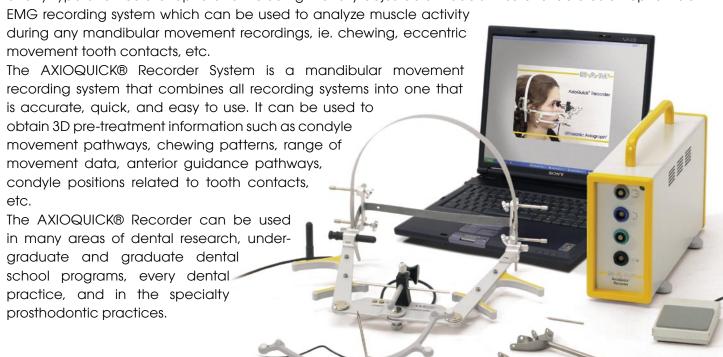
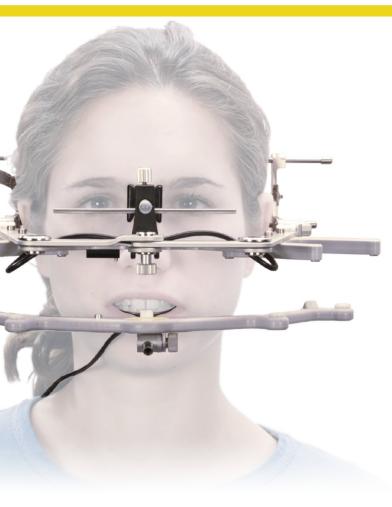


A new state of the art Ultrasonic Mandibular Movement Recording System which can be used to obtain, store, and analyze all functional 3D mandibular movements. In addition, you can receive data for the setting of any type of articulator up to and including the fully adjustable models. Also available as an option is an





Unique to the AXIOQUICK® Facebow/Recorder System is the special design and positioning protocol that is used to orient the upper AXIOQUICK® Facebow/Recorder to the patient. Published research has shown that the anatomic porion/orbital reference plane is parallel to the interpupillary line of the patient.

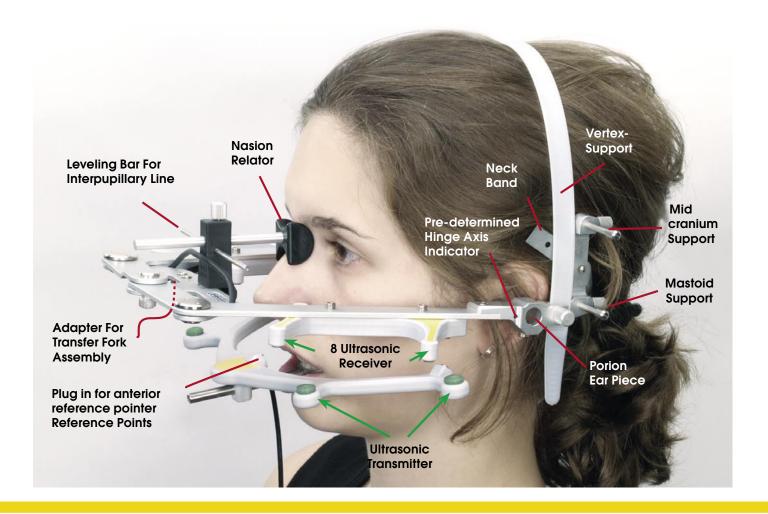
The end-result is that when you make an AXIOQUICK® Facebow Transfer using these reference points along with the single toggle non-torsion clamp on the transfer fork;

You will have your upper cast mounted in the articulator correctly referenced to the interpupilliary line and the cranium.

In addition, you will be in the mid-sagittal plane, and related to the true mandibular rotation axis within 1.1 to 1.2 mm on the average patient.

This makes the AXIOQUICK® Facebow a true Cranial Related Facebow.

However, if a determined mandibular rotation axis reference point is desired, the system is setup to accommodate those needs.







Recordings for each patient are stored under the patient's and the doctor's name. Data can be exported and imported very easily.

Easy to use

The AXIOQUICK® Facebow/Recorder is aligned posteriorally, anteriorally, and held in position by the patient. The facebow transfer fork registration is made, removed, and then set aside. Either a tray clutch or paraocclusal clutch is attached to the patient's lower teeth and the lower AXIOQUICK® Recorder bow is attached to the clutch. If desired, the true hinge axis can determined by making a simple opening and closing movement of 8 to 10 mm or you can use the pre-calculated hinge axis already built into the system.

Articulator Data

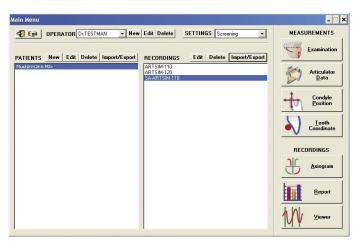
Make a protrusive, right and left lateral movement. The recording procedure is accomplished in minutes. Articulator settings can be obtained by going to the articulator report in your computer.

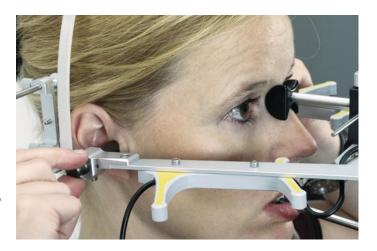
Axiogram

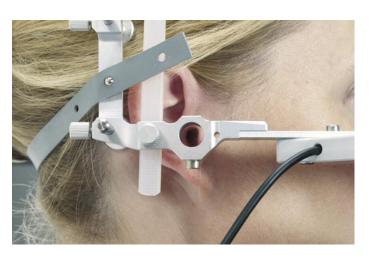
This is a graphic representation of the recordings. All recordings can be reproduced in realtime or by key movement choice. Recordings can be output to any printer. In addition, you can make direct analysis and angular measurements for your own personal selection and use in the articulator.

Report

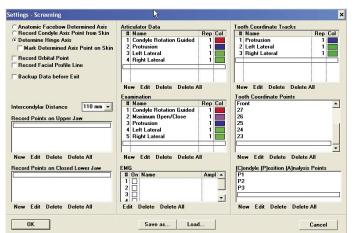
You can view the condylar inclination, Bennett Guidance, and anterior guidance pathways in all 3 planes. In addition, recommended curvature selections are made for both Condylar Pathways and Bennett Guidance inserts plus anterior guidance information for anterior incisal table. Recordings can be overlayed for comparison on the report.

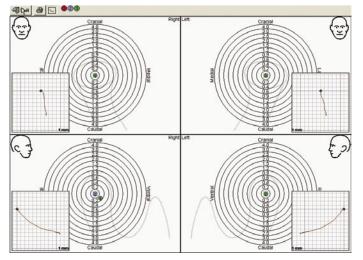




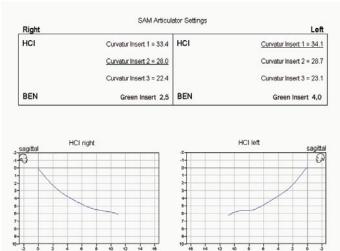








The CPA program (condyle position analysis) program allows the comparison of intra-oral tooth contact mandibular positions as they relate to the centric relation position of the patient in 0.1 mm increments. This is the true intercuspal relationship of the teeth in contrast to the trend analysis method used with articulator mounted casts.





SPECIFICATIONS:

- Light weight recording bow
- Eight ultrasonic receivers
- 50 recordings per second
- 0.01mm recording accuracy
- Windows 2000, XP USB 2.0
- Standard Printer Output

Literature:

Bergstrom G. On the reproduction of dental articulation by means of articulators, a kinematic investigation. Acta Odontol Scan 1950;9 (suppl 4):125-141

Baldauf A, Mack H, Wirth CG. Bestimmung der Scharnierachse mittels des äußeren Gehörgangs. Info Orthod Kieferoothop 1996;28:459-465

Henk F. Ergebnisse der modifizierten Anlagetechnik mit dem Anatomischen Transferbogen. Vortrag 1.12.2001,34. Jahrestagung der Arbeitsgemeinschaft für Funktionslehre in der Deutschen Gesellschaft für Zahn-, Mund- und Kieferheikunde, Bad Homburg 2001

Nagy WW, Smithy TJ, Wirth CG. Accuracy of a predetermined transverse horizontal mandibular axis point. J Prosthet Dent 2002;87:387-394

ADDITIONALS FEATURES:

- one year free software updates
- 3D- CT-scull animation
- 3D- Bonwill-triangle animation
- Tray or paraocclusal clutch
- EMG four channel (optional)
- AXIOGRAPH® Facebow (optional)

