This Chairside Summary may be used in the operatory to remind you of all necessary steps; however it does not replace the full instructions in the “KoR Bite-Down Impression Technique” chapter in the KöR Reference Manual.

**Prepare the patient’s mouth:**
- Remove any supragingival calculus
- Block out any black triangles – Never use wax
- Block out any lingual retainer wires – Never use wax

For detailed instructions, review these videos on www.KoRCommunity.com:
  - Blocking Out Black Triangles
  - Blocking Out Lingual Retainer Wires

**Wear nitrile or vinyl gloves** (do not use latex gloves or bare hands when mixing putty)

**Use only gray KöR Impression Trays** (do not use the blue impression trays from the previous KöR Impression Technique)

**Try in impression trays:**
- Have the patient bite down on the trays.
- Trays must be loose and move side to side in molar area.
- Customize the trays if necessary. (For detailed instructions see video, Customizing Impression Trays with a Torch on www.KoRCommunity.com).

**NO tray adhesive!**

**Cut approximately 4.5” square sheets of cling wrap or sandwich bag sheets.**

**Mix putty quickly with gloved palms of hands until putty is streak-free.**

**Place the putty into the impression tray, up to the edge of the facial flanges, and do not over-fill.**

**Place the cling wrap or sandwich bag sheet over the putty:**
- Trim, leaving about 1” excess around the facial flanges.
- On lower impressions, also cut the cling wrap/sandwich bag up the center of the lingual to make room for the tongue.
- Fold the 1” excess cling wrap/sandwich bag sheet over the sides of the impression tray.

**Insert the putty impression in the patient’s mouth and slightly over the teeth:**
- Continue to hold the handle of the impression tray, and pull the patient’s lip out and over the impression the entire time.
- Instruct the patient to bite on the impression and bite all the way through the putty, until they hit the plastic impression tray.
- If any putty has escaped outside the patient’s lips, pull the lip out and push the putty back under the lip, deeply into the vestibule.
After the patient has bitten fully through the putty and is hitting the impression tray:

- Push the putty impression deeper into the mouth until the facial flange of the impression tray contacts the facial of the incisor teeth.
- Rotate the impression tray to the right, and then to the left.
- Center the impression tray and again push the tray into the mouth, and then pull the tray outward from the mouth approximately ¼ inch.
- Continue pushing, pulling and rotating until the putty has set enough to slightly rebound when pressed with your gloved fingernail. Then remove the impression and allow to finish setting on the counter.

After both impressions are fully set, remove cling wrap/sandwich bag from the impression. Cleanse any areas contaminated by saliva using 99% isopropyl alcohol and dry with air (do not rinse).

IMPORTANT: Inspect the impression and add more putty to any vestibule areas that do not extend DEEPLY into the facial or lingual vestibule.

Trim the putty impression:

- Remove any putty that is extending off the tray into the patient’s throat, however leave some putty posterior to the last molar in each quadrant.
- Remove a “cap” of putty from the palate (this will catch and prevent wash material from going into the patient’s throat during the wash impression)
- Trim any facial and/or lingual undercuts, but do not shorten vestibular extensions.

CAUTION: KōR Wash is a “fast set” – quickly perform the following steps:

Slightly over-fill the tooth areas of the putty impression with KōR yellow wash material:

- Do not over-fill the impression with wash

- Use the wooden KōR Impression Spatula to wipe the wash material all the way up the facial, lingual or palatal, and behind the last tooth in each quadrant.

Insert the wash impression with a very forceful and rapid seating of the impression and then hold the impression in place until set:

- Upper Impression – stand behind the patient.
- Lower Impression – stand in front of the patient. Place your thumbs on top of the impression in the second bicuspid/first molar areas while also wrapping your other fingers under the jaw and squeeze as forcefully as you can to seat the impression rapidly.

After the yellow wash feels fully set to the touch, allow the wash material to set an additional 20 seconds before removing from the mouth.

CAUTION: If Any Voids or Pulls Are Found in the Wash Impression:

- Never add more wash material into a wash impression in attempt to repair or reline the wash impression. This always causes distortion, even when the impression “looks” perfect.