articulator.

TREATMENT OPTION THREE : AQUALIZER™ GUIDED EQUILIBRATION OF SPLINTS (all types)

Quick occlusal finishing method

Have the patient wear the new splint simultaneously with an Aqualizer™ over it for a few minutes. The Aqualizer™ automatically eliminates the distorting influence of the occlusion, harmonizing muscles bite and body. Remove the Aqualizer™ and insert articulating paper instructing the patient not to touch their teeth together or swallow until the paper is in place. Have the patient close naturally just once. The contact points are the displacing prematurities. Equilibrate the disclosed contacts and repeat the process until you are satisfied.

COMBINED AQUALIZER™ / TEK-SCAN GUIDED OCCLUSAL EQUILIBRATION

Have the patient wear an Aqualizer™ with dental floss tied to the front for a few minutes. Insert the T-Scan sensor over the Aqualizer, and have the patient swallow two times. Pull the Aqualizer out by the floss and ask the patient to swallow/close once more into the sensor without the Aqualizer in. Note the first contacts and adjust the occlusion until all first contacts after Aqualizer wear are simultaneous. Repeat the Aqualizer wear, removal, swallow/close ,T-Scan procedure until you are satisfied.

AQUALIZER™ GUIDED EQUILIBRATION OF TEETH, CROWNS, BRIDGES,IMPLANTS AND FILLINGS.

Have the patient wear an Aqualizer™ for a few minutes over the occlusion to be adjusted. (teeth, crowns, bridges, implants, etc.) The Aqualizer™ automatically eliminates the distorting influence of the occlusion on the functional position of the jaw, harmonizing muscles, bite and body. Remove the Aqualizer™ and insert articulating paper instructing the patient not to touch their teeth together or swallow until the paper is in place. Have the patient close naturally just once. The contact points are the displacing prematurities. Equilibrate the disclosed contacts and repeat process until satisfied.

AQUALIZER™ SIZE SELECTION: All Aqualizer models are available in three different vertical dimensions: "Low," "Medium" and "High." The thickness is controlled by the amount of fluid in the Aqualizer. **Medium volume Aqualizers** are used by most (80%) patients. **Low volume Aqualizers** are for patients with restricted opening, and are also perfect for getting a muscle directed bite registration for splints. **High volume Aqualizers** are used when a patient has excessive freeway space and/or needs a greater vertical dimension to fill the space between the upper and lower occlusal surfaces (deep bites or over closed patients).



Aqualizer™ Ultra is a new improved version of the Aqualizer designed for increased gum comfort and improved retention. Used for average adult size mouths.

Ultra Open verticals:
Low≈1mm, Med≈2mm, High≈3mm



Aqualizer™ Mini is the new improved Ultra shape with smaller, thinner pads and a shorter arch length. Used for kids and smaller mouthed adults.

Mini Open verticals:
Low≈.75mm, Med≈1.5mm, High≈2mm