HOW DENTAL ASSISTANTS CAN
ELEVATE THEIR CAREERS
THROUGH OCCLUSAL SPLINT
THERAPY AND OCCLUSAL
MASTERY

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### **Beyond the Basics: How Dental Assistants Can Elevate**

## Their Careers Through Occlusal Splint Therapy and Occlusal Mastery

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Modern dentistry has evolved far beyond simply "fixing teeth." Today, it's centered on optimizing function, balance, airway health, and long-term stability. As the profession grows, so too must the role of the dental assistant. One of the most impactful ways to advance your career, expand your clinical expertise, and become an invaluable asset to your practice is by mastering *occlusal splint therapy*.

This goes far beyond fabricating appliances, it's about contributing to the restoration and maintenance of ideal occlusion, preventing long-term breakdown, and supporting overall systemic health. Let's explore why occlusal splint therapy is so essential — and how dental assistants are at the forefront of its success.

## What is Occlusal Splint Therapy?

Occlusal splint therapy involves the design and use of removable intra-oral devices (often worn at night or part-time) to manage:

- Temporomandibular Joint Disorders (TMD)
- Parafunctional habits (bruxism, clenching)
- Occlusal instability
- Neuromuscular dysfunction
- Airway obstruction or tongue collapse

Occlusal splints are not just protective gear, they are used to deprogram muscles, reposition the mandible, and serve as diagnostic tools to evaluate how a patient's body responds when given an idealized bite. They are often the first step in treatment toward a stable, ideal occlusion.

#### Why Is Occlusal Stability So Critical?

Every restoration your office places whether it is a crown, composite restoration, veneer, or implant, sits within the larger system of the patient's occlusion, muscles, joints, and airway. If this system is unstable,

- Muscles become overworked
- Joints begin to break down
- Restorations fail prematurely
- Patients develop chronic headaches, neck tension, or broken teeth

#### Creating an ideal occlusion isn't optional, it's foundational!

What is the goal of Splint Therapy? Establishing harmony between:

- Centric relation (CR) where the condyles are properly seated
- Centric occlusion (CO) where the teeth contact evenly without interferences
- Muscle neutrality where there is no hyperactivity or tension being placed onto the muscles

That's exactly where splint therapy comes in.

## The Dental Assistant's Critical Role in Splint Therapy

Here's where the dental assistant's role becomes vital.

#### 1. Impression and Bite Mastery

Accurate impressions and bite registrations are non-negotiable in splint therapy. You're responsible for capturing the patient's anatomy with precision to ensure:

- The splint fits without impingement or rock
- The occlusion on the splint mimics (or *idealizes*) their natural bite
- The lab can fabricate an appliance that will actually *function* in the patient's mouth

Assistants trained in Muscle deprogramming (Ideally using the leaf gauge technique) to capture CR bite records, Dento-facial analyzers (DFA), and protrusive bite records to set correct articulation become irreplaceable in advanced practices.

## 2. Understanding and Explaining Occlusal Concepts

Can you confidently explain the difference between centric relation and maximum intercuspation to a patient? Why an anterior deprogrammer might relieve their jaw pain? What occlusal therapy truly is and why it is so critical?

If so, you are not just assisting, you're educating and building trust. You become the doctor's right hand in communicating the *why* behind splint therapy and preparing patients for treatment like orthodontic cases, equilibrations, and full-mouth rehabilitation.

#### 3. Splint Fabrication

With accurate impressions and precise bite records, cases can be properly mounted on an articulator, a critical step in designing a functional occlusal splint. With training and experience, dental assistants can actively participate in the entire fabrication process. This includes:

- Mounting the models on the articulator with accurate records
- Fabricating Initial shell out of acrylic material
- Trimming and contouring the splint for patient comfort and fit, if allowed with assisting qualifications and delegation of duties within state guidelines
- Relining the splint- on mount or in patients mouth if allowed with assisting qualifications and delegation of duties within state guidelines
- Dialing in the splint by checking centric contacts, protrusive movements, and excursive 'lateral' movements, if allowed with assisting qualifications and delegation of duties within state guidelines

When done properly, this process doesn't just result in a protective device, it produces a tool that supports joint health, muscular balance, and long-term occlusal stability. A skilled assistant's involvement here not only increases treatment efficiency, but also improves the quality and success of care.

## 4. Splint Delivery and Adjustment Support

Chair-side assistance during delivery includes:

- Checking occlusion using articulating ribbon or paper
- Assisting with chair-side adjustments (high points, interferences) if allowed with assisting qualifications and delegation of duties within state guidelines
- Noting any signs of muscle soreness, joint tenderness, or splint wear patterns
- Helping monitor adaptation and comfort

Some practices allow trained assistants to *pre-check* splints, reducing doctor chair time and increasing practice efficiency.

# 5. Tracking Progress Toward Ideal Occlusion

Splint therapy is often diagnostic, if the patient's symptoms improve on the splint, it confirms their occlusion was unstable. This insight guides the next step: equilibration, orthodontics, or restorative planning.

Dental assistants are often the ones who:

- Track patient feedback
- Chart muscle pain, ROM (range of motion), and symptom changes
- Take/assist with accurate impressions and additional records depending on assisting qualifications and delegation of duties within state guidelines
- Help determine whether additional adjustments or referrals are needed

#### **How This Elevates Your Career**

Dental assistants with occlusal therapy experience can:

- Become the *go-to clinical lead* in TMJ/airway-focused offices
- Command higher salaries due to specialized knowledge
- Assist in complex rehabilitation cases

- Teach new assistants or present in continuing education settings
- Pursue roles in lab work, case coordination, or treatment planning

More than anything, you will find deeper *clinical fulfillment* knowing that you are helping patients feel better, sleep better, and live pain-free.

#### **Your Career is in Your Hands**

If you have ever felt like you are just 'assisting,' *occlusal splint therapy* is your opportunity to step into a *clinical partnership* with your doctor. It's where anatomy, physiology, communication, and technical skills collide.

Want to further your career in splint therapy?

- Ask your doctor about training opportunities
- Take continuing education courses in occlusion, Temporomandibular joint disorders, and airway based dentistry
- Shadow during splint cases and start asking deeper questions
- Further your assisting education gaining your expanded functions assistant license

There's no ceiling to the growth of a dental assistant.

Occlusal splint therapy is critical, when you understand occlusion, you don't just protect teeth, you protect joints, muscles, sleep, and lives, something worth mastering.