

Curtis L. Barmby, D.D.S.

Diplomate, American Board of Prosthodontics

Gail E. Frick, D.M.D.

Member of American College of Prosthodontists

Care of TEMPORARY CROWNS and BRIDGES

While wearing a provisional (temporary) crown or bridge, a number of problems can arise, including, but not limited to, the following:

- Decay, commonly called cavities, under and/or around the temporary crown
- Wearing of the acrylic or plastic allowing "super eruption" or the extrusion of the tooth with the temporary resulting in a poor fitting permanent crown
- Gum irritation and inflammation due to poor oral hygiene making placement of the permanent crown or bridge difficult

These and other problems may be minimized or avoided with the increased vigilance surrounding diet and oral hygiene as well as a heightened awareness of the fit and feel of the temporary/so

- A. Avoid sticky, sugary foods and drinks.
- B. Pay extra attention to oral hygiene. This is important. Unless told otherwise, follow the instructions below:
 - Floss carefully at least once each day. When flossing around the temporary crown/s, pull the floss out laterally from between the teeth rather than pulling it out vertically, to avoid dislodging the temporary.
 - If groups of temporary crowns are linked together, floss between them with floss threaders or pre-cut, all in one floss threaders.
 - Brush at least two times a day (two minutes with an electric toothbrush, three minutes with a manual toothbrush).
 - Use **additional fluoride**, if you are not already doing so. It is generally best to use the extra fluoride just prior to bed. We recommend the following ways:
 1. Over the counter fluoride toothpastes or rinses, such as ACT, or Tom's of Maine WITH FLOURIDE for use after brushing.
 2. Prescription fluoride toothpaste as a substitution for regular toothpaste.
 3. Prescription fluoride rinses.

C. If temporary becomes loose, fractures or comes off completely you must notify the office IMMEDIATELY. The temporary crown/s will be re-cemented or new ones made. Any unattended looseness or dislodgement may result in the need for new impressions, additional laboratory wait times, new solder indexes in the case of bridges and possible additional costs

Dr. Curtis Barmby and Staff
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