

CONGRATULATIONS ON YOUR PURCHASE OF
THE LADDER COMMUNICATION SYSTEM

PLEASE READ THIS INFORMATION BEFORE USING:

GETTING STARTED FOR DENTISTS:

Keep your LADDER in the hygiene room and select 2 (two) patients per day for diagnostic purposes.

Do this for as many days as necessary until you become acquainted with The LADDER images.

PROCEDURE:

Examine the upper right central incisor (tooth #8) only and begin with determining the TRANSLUCENCY FORMAT. Locate the appropriate image and note the FORMAT. Then determine the DEGREE OF TRANSLUCENCY based upon images depicted on the first page of the booklet (view these pages upside down). You may wish to assess the TRANSLUCENCY HUE as well.

Follow the same procedure for CHARACTERIZATIONS, SURFACE ANATOMY, CHROMA, and VALUE.

This exercise is particularly valuable for HYPOCALCIFICATIONS so that you become familiar with various descriptions of how hypocalcifications display. In being able to diagnose any particular hypocalcification as a specific feature rather than mapping as shade, you will soon be able to more easily and accurately determine shade without distraction.

The majority of patients will have uniform translucency (UT) with a low degree of translucency (UT-L); a significant portion will have some form of hypocalcification; and most will have linear surface anatomy (SA-1, SA-2). This translates into the first page of the DEGREE OF TRANSLUCENCY pages; the first page of the TRANSLUCENCY FORMAT pages; the first page of the CHARACTERIZATIONS pages; and the first page of the SURFACE ANATOMY pages.

ADDITIONAL NOTE:

The LADDER can be used to prescribe characterization for posterior teeth AND patient education.

STRUCTURE OF THE LADDER

The LADDER is designed as a partner device. The dental office and ceramist must each have a booklet for reference. In this way, identical images are referenced for the diagnosis, communication and subsequent fabrication of restorations. The LADDER is to characterization as a shade guide is to shade.

The LADDER is composed of 84 images on 22 pages depicting all appearance attributes of natural teeth. These features are categorized and each category is color coded on page tab ends and respectively on the back cover which serves as an index. Each image is encoded for easy reference and subsequent entry on the LADDER Rx form(s).

The images are color accurate and true-to-life in appearance because the features depicted are real. Digital manipulation of the images has preserved the integrity of these features in print, while also creating a reference that allows the user to focus on single features without other distractions.

The features are presented in a single-feature format or composited-feature format. In *template* (T) or single feature images, only one feature is presented on an unchanging background. In *composited* images, single features of a specific category may be displayed with multiple features from other categories. Viewing single features in *template* images allows the user to develop or refine recognition of these features. Viewing single features in a *composite* format allows the user to see how other features can affect the display of a single feature.

PROTOCOLS FOR USE

Step 1 - Select *translucency format* from TRANSLUCENCY FORMAT pages. Delineate desired location of translucency format in translucency outline on LADDER Rx.

Step 2 - Select *degree of translucency* from DEGREE OF TRANSLUCENCY pages (it is easiest to use the first page and *view it upside down*). Add 'L', "M", or 'H' to translucency code (i.e. UT-H to designate uniform translucency with high contrast).

Step 3 - If necessary, determine *translucency hue* based upon TRANSLUCENCY HUE page. Add to LADDER Rx in translucency outline (i.e. 'VT-H' to designate violet translucency hue with high contrast or 'UTV-H' to designate uniform violet translucency hue with high contrast).

Note: The translucency hue page also displays *tissue hues*.

Step 4 - Move to the next section, i.e. HYPOCALCIFICATIONS and select pattern of hypocalcified areas from images. Then designate appropriate code and map location in characterization outline on LADDER Rx. Use the same procedure for any other characterizations that are desired (brown discolorations, crack lines).

Step 5 - Select shade using device of choice (guide or scanner). By eliminating distraction of other features, the shade should be more readily recognized. If your shade taking device does not include *value* or *chroma*, use the respective LADDER pages.

NOTE: To make full use of The LADDER, specific areas of any image may be referenced to communicate idiosyncratic features. For example, the microfractures in the tetracycline image may better depict that feature for a specific case as compared to those of the microfracture images. Additionally, the degree of translucency images may also be used to convey the degree or level of contrast of other features such as brown discolorations.

THE SHADE LADDER

The SHADE LADDER is designed as a supplemental reference, whereas The LADDER is used as a direct reference. The shade display (in the SHADE LADDER) is based upon our perception of Vita A, B, C, & D shades and is not necessarily true to actual coloration. The SHADE LADDER demonstrates the subtle and sometimes marked impact of shade on the color, quality, and character of more common features depicted in The LADDER.