

# Removable Partial Dentures

A partial denture is designed to replace missing teeth. You may consider a removable partial denture to replace missing teeth if:

- You have missing teeth
- The remaining teeth cannot support or accept a bridge
- There is not sufficient bone or you are not a candidate for implants
- Finances are limited

It is important to replace missing teeth as soon as possible; a temporary partial (flipper) may be recommended while you are healing since it can take a few months to heal from an extraction. This is a **separate** cost from your removable partial denture and insurance may not cover this procedure.

It can take **3-5 visits** before a partial is completed. On your first visit, we will take impressions. Your next visit, we try in the framework which has wax where the teeth are supposed to go. The next visit is trying in the framework with teeth in the wax. If we are happy with the fit and appearance, the lab will process your case and you will receive the partial at your next visit. This process can take a couple months and **several try-ins** to ensure the best fit and appearance of your partial. Be patient, you will have the partial for a long time.

A final partial generally has a metal framework which can not usually be seen, pink plastic gum tissue, metal clasps which grasp the teeth for added support, and acrylic teeth. Other materials can be used for a more aesthetic appearance, but may cost extra. If considering alternative materials, it is important to know more aesthetic materials may not be as strong.

Depending on the amount of teeth and the amount of bone level remaining will determine how well your removable partial denture fits. You may need to have adjustments made in the future. It is common to need up to 3 adjustments after a new removable partial denture is made since sore spots can occur. For future adjustments, you will be charged a fee. Clasps will loosen in the future and can be tightened. **DO NOT ATTEMPT TO ADJUST YOUR PARTIAL YOURSELF.**

Remove your partial **every night** and brush after wearing. Store in the container provided and brush and use mouthwash or denture cleaner daily.

Signature \_\_\_\_\_ Date \_\_\_\_\_