Clinical Occlusion- Online
The online clinical occlusion course is organised into 5 modules

Module 1
Fundamentals of occlusion

Module 2
Practical occlusion

Module 3
Clinical occlusion

Module 4
Practical/clinical occlusion video module

Module 5
Supporting literature

Module 1 introduces the fundamental concepts of occlusion and TMD whilst module 2 explores practical aspects of occlusion and TMD preparing for the clinical aspects of occlusion in module 3. Whilst progressing through the modules the online format allows you to go back and review earlier modules. I would encourage you to do this.

The course is supplemented by clinical videos and there is also a wealth of supporting reading materials which I would encourage you to read.
Module 1

Fundamentals of occlusion

Tutorial and Contemporary literature

- Functional anatomy of the masticatory system
- Assessment TMJ, muscle health and occlusal disorders
- Envelopes of function
- Clinical applications of articulators
- The ear bow record
Module 2

Practical/clinical occlusion module

Tutorial and contemporary literature

- Clinical relevance centric relation
- Centric relation, the key to reorganising the occlusion
- Recording centric relation with leaf gauges
- Myogenic neuromuscular recording of centric relation
- Treatment of TMD and occlusal disorders
- Treatment of the restricted envelope of function/anterior interference
- Role of splints in the treatment of occlusal disorders and TMD disorders
- Role of occlusal adjustment and equilibration in TMD and occlusal disorders
- The role of the custom incisal guidance table in restorative and aesthetic dentistry
- Occlusal issues in implant dentistry
Module 3

Clinical Occlusion

Tutorial and Contemporary literature

- Recording centric relation with the Lucia jig and bimanual manipulation
- Clinical case demonstrating the use of bimanual manipulation to record centric relation and increase the OVD in an advanced tooth wear case
- Recording centric relation with long term deprogrammers and passive muscle contraction
- Clinical case recording centric relation with long term deprogrammer and use of restorative splint
- Clinical case demonstrating the use of a restorative splint in severe night parafunctional case
- Clinical case demonstrating the use of a restorative splint in an advanced tooth wear case to control CR and OVD
- Using the diagnostic wax up and chair side provisional restorations to control the OVD and CR
- Occlusal aesthetic planning in the restorative aesthetic case and the role of the aesthetic and functional diagnostic wax up
- The complex crown, bridge, implant and aesthetic case with endodontic and occlusal issues
- Localised anterior tooth surface loss
- The Dahl concept
- The direct composite Dahl
- Palatal shims
- Treatment of generalised tooth surface loss with composite, crowns, inlays, onlays and over/onlay dentures
- Clinical case demonstrating occlusal equilibration
- The role of short term orthodontics in the restoration of protective canine guidance, cross bite correction and crowding
- The role of lingual orthodontics in the correction of the deep overbite case/restricted envelope, correction of excess gingival display and provision protective canine guidance
- The role of long term conventional orthodontics in space creation for anterior restorations, crossbite correction and correction of class III malocclusion
- Long term conventional and lingual correction of increased over jet, overbite and lower incisor crowding
- Post orthodontic correction of tooth and gingival asymmetry and restoration of papilla and golden proportions
- Use of short term orthodontics in the correction of the restricted envelope of function, TMD symptoms and bone regeneration
- Use of long term conventional orthodontics to correct lack of canine protective central incisor guidance prior to potential restorative/implant treatment
• Use of long term conventional orthodontics in a complex case to correct lack of protective guidance (resulting in anterior tooth surface loss), midline shift, restorative spaces and restorative space for peg shaped lateral incisor
• Restorative post whitening with incisal edge composites, all ceramic crown and adhesive all ceramic bridge, sinus lift and implant supported crown.
Module 4

Practical/clinical video presentations

- TMD examination
- Occlusal examination
- Splints clinical features and fitting
- Face bow recording and model mounting in the maximum intercuspal position
- Articulator features and uses
- Deprogrammers, bimanual manipulation and centric relation registration
- Centric relation model mounting
- Accurate alginate impressions
Module 5

Supporting Literature

Articles

1. Achieving long term predictability in aesthetic and restorative dentistry
2. Good occlusal practice in advanced restorative dentistry
3. Good occlusal practice in simple restorative dentistry
4. Short term orthodontics and occlusal disorders
5. Splint Therapy
6. The examination and recording of their occlusion why and how
7. What is occlusion?
8. A deprogrammer for occlusal analysis and simplified accurate case mounting
9. Facially generated occlusal vertical dimension
10. Good occlusal practice in advanced restorative dentistry
11. Great lakesplaint appliance selection
12. Hospital anxiety and depression scale
13. Occlusal vertical dimensions alteration concerns
14. Recording the retruded contact position
15. Splint therapy
16. Great lakes, Splint adjustment guide
17. TMJ/TMD questionnaire
**Overall Course Learning Objectives**

By the end of the course participants should have gained the following:

- An understanding of the features of the ‘ideal occlusion’ and how to examine the occlusion
- Be able to rapidly assess TMJ disorders and reorganise their clinical relevance
- Appreciate current evidence based concepts in the treatment of TMJ disorders (including bruxism)
- Be able to identify high risk occlusal and TMD patients
- Appreciate the concepts of envelopes of function
- Be able to identify the restricted envelope, its restorative consequences and treatment options
- An understanding of the features of the ‘ideal occlusion’ and how to examine the occlusion
- An understanding of the role and features of articulators in restorative and aesthetic dentistry
- An understanding of the facebow transfer and its importance
- Be able to undertake an accurate facebow record and mount models on the articulator
- Be able to undertake an occlusal analysis
- An understanding of when to conform to the existing occlusion or re-organise
- Knowledge of the clinical stages in re-organising the occlusion.
- An appreciation of centric relation as the foundation for the re-organised occlusal approach and increasing the OVD.
- Detailed knowledge of the features of the face bow and DENAR articulator for restorative and aesthetic dentistry
- An understanding of the methods available to register centric relation
- An understanding of the role of the long term deprogrammer as the basis for centric relation registration
- An understanding of the face bow record and mounting models on the articulator in centric relation
- An understanding of occlusal analysis/equilibrium
- An understanding of the role of a restorative splint in occlusal and restorative aesthetic dentistry
• An understanding of the different occlusal philosophies and their inherent limitations
• Appreciate the stages in treating generalised tooth surface loss and occlusal considerations
• An understanding of the role of the ‘Dahl appliance’ in the treatment of localised anterior tooth surface loss
• An understanding of the role of GDP and Specialist Orthodontist in treating occlusal disorders and tooth surface loss
• Appreciate the role of the aesthetic and functional diagnostic wax up as the key to long term aesthetic and functional success
• A knowledge of the principles of successful occlusion in the provision of the implant prosthesis
• An understanding of the facebow transfer and its importance
• Be able to mount study models on the articulator in ICP and RCP
• Be able to undertake an occlusal analysis
• An understanding of the principles of successful occlusion for the GDP
• An understanding of the functional anatomy of the masticatory system and its clinical relevance
• Be able to rapidly assess occlusal/TMJ disorders and recognise their importance in restorative/occlusal dentistry
• Appreciate current evidence based concepts in the treatment of occlusal/TMJ disorders (including bruxism)
• Understand the role of splints (anterior deprogrammer, flat plane, soft bite guard and restorative) in occlusal/TMJ disorders (including bruxism) and restorative/aesthetic dentistry
• An appreciation of when to conform to the exiting occlusion or reorganise
• An understanding of the role of direct composite, onlays and overdentures in the treatment of tooth surface loss
• An understanding of occlusal/restorative principles in the treatment of tooth surface loss
• Knowledge of the role of occlusal adjustment, its limitations, indications, contraindications, planning, consent issues and practical application
• An understanding of the different methods for recording centric relation
• An understanding and confidence in a simple, effective and a predictable method for recording centric relation
• An understanding of the use of the articulator mounted functional diagnostic wax up and provisional restorations to control preparation, aesthetics and CR (centric relation)/OVD
• An understanding of the stages in the face bow record
• An understanding of bi-manual manipulation for occlusal examination and CR recording
• An understanding in the use of leaf gauges
• An understanding of articulator use and features in occlusal, restorative and aesthetic dentistry
• An understanding of recording CR with a long term deprogrammer
• An understanding of model mounting in CR
• An understanding of how to fabricate a restorative/Michigan splint
• An understanding of occlusal concepts and issues in implant dentistry
• An understanding of how to practically handle the occlusion for implant restorations
• An understanding of occlusal materials in implant dentistry
• Have an understanding of the planning and restorative stages in the complex bridgework case including implant, aesthetic, endodontic and occlusal issues