

GEORGE GAUGE PROCEDURE

1. Incisors must be positioned to obtain an end-to-end bite. Instruct the patient to slide the mandible forward to be in the maximum protrusive position possible without effort (2 to 3 times). Secure the fork at this maximum position.



2. Make sure to check if the center between teeth 11-21 is aligned with the center between teeth 31-41 when in maximum protrusion, or if there is a deviation of the jaw to the left or to the right. In case of misalignment, note the amount of deviation in mm in the file.



3. Place a small amount of paste (catalyst and vinyl polysiloxane material) on the fork while leaving the space for teeth 11-21 and 31-41 clear in order to properly check the alignment of the midlines when capturing the maximum protrusive bite (without effort from the patient).



4. Once the paste has been mixed, make sure it is soft to place the fork on the lower teeth while ensuring that the center between teeth 31-41 is aligned with the middle of the fork. Guide the patient while he/she closes his/her mouth in order to position the midline between teeth 11 and 21 on the upper part of the fork. Important: the incisive ends of teeth 11, 21, 31, and 41 must touch the fork when the mouth is closed and in protrusive position.



5. As the paste is setting, you must make sure that the alignment of teeth 11-21 and 31-41 with the fork is the same as before the insertion of the George Gauge.

Important: the incisive ends of teeth 11, 21, 31 and 41 must touch the fork when the mouth is closed and in protrusive position.



6. To check the precision of the registered bite before your patient leaves, remove the fork from the support, then eliminate the excess paste. Place the bite fork in the patient's mouth and make sure the bite corresponds to the patient's maximum protrusion without effort and without the George Gauge in mouth. Look carefully at teeth 11-21 and teeth 21-41.



Incorrect bite
too much paste



Correct bite
front part is cleared

