Perform an extraoral and intraoral health and dental examination of existing teeth and components of the prostheses and the prosthesis itself. Identify and correct clinical problems that could result in future complications.

Perform oral hygiene interventions (cleaning of all natural teeth and tooth-borne restorations) using professionally accepted mechanical and chemical methods.

Use oral topical agents and oral hygiene aids as deemed clinically necessary.

Fabricate an occlusal device to protect tooth-borne fixed restorations when indicated.

Patients with existing natural teeth and teeth with multiple and complex restorations should be given oral hygiene instructions to brush twice daily with oral topical agents such as toothpaste containing 5000-ppm fluoride and/or toothpaste with 0.3% triclosan.

- Add supplemental short-term use of chlorhexidine gluconate when indicated.

Recommend oral hygiene aids such as dental floss, water flossers, air flossers, interdental cleaners, and electric toothbrushes appropriate for the patient’s needs.

Patients with occlusal devices should be advised to wear them during sleep, and clean them before and after use with a soft brush and the prescribed cleaning agent.

Patients with a removable prosthesis should be advised to remove the prosthesis during sleep, and store it in the prescribed cleaning solution.

Recall for dental professional examination every six months as a lifelong regimen.

- Patients identified as high risk are advised to obtain a dental professional examination more often than every six months.

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Patients with occlusal devices should be advised to wear them during sleep, and clean them before and after use with a soft brush and the prescribed cleaning agent.

Patients with implant-borne partial or complete removable restorations should be advised to remove the prosthesis during sleep and store it in the prescribed cleaning solution.

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