



Opalescence™  


Transformational  
whitening, reimaged

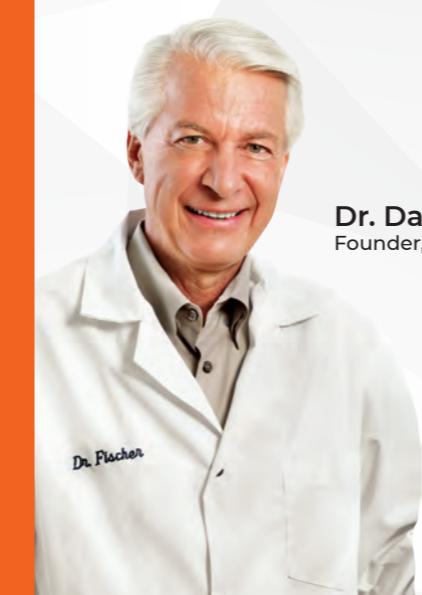
See pages 160–172



Products & Procedures MANUAL 2026



# Products & Procedures MANUAL 2026



Dr. Dan Fischer  
Founder, Ultradent Products, Inc.



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800.552.5512 — [ultradent.com](http://ultradent.com)



Since 1979 Ultradent Products, Inc., has been manufacturing the highest-quality dental products and equipment at our facility in the United States. Your support keeps Americans at work and helps improve the health and livelihood of citizens all over the country.



# FEATURED PRODUCTS

Page 160

Dentist-designed at- **Home** whitening



**Opalescence™**  
**Home**  
**Advanced**

Page 162

Professional, **Custom** at-home whitening



**Opalescence™**  
**Custom**

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High-impact, in-office **Pro** whitening



**Opalescence™**  
**Pro**

## POLICIES

Ultradent is committed to products that strengthen the clinician's ability to administer professional state-of-the-art patient care.

This may involve the development of new products or a refinement of existing materials and techniques.

Our highest priority is to meet your needs with quality products and service. We appreciate your suggestions, questions, and comments.

This catalog and the products described herein are intended for lawful distribution in the USA. In certain countries outside the USA, differing legal requirements may limit the availability of certain products or provide for different product indications and claims under labeling compatible with local conditions. For more detailed procedures and precautions, refer to individual product instructions or packaging.

## SHELF LIFE AND STORAGE

All product shelf life is based on date of manufacture. See product packaging for more information and storage instructions.

## WARRANTIES

Please see product IFU for warranty information if applicable.

## PACKAGING

At Ultradent we are committed to environmental concerns. For that reason we try to use as little plastic as possible in our packaging.

However, for your safety and the proper preservation of our chemicals, many times we must include a secondary plastic package.

## RETURN POLICY

Returned products must be in original packaging. Items returned within 30 days of purchase with a return authorization number on the outside and inside of the return box will be credited 100%. Product returned between 31 and 60 days from purchase date is subject to a 20% restocking fee.

Ultradent will not accept returns after 60 days. Errors in shipment must be reported within 14 days of invoice date.

All return authorization numbers become invalid 90 days after date of issue. A return authorization number must accompany all returns to receive proper credit; please contact Customer Service at 800.552.5512 for assistance.

-Ultradent is proudly ISO 13485 certified, plus CE mark certified for Europe.

-All products are latex free with the exception of DermaDam latex rubber dam.

-All products may not be available in all countries.

## ULTRADENT IS PROUD TO BE ISO 13485 CERTIFIED.

Ultradent is certified to MDSAP by an independent Auditing Organization, which assures that the quality system meets the requirements of ISO 13485.

## ULTRADENT IS PROUD TO OFFER CE MARK CERTIFIED PRODUCTS FOR EUROPE.

Where appropriate, Ultradent products sold in Europe bear the CE Mark, indicating that our products comply with the strict European Commission laws (directives).

## AWARDS



Ultradent is Great Place to Work Certified and has been featured in the top ten of Fortune Magazine's Best Large Workplaces in Manufacturing and Production for four consecutive years.



Ultradent Products, Inc., a leading developer and manufacturer of high-tech dental materials, was recognized for the fourth consecutive year as a Fortune Magazine Top Large Workplace in Manufacturing and Production in 2025. Ultradent was fourth on the list in 2023, after being fifth and ninth in 2022 and 2021, respectively. Ultradent is the only company in Utah, as well as the dental industry, to ever make the list.



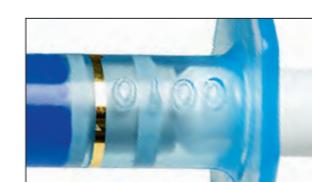
BKP85 = Lot number  
2023-03 = Month, March  
2023-03 = Year, 2023



BL2DC = Lot number  
02-24 = Month, February  
02-24 = Year, 2024



I10-2020 = Lot number  
I10-2020 = Month, October  
I10-2020 = Year, 2020



O100 = Lot number  
O100 = Month, October  
O100 = Year, 2020

All UPI syringes are stamped with an expiration date consisting of one letter and 3 numbers. The letter is a lot number used for manufacturing purposes, and the 3 numbers are the expiration date. The first 2 numbers are the month, and the third number is the last number of the year.



Scan the QR code to see our newest products-  
so new they didn't make it into the catalog!

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Bite Block  
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In 1976, after graduating from Loma Linda University and beginning his own practice, Dr. Dan Fischer invented his groundbreaking Astringedent™ hemostatic solution in response to the need for a tissue management product that achieved more rapid, profound hemostasis. Astringedent hemostatic with the Metal Dento-Infusor™ tip and Ultrapak™ cord became the backbone of Ultradent's chemical tissue management system. For the first time, clinicians could quickly and predictably achieve profound hemostasis. The success of Astringedent hemostatic fueled Dr. Fischer's desire to continue developing innovative, advanced solutions, leading to the founding of Ultradent Products, Inc. Now, marking its 48th year as a family-owned, international dental supply and manufacturing company, Ultradent has continued its vision to improve oral health globally by creating better dental products that continue to set new industry standards. Dr. Fischer has numerous patents to his name.

Ultradent currently researches, designs, manufactures, and distributes more than 500 materials, devices, and instruments used by dentists around the world. This includes its renowned, industry-leading Opalescence™ tooth whitening system, and the groundbreaking Opalescence Go™ professional take-home whitening system. Ultradent's product family also includes the award-winning VALO™ LED curing light, UltraSeal XT™ hydro pit and fissure sealant, and Ultra-Etch™ etchant.

Ultradent has been the recipient of Small Business Administration's Exporter of the Year and Direct Distributor of the Year awards. Most recently, Ultradent was the recipient of the Health Care Heroes award in the category of Corporate Achievement. Ultradent and Dr. Fischer have been recognized for outstanding industry leadership and for making defining contributions to the dental community. In 2013, the Utah Governor's Office of Economic Development named Dr. Fischer "International Man of the Year" for his contributions to sustaining economic and cultural relations between the state of Utah and the European Union.

Dr. Fischer strives continuously to "Improve Oral Health Globally." Beyond the dental community, Ultradent donates products to humanitarian efforts locally, nationally, and internationally. Additionally, Ultradent sponsors a nonprofit organization, the Diversity Foundation, a progressive outreach program committed to preventing hate crimes and intolerance. This program promotes diversity and fosters multicultural awareness among individuals from all backgrounds.

Dr. Fischer lives his life according to the same values that guide Ultradent: integrity, quality, hard work, innovation, and care. He enjoys tending to his garden and spending time with his wife, children, and lots of grandchildren.

**Follow us on our social channels! Scan a QR code to follow our Ultradent Facebook and Instagram for the best deals and updates!**

[Facebook](#)



[Instagram](#)





KODA PEARCE - Snowbasin

# CEMENTS

UltraTemp  
UltraTemp REZ II  
ClearTemp LC  
PermaShade Try-In Paste  
PermaShade LC  
PermaFlo DC  
ExperTemp  
UltraCem

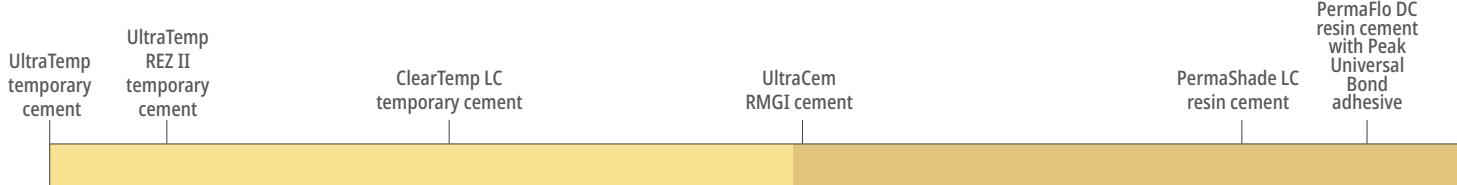


CEMENTS

QUALITY SEAL. SUPERIOR HOLD.  
ULTRADENT CEMENTS

	UltraTemp™	UltraTemp™ REZ II	ClearTemp™ LC	PermaFlo™ DC	UltraCem™	PermaShade™ LC
Description	Temporary luting cement	Temporary luting cement	Temporary veneer cement	Luting/restorative cement	Resin-reinforced glass ionomer luting cement	Veneer cement
Chemistry	Paste-to-paste, non-eugenol polycarboxylate	Paste-to-paste, non-eugenol resin-based	Low/medium-filled composite resin	Highly filled small-particle composite resin	Liquid-powder RRG (RMGI)	Highly filled composite resin
Indications for Use	Temporary cementation of provisional crowns, bridges, inlays, and onlays	Temporary cementation of provisional prostheses or restorative procedures (i.e., provisional crowns, bridges, inlays, and onlays)	Temporary cementation of provisional veneers	Permanent cementation of crowns, inlays, onlays, bridges, endodontic post cementation, and fabrication of core buildups	Permanent cementation of restorations (including inlays, onlays, crowns, and bridges) made of metal, PFM, zirconia, and resin to natural teeth	Permanent cementation of porcelain, zirconia, composite, and other indirect anterior veneers
Delivery	5 ml dual-barrel syringe with mixing tip	5 ml dual-barrel syringe with mixing tip	0.67 g contra-angle syringe	5 ml dual-barrel syringe with mixing tip. Additional intraoral tip for precise delivery.	Hand-mix bottle kit: 15 g powder / 8.6 ml liquid	0.95 g contra-angle syringe
Cure Type	Self cure	Self cure	Light cure	Dual cure	Self cure	Light cure
Working Time/ Set Time	2–3 minutes	Fast Set 1–2 minutes	Light cure with VALO™ curing light for 10 seconds	2.5-minute working time, full set in 5–8 minutes. Light cure with VALO™ curing light according to instructions.	1 to 3-minute working time, full set in 5 minutes	2-second tack cure to avoid shifting. Light cure with VALO™ curing light for 10 seconds.
Viscosity	Flowable	Flowable	Medium	Flowable	Very flowable	Medium
Shades	Off-white	Off-white	Translucent (fluoresces under a UV light)	A2, Translucent, Opaque White	Approximately A2	A2, B1, Translucent, Opaque White
Differentiation	Mixes and delivers in one action. Hydrophilic polycarboxylate non-irritating formula is kind to pulp. Ideal for sealing the access opening of walking bleach cases. Designed to flake off easily.	Mixes and delivers in one action. Hydrophilic resin-based formula is well-suited for cases when longer retention is required. Available in Fast Set time. Is radiopaque and fluoresces to ensure full cement removal.	Provides the additional strength necessary to keep provisional veneers in place. Fluoresces under a UV light for easy detection.	Lowest film thickness (8 µm) known for a luting cement. <sup>1</sup> Higher compressive strength than other quality luting cements. <sup>2</sup> Economically priced.	Features highest bond strengths to metal or dentin compared to other cements in its category. <sup>3</sup>	Low shade shift for a lasting esthetic result. Unique contra-angle delivery for added precision and convenience. Upon curing, low shrinkage stress prevents strain on the veneer. <sup>4</sup>

	TEMPORARY			PERMANENT		
Indications for Use	Self Cure	Self Cure	Light Cure	Dual Cure	Self Cure	Light Cure
Crown	X	X		X	X	
Bridge	X	X		X	X	
Veneer			X			X
Post Cementation				X		
Core Buildup				X		
Walking Bleach	X					
Crown and Bridge for Implants		X		X		
Endo Access Opening	X					
Orthodontic Bands					X	
Pedodontics					X	
Inlays/Onlays	X	X		X	X	



1. Data on file. 2. Data on file. 3. Data on file. 4. Data on file.



## UltraTemp™ & UltraTemp™ REZ II

POLYCARBOXYLATE & RESIN-BASED  
NON-EUGENOL TEMPORARY CEMENTS



- Non-eugenol formula won't interfere with resin bonding<sup>2</sup>
- Easily removed by water prior to setting/curing
- Convenient dual-barrel syringe delivery of paste-to-paste formulas
- Mixing tips provide even mixing for reliable adhesion
- Provides optimal sealing capabilities once cured
- Able to withstand normal biting and chewing forces<sup>3</sup>
- Hydrophilic chemistry ensures a quality seal

UltraTemp™ temporary cement is a hydrophilic, polycarboxylate chemistry that ensures low irritation to pulp and a quality seal.<sup>4</sup> It can be easily removed with water prior to setting. UltraTemp temporary cement is suggested for routine 1–2 week temporization of custom-fabricated provisionals or standard preformed provisionals.

UltraTemp™ REZ II temporary cement features a hydrophilic resin-based formula that is recommended for the retention of interim restorations on implants and provisional restorations when longer retention (2–4 weeks) is required. It is radiopaque and also fluoresces under a black light to assist in removal. It is available in Fast Set (one to two minutes).



**5916 - UltraTemp Regular Set Kit** (2- to 3-Minute Set Time)  
1 x 5 ml (7.96 g) syringe  
20 x Mixing tips



**6061 - UltraTemp REZ II Fast Set Kit** (1- to 2-Minute Set Time)  
1 x 5 ml (7.96 g) syringe  
20 x Mixing tips

**1.** realityesthetics.com. **2.** Millstein PL, Nathanson D. Effects of temporary cementation on permanent cement retention to composite resin cores. *J Prosthet Dent.* 1992;67(6):856–859. **3.** Data on file. **4.** Data on file.

## TWO DIFFERENT CEMENTS

for Different Retention Options

### TEMPORARY PROVISIONAL LUTING



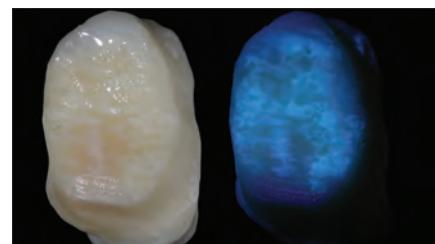
1. Prior to complete set, easily remove excess UltraTemp temporary cement with a moist cotton swab or gauze. After 1–2 minutes of set time, remove any residual subgingival cement with an explorer.

2. Upon provisional removal two weeks post-op, cement clings to both provisional and preparation. This is one indicator of a quality sealing cement.



3. Flake off residual cement with blunt hand instrument.

4. Use Consepis™ Scrub antibacterial slurry with a rubber cup or STARbrush™ coronal brush to remove residual cement.



UltraTemp REZ II temporary cement is radiopaque and fluoresces under a black light to assist in removal.



# CEMENTS

## ClearTemp™ LC

TEMPORARY VENEER CEMENT



- Translucent shade is designed for temporary anterior veneers
- Light-cured resin formula provides a quality seal and exceptional retention
- Fluoresces under black light, facilitating complete removal
- Ergonomic contra-angle syringe delivery aids in precise placement

ClearTemp LC temporary veneer cement is designed specifically for temporary veneers. Its proprietary, light-cured resin formula provides the additional strength required to keep provisional veneers in place. For luting temporary veneers, nothing will hold as strong or look as natural as ClearTemp LC temporary veneer cement.

### ESTHETIC



Courtesy of Dr. Richard Tuttle.

Today's provisionals look more natural than ever. ClearTemp LC cement helps create a short-term smile that patients will be proud to reveal.

### COMPARE



A traditional temporary cement shows through the provisional crown on #8. ClearTemp LC cement does not show through the provisional veneer on #9.

### FLUORESCING PROPERTIES



Courtesy of Dr. Jaleena Fischer-Jessop.

ClearTemp LC cement fluoresces under black light for easy detection. Use black light to ensure complete removal of ClearTemp LC cement. This is an important step that minimizes potential damage to the final restoration. Use the VALO™ Black Light Lens attachment for high visibility.

### PROCEDURE



1. Remove product from refrigerator and bring to room temperature. Clean, rinse, and lightly dry preparation. Express enough ClearTemp LC cement to coat inside surface of provisional.



3. Remove flash.

4. Light cure with VALO curing light on Standard Power mode for 10 seconds.

### REMOVAL



5. Use a hand instrument at acrylic margin to break seal and remove provisional. ClearTemp LC cement is very strong and has high adhesion, so temporary veneers may break upon removal. Flake off bulk residual cement with a blunt hand instrument.

6. Illuminate tooth surface with black light to reveal remaining ClearTemp LC cement. Remove any remaining cement and recheck. Scour prep with pumice-type slurry and cup or brush. Rinse thoroughly and prepare for final cementation.

**Note: Due to its high bond strength compared to other temporary cements, ClearTemp LC temporary veneer cement should be used for temporary veneers ONLY and never for temporization of permanent restorations, full coverage crowns, inlays, or onlays.**



**Note: We recommend PermaShade™ LC veneer cement for luting permanent veneers. See the next page.**

### REFRIGERATE



**3518 - ClearTemp LC Syringe 4pk 0.67 g**

1. [realityesthetics.com](http://realityesthetics.com).



## PermaShade™ Try-In Paste

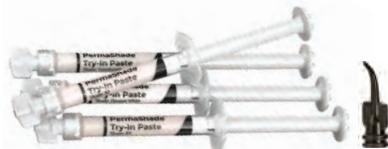
VENEER TRY-IN PASTE



Black Mini™ Tip page 134

- Conveniently matches PermaShade LC cement shades to help you choose the right shade for your final cementation
- Gel-like consistency allows for controlled delivery to veneer
- Water soluble for easy removal and clean up

REFRIGERATE



### 3777 - PermaShade Try-In Paste Kit

- 1 - 1.5 g Translucent syringe
- 1 - 1.5 g Opaque White syringe
- 1 - 1.5 g A2 syringe
- 1 - 1.5 g B1 syringe
- 20 - Black Mini tips

REFRIGERATE



### PermaShade Try-In Paste Syringe 2pk

Shade	2pk	Shade	2pk
Translucent	5777	A2	5779
Opaque White	5778	B1	5780

2 x 1.5 g syringes  
10 x Black mini tips

## PermaShade™ LC

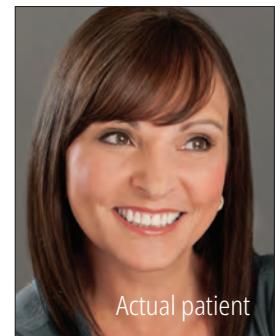
LIGHT-CURED VENEER LUTING RESIN



- Medium viscosity keeps veneer from drifting prior to cure
- Use for porcelain, zirconia, composite, and other indirect veneers
- Upon curing, low shrinkage stress prevents strain on the veneer<sup>2</sup>
- Available in four VITA™\* shade options: Translucent, Opaque White, A2, and B1

PermaShade LC luting resin is a light-cured luting resin used exclusively for cementing translucent prosthetics where light can transmit and shade matching is important. Its ergonomic contra-angle syringe makes luting delicate prosthetics more convenient than other delivery methods. With enduring color stability and low shrinkage, PermaShade LC luting resin is ideal for creating a long-lasting, esthetic smile.

### BEFORE AND AFTER



Actual patient

Courtesy of Dr. Shea Bess  
Patient with 4 existing anterior composites and large diastema. Received 6 anterior A1 porcelain veneers (6-11) cemented with PermaShade LC resin in Translucent shade.



Unique and ergonomic contra-angle syringe allows for precise, controlled delivery.

Note: for optimal handling, bring PermaShade LC resin to room temperature before use.

REFRIGERATE



### PermaShade LC Syringe 4pk 0.95 g

Shade	4pk	Shade	4pk
A2	5229	Translucent	5227
B1	5230	Opaque White	5228

\* Trademark of a company other than Ultradent. 1. realityesthetics.com. 2. Data on file.



# CEMENTS

## PermaFlo™ DC

DUAL-CURE COMPOSITE LUTING/RESTORATIVE RESIN



- Multiple uses including post cementation, core buildup, and luting
- Wear resistant
- Maximum strength
- Radiopaque
- Low polymerization shrinkage
- Self-mixing
- 2.5-minute working time, 5 to 8-minute chemical set time
- Total-etch or self-etch compatible

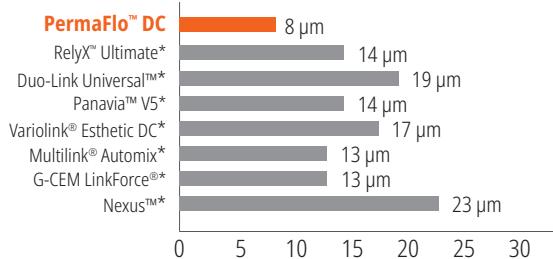
PermaFlo DC luting resin is a highly filled, small-particle, dual-cure resin that flows easily through a small-orifice tip, making post luting simple and convenient. It has a low film thickness of only 8  $\mu\text{m}$ .<sup>1</sup>

PermaFlo DC luting resin is recommended for permanent cementation of transparent or opaque crowns, etc. You can use the same mix and delivery method to lute posts and fabricate core buildups. Its optimal viscosity flows easily into the depths of the post preparation and then intimately around protruding, direct-placed posts. To stop material flow during core buildup, tack with a curing light. PermaFlo DC resin is compatible with Peak™ Universal Bond adhesive for light-cured bonding and luting.

### TECHNICAL DATA<sup>2</sup>

Shear Bond Strength to Enamel (Total-Etch)	53.38 MPa
Shear Bond Strength to Dentin (Total-Etch)	62.07 MPa
Flexural Strength	128.5 MPa
Flexural Modulus	9.37 GPa
Compressive Strength	355.91 MPa
Compressive Modulus	4.22 GPa

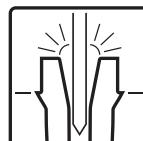
### FILM THICKNESS<sup>3</sup>



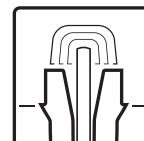
PermaFlo DC resin has the lowest film thickness known for a composite luting resin.

## MULTIPLE OPTIONS

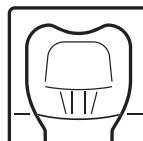
Failure is NOT one of them



Post  
Cementation



Core Buildup



Luting

### PROCEDURE

Courtesy of Dr. Gary Findley.



PermaFlo DC resin is a versatile dual-cure resin formula that can be used to cement endodontic posts and fabricate core buildups.

### USES



The Intraoral tip snaps onto the dual-barrel mixing tip for precise placement of luting material.

Adhesive luting for crowns, bridges, inlays, and onlays. With syringe/tip delivery, a crown is loaded from the bottom up to ensure no air entrapment.

### REFRIGERATE



### PermaFlo DC Syringe Kits

Shade	Kit	Shade	Kit
A2	5912	Translucent	5914
		Opaque White	5915

1 x PermaFlo DC syringe -  
A2 - 5 ml (9.63 g), Translucent - 5 ml (9.42 g), Opaque White - 5 ml (9.5 g)  
20 x Mixing tips  
20 x Intraoral tips

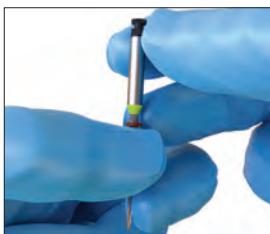
\*Trademark of a company other than Ultradent. 1. Data on file. 2. Data on file. 3. Data on file.



## ENDODONTIC POST CEMENTATION GUIDE USING PERMAFLO DC RESIN



1. Determine post size and length using a try-in post or X-ray and clinical judgment.



2. Place a rubber stop on UniCore™ Drill at desired length.



3. Position UniCore tip in the pilot hole. Using light pressure, follow the obturation material to the length indicated by rubber stop. Keeping the drill at full speed, withdraw from the canal.



4. Use TriAway™ Adapter with Endo-Eze™ 22 ga tip to clean debris out of post space from bottom up with water and suction.



5. Verify post size and length by placing the corresponding UniCore Post. Clean post with isopropyl alcohol after try-in.

## CHOOSE THE ETCH AND RINSE TECHNIQUE



6. Etch space for 15 seconds with Ultra-Etch™ etchant using the Endo-Eze 22 ga tip. Start apically and fill coronally.



Use TriAway Adapter and Endo-Eze 22 ga tip to rinse thoroughly with water and lightly air dry, leaving the post space slightly damp.

OR

## OR THE ETCH AND NO RINSE TECHNIQUE



6a. Attach 30 ga NaviTip™ FX™ brush tip to Peak™ SE primer syringe. Apply to post space and coronal preparation for 20 seconds using agitating action.



Blow out excess from bottom up using TriAway Adapter with Endo-Eze 22 ga tip and suction. Do not over-dry.



7. Use 30 ga NaviTip™ FX™ tip or Micro Applicator to place Peak™ Universal Bond adhesive. Scrub full length of post space and entire tooth prep for 10 seconds.



8. Remove excess Peak Universal Bond adhesive using the TriAway Adapter with Endo-Eze 22 ga tip and suction. Continue for 10 seconds using full air pressure, then air thin adhesive on coronal surface for 10 seconds.



9. Light cure adhesive for 20 seconds. If close to gingiva, use two 10-second intervals or 6 seconds Xtra Power mode on VALO™ curing light.



10. Verify UniCore Post will seat prior to placing luting cement.



11. Deliver mixed PermaFlo DC cement into post space beginning apically and moving coronally.



12. Insert post slowly and seat to predetermined depth.



13. Tack cure PermaFlo DC cement in canal for 5 seconds.



14. Express PermaFlo DC cement around post for core buildup. Incrementally build up core and light cure for 10 seconds between layers. If cement starts to slump, tack cure between layers. Incrementally build up core.

Note: For more information on the UniCore System, see pages 40–41.



# CEMENTS

## ExperTemp™

TEMPORARY CROWN AND BRIDGE MATERIAL



- 10:1 self-cured chemistry provides exceptional strength, flexibility, and high abrasion resistance<sup>2</sup>
- Fluoresces similarly to enamel<sup>3</sup>
- Low oxygen inhibition at polymerization
- Easily repaired or characterized with a packable composite, a flowable composite, or additional ExperTemp material
- Trims easily and polishes beautifully (polishing optional)
- Available in A1, A2, A3, and Bleach White shade

ExperTemp temporary crown and bridge material is a bis-acryl composite provisional material used to fabricate temporary crowns, bridges, inlays, and onlays as well as long-term temporaries. Superior performance combined with a natural esthetic make ExperTemp material the perfect choice for temporization.

Working and placement time	Allow to cure in mouth	Remove from mouth	Complete cure	Adjust provisional
0:00	0:40	1:30	2:30	4:00

Courtesy of Dr. Jaleena Fischer-Jessop.

### PROCEDURE\*



1. Prep teeth. Scour with Consepsis™ Scrub slurry and STARbrush™ coronal brush.



2. ExperTemp temporary crown and bridge with esthetic translucency.



3. Apply ClearTemp™ LC temporary veneer cement.

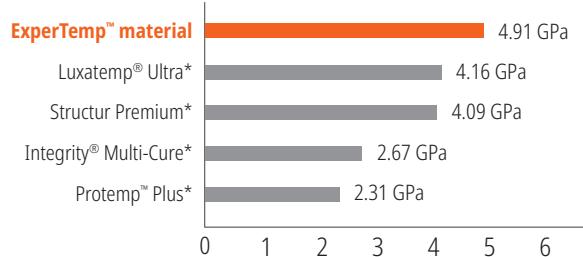
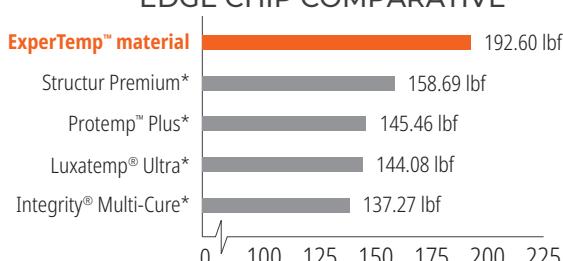


4. Use blade to open embrasures without altering margins.



5. ExperTemp material achieves esthetic blend with natural teeth. Three weeks post-op just prior to cementation of permanent veneers.

\* See IFU for complete instructions. 1. realityesthetics.com. 2. Data on file. 3. Data on file.

FLEXURAL MODULUS COMPARATIVE<sup>1</sup>EDGE CHIP COMPARATIVE<sup>1</sup>

## ExperTemp Cartridge Kits

Shade	Kit	Shade	Kit
A1	6341	Bleach White	6344
A2	6340		
A3	6347		

1 x 50 ml (76 g) cartridge  
15 x Mixing tips

6345 - ExperTemp Dispensing Gun 1pk  
10:1/4:1 gun

## 6346 - ExperTemp Mixing Tips 45pk



## Peak™ Universal Bond

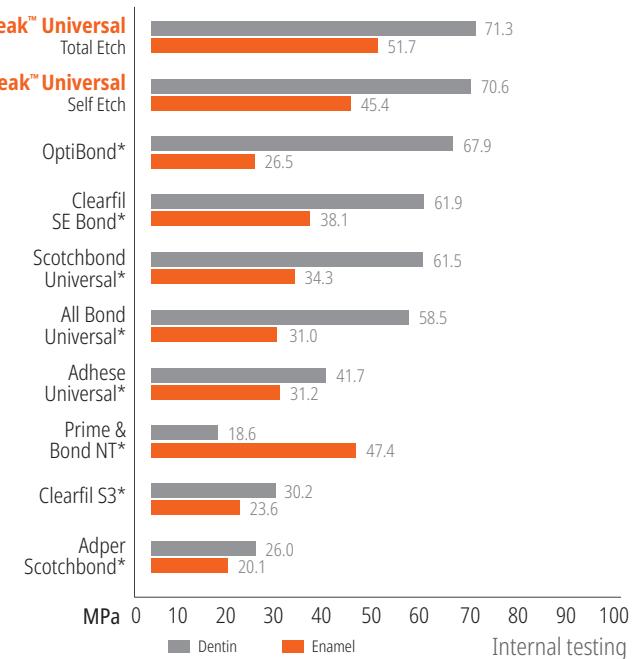
LIGHT-CURED ADHESIVE



Inspiral™ Brush Tip page 143



- Features Ultradent's Dymetech™ phosphate monomer blend for enhanced strength and greater versatility
- Contains 0.2% chlorhexidine to help ensure long-term bond strength<sup>3,4</sup>
- Bonds to all dental substrates
- Ideal for direct and indirect bonding, as well as post and core procedures
- Works with self-etch and total-etch techniques
- Available in syringe, bottle, and unit-dose delivery

BOND STRENGTH COMPARISON (MPa)<sup>5</sup>

Light-Cured Adhesive, see page 68-69.

\* Trademark of a company other than Ultradent. 1. Data on file. 2. realityesthetics.com 3. Breschi L, Maravic T, Comba A, et al. Chlorhexidine preserves the hybrid layer in vitro after 10-years aging. *Dent Mater*. 2020;36(5):672-680. doi:10.1016/j.dental.2020.03.009. 4. Yaghmoor RB, Jamal H, Abed H, et al. Incorporation of MMP inhibitors into dental adhesive systems and bond strength of coronal composite restorations: A systematic review and meta-analysis of in vitro studies. *Jpn Dent Sci Rev*. 2022;58:298-315. doi:10.1016/j.jdsr.2022.09.004. 5. Data on file.



# CEMENTS

Strongest RRGI/RMGI tested.<sup>1</sup>

## UltraCem™

RESIN-REINFORCED GLASS IONOMER CEMENT



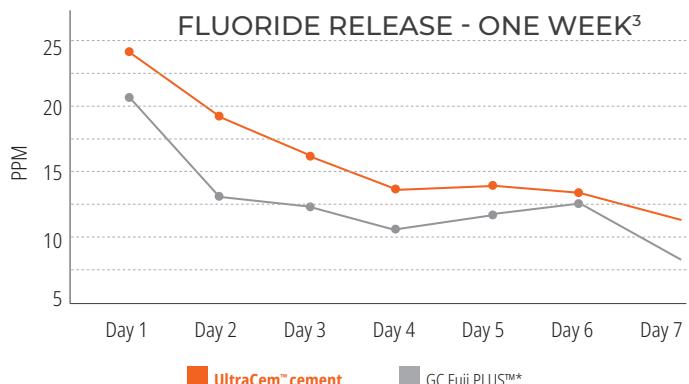
- High bond strengths
- Sustained fluoride release<sup>3</sup>
- Flowable viscosity and low film thickness won't compromise fit or occlusion<sup>4</sup>
- 1- to 3-minute working time, 5-minute set time
- Radiopacity >1 mm aluminum
- More retentive than other leading RMGI cements on precious alloy crowns<sup>5</sup>

UltraCem resin-reinforced glass ionomer cement offers the best of both worlds in a luting cement: efficient delivery and unsurpassed performance. Its advanced chemistry boasts the highest bond strengths in its category,<sup>1</sup> while ensuring the ultimate luting convenience. UltraCem cement is available in a traditional hand-mix bottle kit, an economical choice that gives clinicians control over the viscosity and amount of material used.

UltraCem resin-reinforced glass ionomer cement is used as a luting cement for indirect restorations (including inlays, onlays, crowns, and bridges) made of metal, porcelain fused to metal, zirconia, and resin. It may also be used for cementation of orthodontic bands.

**Note:** Never use phosphoric acid to clean zirconia, as it will significantly reduce bond strengths. Do not use a zirconia primer with UltraCem cement.

	COMPARATIVE TESTING <sup>1</sup>		
	METAL SHEAR BUTTON	CROWN PULL	FILM THICKNESS
<b>UltraCem™ cement</b>	10.89 MPa	5.22 MPa	24.0 µm
GC Fuji PLUS™*	4.76 MPa	3.91 MPa	17.6 µm
3M RelyX™ Luting*	5.12 MPa	4.59 MPa	36.9 µm
3M Ketac-Cem™*	3.65 MPa	2.27 MPa	25.8 µm



### 2056 - UltraCem Liquid-Powder Bottle Kit

- 1 x 15 g bottle of powder
- 1 x 8.6 ml (13.07 g) bottle of liquid
- 1 x Mixing pad
- 1 x Measuring spoon
- 1 x Spatula

\* Trademark of a company other than Ultradent. **1.** Data on file. **2.** realityesthetics.com. **3.** Data on file. **4.** Data on file. **5.** Pameijer CH. Crown retention with three resin-modified glass ionomer luting agents. *J Am Dent Assoc.* 2012;143(11):1218-1222.



BRICE TOLBERT - Big Cottonwood Canyon

# COMPOSITES

Transcend  
Vit-l-escence  
Mosaic  
Composite Wetting Resin  
PermaFlo Pink  
PermaFlo  
PermaSeal  
PrimaDry



# TRANSCEND™ UNIVERSAL COMPOSITE

## Restorations with Just One Shade



Courtesy of Dr. Jaleena Fischer-Jessop.

Patient presented with recurrent decay on amalgam restoration on tooth #28. Tooth was restored using Transcend composite Universal Body shade. No opaquer was used as Transcend composite Universal Body shade had enough opacity to cover amalgam tattooing while blending in with the natural tooth color.



## Transcend™

### UNIVERSAL COMPOSITE



- Universal Body shade beautifully blends with almost any tooth color
- No blocker required
- Proprietary Resin Particle Match™ technology
- Universal Body shade continues to match the surrounding dentition even after whitening<sup>5</sup>
- Excellent mechanical and optical properties
- Ideal working consistency is easy to sculpt<sup>6</sup>
- High polishability<sup>6</sup>
- Additional enamel and dentin shades for more esthetically demanding anterior cases
- Fluoresces similarly to natural dentition<sup>7</sup>



Transcend composite allows you to complete restorations with just one shade. Thanks to Ultrudent's Resin Particle Match technology, the refraction indices of the resin and particles work together to allow Transcend composite to blend with the surrounding tooth color.<sup>5</sup> That means you can use Transcend composite Universal Body shade almost anywhere in the mouth and know that it will look natural and beautiful, even in larger restorations. Plus, Transcend composite features ideal handling for manipulation and sculptability.<sup>6</sup>

#### CONTINUALLY MATCHES SURROUNDING DENTITION



No new composite restorations may be required after the whitening treatment is completed for teeth that have been previously restored with Transcend composite, as the shade of the composite can adapt itself to continue to match the optical properties of the surrounding dentition as teeth get whitened.<sup>5</sup>

#### ONE-SHADE RESTORATIONS NO BLOCKER USED



Before.

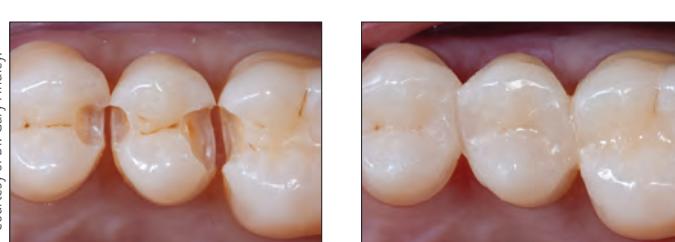
After.



Courtesy of Dr. Yo-Han Choi.

Before.

After.



Courtesy of Dr. Rafael Beclchi.

Before.

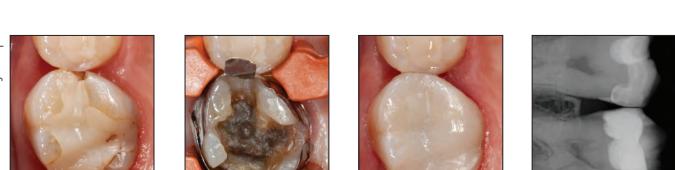
After.



Courtesy of Dr. Gary Findley.

Before.

After.



Courtesy of Dr. Jaleena Fischer-Jessop.

Before.

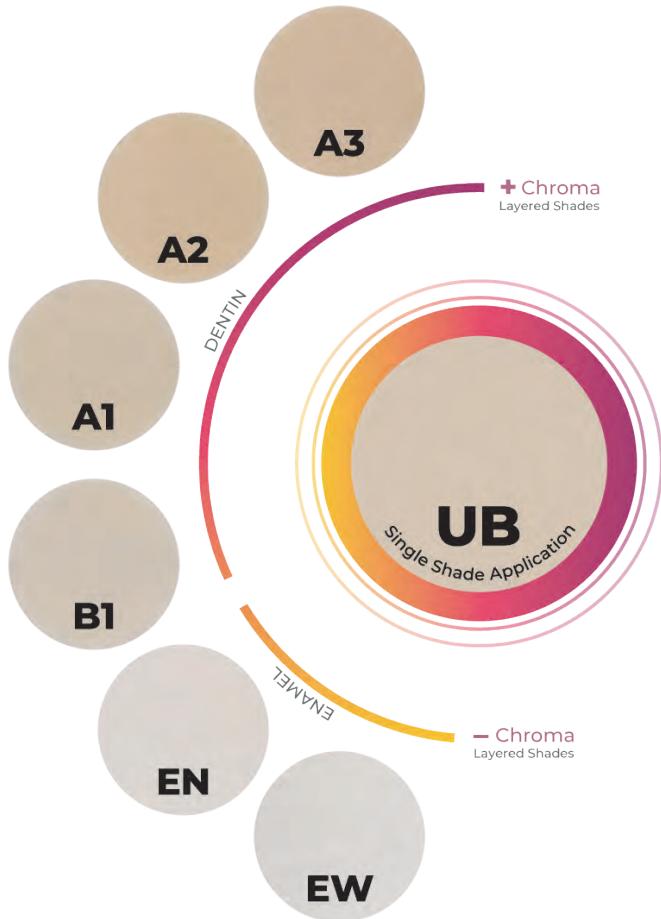
After.



- Dentistry Today (Award) 2024 Innovative Products Award Jan/Feb 2024 Issue, Volume 43, No 1, Page 40.
- Dentistry Today (Award) 2024 Top 100 Products Award July/August 2024 Issue, Volume 43, No 6, Page 28.
- Dentistry Today (Award) 2025 Innovative Products Award Jan/Feb 2025 Issue, Volume 44, No 1, Page 44.
- Dentistry Today (Award) Top 25 Aesthetic Restorative Products Award - May 2025 Issue, Volume 44, No 4, Page 54.
- Data on file. **6** Data on file. **7** Data on file.



# COMPOSITES



## Simply Beautiful Results FOR ANY RESTORATION

In addition to the Universal Body shade, Transcend composite also includes four dentin shades and two enamel shades for cases when a layering technique is appropriate.

For the reconstruction of anterior teeth with a noticeable difference between cervical and incisal areas (opaque and translucent regions), and/or for larger restorations, such as occasional large Class III and IV cases that lack tooth structure from which the Universal Body shade draws shade from, beautiful outcomes can be achieved through the layering of the additional dentin and enamel shades.



### TECHNICAL OVERVIEW<sup>1</sup>

#### TRANSCEND UB

Compressive Strength	450.7 MPa
Hardness	60.3 HK
Flexural Strength	156.17 MPa
Flexural Modulus	11.85 GPa
Volumetric Shrinkage	1.60%
Initial Gloss	93.5 GU
Final Gloss	91.2 GU
Depth of Cure	2.85 mm
Radiopacity	3.2 mm-Al
Fill by Volume	60–61%
Fill by Weight	79%

1. Data on file.



## UNIVERSAL BODY SHADE



**4733 - Transcend UB Syringe 1pk**  
1 x 4 g syringe Universal Body shade



**4757 - Transcend UB Singles 10pk**  
10 x 0.2 g singles Universal Body shade

**4817 - Transcend UB Singles 40pk**  
40 x 0.2 g singles Universal Body shade

Pair Composite Wetting Resin with any Ultradent composite to improve instrument and composite glide when sculpting and contouring.



**3059 - Composite Wetting Resin Syringe 2pk**  
2 x 1.2 ml syringes

## COMPLEMENTARY SHADES



**Transcend Syringe 4 g**

Dentin	1pk	Enamel	1pk
A1D	4727	Enamel Neutral	4731
A2D	4728	Enamel White	4732
A3D	4729		
B1D	4730		

1 x 4 g syringe



**Transcend Singles 0.2 g**

Dentin	10pk	Enamel	10pk
A1D	4744	Enamel Neutral	4748
A2D	4745	Enamel White	4749
A3D	4746		
B1D	4747		

10 x 0.2 g singles



**4726 - Transcend Syringe Intro Kit**

1 x 4 g syringe of each shade:  
A1D, A2D, A3D, B1D, EN, EW, UB



**4814 - Transcend Singles Intro Kit**

10 x 0.2 g singles of each shade:  
A1D, A2D, A3D, B1D, EN, EW, UB



## Vit-l-escence™

ESTHETIC RESTORATIVE MATERIAL



- Effortlessly blends with natural dentin and enamel
- Intended for anterior and posterior restorations
- Is both creamy and sculptable
- Polishes beautifully
- Matches shade guide perfectly
- High wear strength<sup>2</sup>

Vit-l-escence esthetic restorative material is a composite system that features the fluorescent and opalescent qualities of natural tooth structure. It is a Bis-GMA-based, radiopaque microhybrid system with an average particle size of 0.7  $\mu\text{m}$ .<sup>1</sup> The all-composite shade guide contains uniquely shaped tabs to assist in the most refined layering and shade selection possible. Low-translucency, highly fluorescent dentin shades combined with high-translucency, opalescent/translucent enamel shades facilitate superior reproduction of natural teeth.

Vit-l-escence esthetic restorative material is ideal for creating artistic anterior composite restorations, including direct veneers. Its strength and wear resistance also make it perfect for posterior restorations.

*"As a 30-year vet of trying to make anterior restorations look like teeth and having tried all the 'latest and greatest' new composites over this time, I have found Vit-l-escence material to be the only composite with which I can predictably achieve my goal."*

—DR. JACK MULLEN — ROCKY MOUNT, NC

*"The ability to match various shades and nuances of natural teeth has given me the tools to produce results I would not have believed possible. This product alone raised my skill level at least two notches higher."*

—DR. HARPER JONES II — PENDLETON, OR

*"Just the right amount of translucency and pearliness allows invisible blending on enamel margins for posterior restorations. Combined with the easy handling and finishability of your Vit-l-escence products, these shades are truly 'pearl' precious and beautiful."*

—DR. MARYANN PITTMAN — SAINT PETERSBURG, FL

*"With Vit-l-escence material, I can do Class IV restorations that are indistinguishable from natural teeth. What a great product!"*

—DR. SARAH BALSER — COLUMBUS, OH

## BEFORE AND AFTER



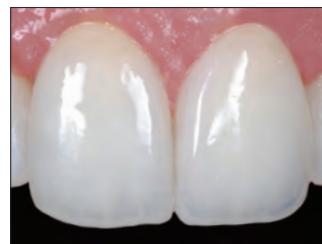
Before.



After.



Before.



After.



Before.



After.



Before.



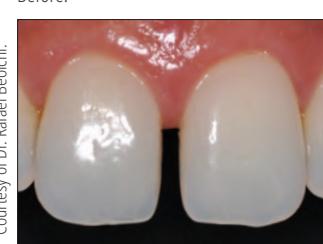
After.



Before.



After.



Before.



After.

\* Dependent on modality for particle size measurement. 1. realityesthetics.com. 2. Data on file.



## VIT-L-ESSENCE MATERIAL LAYERING TECHNIQUE

Courtesy of Dr. Newton Fahli.



1. For Class IV restorations, veneers, or diastema closures, a silicon putty matrix fabricated from diagnostic wax-up is recommended.



2. Use matrix as a guide for basic shape of restoration and to support initial lingual placement of material.



3. Use thin layer of Pearl Neutral to establish lingual contour. This is not necessary if tooth structure exists on lingual wall.



4. Inner dentin body layer includes basic hue of exposed dentin. A3.5 is applied at cervical towards incisal. Create mamelons using a carver.



5. Cover body and extend enamel edge with appropriate translucent shade. To achieve a "halo" (white line at the incisal edge), place thin roll of Pearl Frost or Opaque Snow.



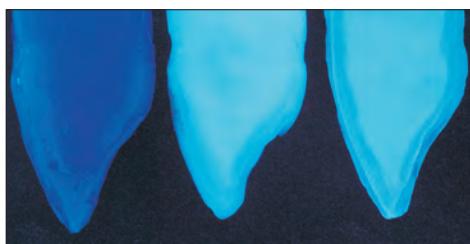
6. Make final adjustments with multifluted finishing burs. Use Jiffy™ cups, points, and disks for smoothing. Polish with Jiffy™ HiShine.

## NATURAL ENAMEL OPALESCENCE AND DENTIN FLUORESCENCE

Courtesy of Dr. L. Vanini.



Vit-L-Essence Enamel



Traditional Composite

Natural Tooth

Vit-L-Essence Dentin Shade

Courtesy of Dr. Nasser Barghi.

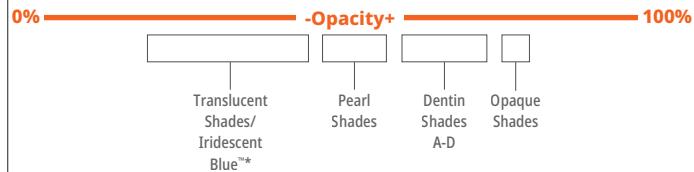


Vit-L-Essence Composite

Porcelain

Vit-L-Essence material can be even more translucent than porcelain.

## VIT-L-ESSENCE COMPOSITE SHADE OPACITY RANGE



\* Trans Ice, Trans Gray, Trans Mist, Trans Blue, Iridescent Blue, and Trans Smoke

*In a simple technique, Vit-L-Essence™ esthetic restorative material allows you to layer enamel shades over dentin shades, creating the most lifelike restorations possible.*



## 1 SELECT HUE

Identify the hue at the gingival third of the tooth and choose the best dentin shade accordingly.

## 2 ESTABLISH CHROMA

Identify the level of saturation at the middle third of the tooth. This may be the same dentin shade determining hue or could be an additional 1 or 2 dentin shades.

## 3 DETERMINE VALUE

Use a value shade guide to identify the value of the tooth. Accurately replicating the value defines form and creates realistic spatial perceptions.

## 4 IDENTIFY TRANSLUCENCY

Translucency is typically seen at the incisal edge. Iridescent Blue reflects light in the yellow to blue range, adding dimension.

## 5 IDENTIFY UNIQUE OPACIOUS AREAS

Replicate very bright, high-value areas such as hypocalcification, decalcification, stains, etc. Opaque shades can also be used for masking or blocking out dark dentin or enamel. Opaque White is the most opaque and has the highest value.

## Glossary of Terms:

**Hue:** The wavelength of reflected light as determined by the dentin shade. The individual color of the tooth.

**Shade:** The variance in hue due to the introduction of lighter or darker colors.

**Chroma:** The level of saturation, or the intensity of the hue.

**Value:** The lightness or darkness of the tooth.

**Translucency:** The ability of a tooth to permit the passage of light.

**Opacity:** The ability of a tooth to block the passage of light.



# COMPOSITES

*REFRIGERATE*

## Vit-l-escence™ Syringe 2.5 g

Dentin	<b>1pk</b>	Enamel	<b>1pk</b>
A1	358	Opaque White™	1182
A2	343	Opaque Snow™	1183
A3	344	Pearl Frost™	443
A3.5	356	Pearl Neutral™	1184
A4	360	Pearl Amber™	1185
A5	362	Pearl Smoke™	1186
A6	408	Trans Mist™	482
B1	409	Trans Smoke™	485
B2	418	Trans Blue™	1188
B3	421	Trans Gray™	478
C1	426	Trans Ice™	479
C2	435	Iridescent Blue™	1317
C3	439		
C4	440		
C5	441		
D3	442		



x 1

*REFRIGERATE*

## Vit-l-escence™ Single Capsules 0.3 g

Dentin	<b>10pk</b>	Enamel	<b>10pk</b>
A1	1219	Opaque White™	2238
A2	1202	Opaque Snow™	1212
A3	1203	Pearl Frost™	1196
A3.5	1204	Pearl Neutral™	1197
A4	1220	Pearl Amber™	1210
A5	2230	Pearl Smoke™	1198
A6	2231	Trans Ice™	2245
B1	1205	Iridescent Blue™	2248
B2	1223		
B3	2232		
C1	1227		
C2	1228		
C3	1229		
C4	2235		
C5	2236		
D3	2237		



x 10



### 822 - Master's Shade Guide—20 Shades

A1, A2, A3, A3.5, A4, A5, B1, B2, OW, OS, PF, PN, PA, PS, TM, TS, TB, TG, TI, IB

(Shades A6, B3, C1, C2, C3, C4, C5, and D3 are NOT included)

## Optional KleenSleeve™ QuadraSpense™



Shades are identified on both the barrel and the stem.



Facilitates removal of small amounts of material.



## Mosaic™

UNIVERSAL COMPOSITE



- Smooth, pliable consistency
- Cuts easily and doesn't stick to instruments
- Won't flow or slump out of place after being shaped
- Allows ample working time under ambient light

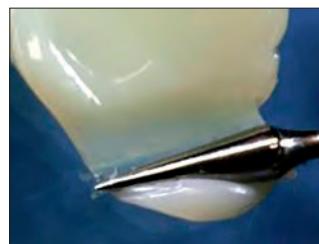
Mosaic universal composite balances beauty and performance for lasting, lifelike results. Mosaic composite can be used for all restorative purposes: basic or complex. Its nanohybrid formula is composed of zirconia-silica glass ceramic and 20 nanometer silica. Filler load is 68% by volume for dentin shades and 56% for enamel shades.<sup>2</sup> The exceptional handling, natural esthetics, and high durability of Mosaic composite enable clinicians to create restorations of the highest quality.

Mosaic composite is used for direct and indirect restorations (inlays, onlays, and veneers) in both the anterior and posterior regions.

### TWENTY INTUITIVE SHADE OPTIONS PRODUCE PREDICTABLE, NATURAL RESULTS



### HIGHLY SCULPTABLE



Highly sculptable handling properties provide total control during manipulation.

### BEFORE AND AFTER



Esthetic restoration using Mosaic composite shades: A4, A3, A2, and A1 from cervical to incisal. Enamel White and Opaque White on incisal edge. Universal application suits Class I–V restorations in both anterior and posterior regions.

### PROCEDURE



1. Preoperative Class II restoration.



2. Preparation with matrix placement.



3. Marginal crest built with Enamel Neutral.



4. A5 dentin shade used for initial layer.



5. Enamel Neutral shade used for final layer.

Class II restoration using Peak™ Universal Bond adhesive system with Mosaic composite shades A5 and Enamel Neutral.

1. realityesthetics.com. 2. Data on file.

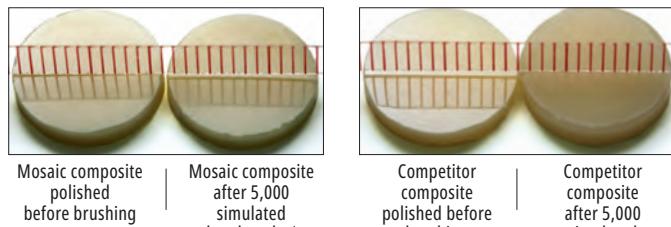
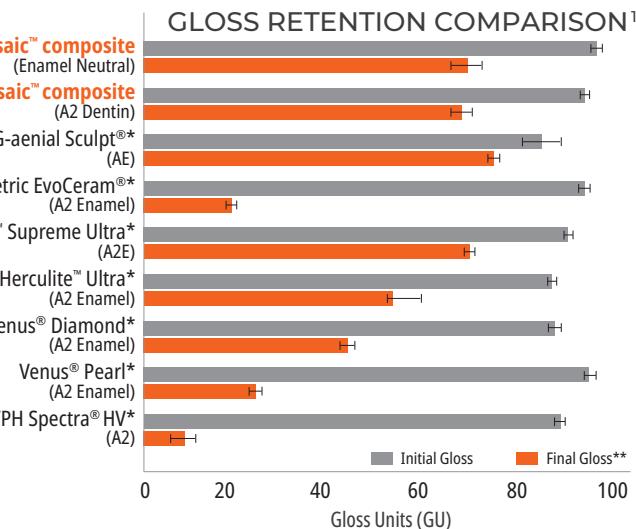


# COMPOSITES

## TECHNICAL OVERVIEW<sup>1</sup>

	DENTIN SHADES	ENAMEL SHADES
Shrinkage Volume	2.6%	3.7%
Shrinkage Stress	3.9 MPa	6.1 MPa
Compressive Strength	486.4 MPa	447.6 MPa
Hardness	66.9 HK	65.4 HK
Flexural Strength	166.1 MPa	176.7 MPa
Flexural Modulus	17.3 GPa	11.7 GPa
Water Sorption	$\leq 40 \mu\text{g}/\text{mm}^3$	$\leq 40 \mu\text{g}/\text{mm}^3$
Water Solubility	$\leq 7.5 \mu\text{g}/\text{mm}^3$	$\leq 7.5 \mu\text{g}/\text{mm}^3$
Radiopacity	$\geq 2 \text{ mm Al (200\%)}$	$\geq 2 \text{ mm Al (200\%)}$
Working Time (Ambient Light)	4:00 min	4:00 min
Depth of Cure	2 mm	2 mm
% Fill by Volume	68%	56%

Balanced performance ensures both functional durability as well as esthetic longevity.



\* Trademark of a company other than Ultradent. \*\* Final gloss measured after 5,000 simulated brush cycles in gloss units (GU). <sup>1</sup> Data on file.



## 4803 - Mosaic Shade Guide—20 shades

A0.5, A1, A2, A3, A3.5, A4, A5, B0.5, B1, B2, C2, C3, D2, EY, EB, EG, EN, EW, OW, ET

## Mosaic™ Syringe 1pk 4 g

Dentin	1pk	Enamel	1pk
A0.5	4760	Enamel Yellow	4773
A1	4761	Enamel Blush	4774
A2	4762	Enamel Gray	4775
A3	4763	Enamel Neutral	4776
A3.5	4764	Enamel White	4777
A4	4765	Enamel Trans	4779
A5	4766	Opaque White	4778
B0.5	4767		
B1	4768		
B2	4769		
C2	4770		
C3	4771		
D2	4772		



x 1

## Mosaic™ Single Capsules 10pk 0.2 g

Dentin	10pk	Enamel	10pk
A0.5	4799	Enamel Yellow	4792
A1	4780	Enamel Blush	4793
A2	4781	Enamel Gray	4794
A3	4782	Enamel Neutral	4795
A3.5	4783	Enamel White	4796
A4	4784	Enamel Trans	4798
A5	4785	Opaque White	4797
B0.5	4786		
B1	4787		
B2	4788		
C2	4789		
C3	4790		
D2	4791		



x 10



## Composite Wetting Resin



Inspiral™ Brush Tip page 135

- Facilitates composite adaptation
- Moistens dry composite during contouring
- Hydrophobic and solvent-free resin

Composite Wetting Resin is a 45%-filled,<sup>2</sup> light-cured liquid resin. It is significantly superior to single-component adhesives, which contain solvents and inhibit composite polymerization.

Use Composite Wetting Resin during incremental layering of composite materials, and when the oxygen-inhibited layer has been removed or disturbed (e.g., washing the composite surface following contamination). Use Composite Wetting Resin on an instrument or brush to enhance glide. It may also be placed on a composite surface that has become dry during contouring. Composite Wetting Resin facilitates adaptation of the composite restoration and preparation.



1. Before Composite Wetting Resin.

2. Dip tool in Composite Wetting Resin or apply directly to tooth.
3. Application of Composite Wetting Resin allows for better instrument glide and composite adaption.



2. Dip tool in Composite Wetting Resin or apply directly to tooth.
3. Application of Composite Wetting Resin allows for better instrument glide and composite adaption.



## PermaFlo™ Pink COMPOSITE



Micro 20 ga Tip page 136

- Acts as an attractive solution for esthetic gingival substitute

PermaFlo Pink composite is an excellent alternative to gingival grafting, which is not always an option. Use as a masking agent in Class V restorations where root structure is exposed. Also use to mask gingival recession.

### BEFORE AND AFTER



Courtesy of Dr. Anna Krylova.



1. Following tooth prep and application of Peak™ Universal Bond adhesive, build restoration incrementally with PermaFlo Pink composite.
2. Final restoration can mask exposed root surfaces when gingival grafting isn't an option.



REFRIGERATE



**3059 - Composite Wetting Resin Syringe 2pk**  
2 x 1.2 ml (1.85 g) syringes



**963 - PermaFlo Pink Syringe Kit**  
2 x 1.2 ml (2.3 g) syringes  
4 x Micro 20 ga tips

1. realityesthetics.com. 2. Data on file.



# COMPOSITES

## PermaFlo™

FLOWABLE COMPOSITE



2024<sup>1</sup>  
REALITY  
Best Annual  
5 Stars



Micro 20 ga Tip page 136



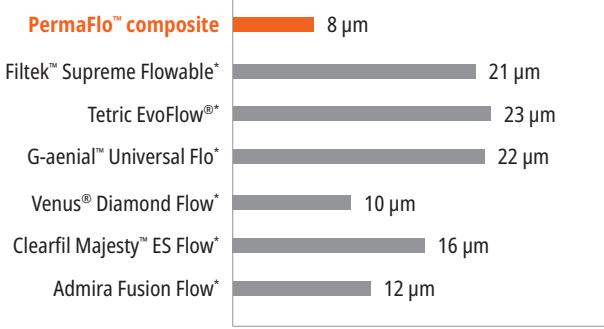
Black Mini™ Tip page 134

- High-fill, high-flow formula
- Highly radiopaque<sup>2</sup>
- Fluoride-releasing formulation<sup>3</sup>
- Superior polishability
- Strong and wear resistant
- Available in 5 shades

PermaFlo flowable composite is light-cured, radiopaque, methacrylate-based, and available in 5 shades. Its thixotropic properties impart ideal flowability for improved adaptation. PermaFlo composite is 67–68% filled by weight, 42–44% filled by volume,<sup>4</sup> and has an average particle size of 0.7 µm.<sup>4</sup>

Use PermaFlo flowable composite for anterior and posterior restorations: Class I, II, III, IV, and V. It can also be used to restore missing subgingival tooth structure prior to endodontic procedures (the “Donut Technique”).

### FILM THICKNESS<sup>5</sup>

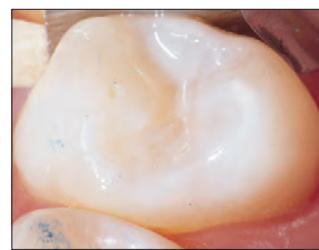


## MICRO RESTORATIVE



1. Small Class I preparation treated with dentin bonding agent. Fill restoration with flowable PermaFlo™ composite through Micro 20 ga tip.

2. The flowable composite offers unsurpassed adaptation as it fills from preparation floor up.



3. Finished, radiopaque, 0.7 µm hybrid restoration.

## MASKER



Masking dark colors with PermaFlo composite initially facilitates gorgeous esthetics at surface.

## METAL MASKING



Place a thin layer of PermaFlo Dentin Opaquer over exposed metal and light cure for 10 seconds on Standard Power mode with VALO™ curing light.

\* Trademark of a company other than Ultradent. **1.** realityesthetics.com. **2.** Data on file. **3.** Data on file. **4.** Data on file. **5.** Data on file.



## SUPERADAPTIVE INITIAL LAYER

Courtesy of Dr. Howard Strassler.



After bonding agent, apply a thin layer of PermaFlo composite at gingival margin, proximal box axial margins, and internal line angles to ensure quality adaptation of composite.



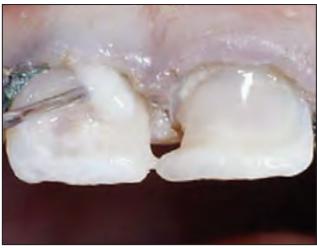
## PEDIATRIC RESTORATIONS



1. Rampant caries in a 3-year-old.



2. Slow speed and large round bur to remove all caries. Verify with Sable™ Seek™ caries indicator to ensure prep is in firm mineral dentin. Quality tissue management is an absolute here; pack an Ultrapak™ cord soaked in hemostatic agent first.



3. Etch preparations and apply Peak™ Universal Bond adhesive. Light cure for 10 seconds on Standard Power mode with VALO curing light. Apply a thin first layer of PermaFlo composite to the adhesive layer with Micro 20 ga tip. Light cure.



4. Apply and cure 1 or 2 additional increments. Quickly finish restorations with finishing burs and abrasive cups.



5. One year later.

*"The opaque PermaFlo composite shade is a terrific tool for difficult esthetic restorations. It allows me to mask metal when repairing a PFM crown and eliminates the gray hue. I am able to cover dark stains and restore the tooth to its natural beautiful shade."*

—DR. KENNETH B. ALLEN – FORT COLLINS, CO

*"PermaFlo composite allows us to restore in so many different situations. The material seems to 'flex' better in those difficult Class V restorations, which serves us and our patients more successfully."*

—DR. PAT PRENDERGAST – ENGLEWOOD, CO

*"I literally use PermaFlo composite on every patient. I love the shades and the way it flows and handles. I use it around my posts, prior to core buildups. The stuff is awesome!"*

—DR. JAN E. MODESTOW – FLORENCE, MA



## REFRIGERATE

## PermaFlo Syringe Kits

Shade	Kit	Shade	Kit
A1	947	B1	956
A2	948	Dentin Opaquer	1005
A3	949		

20 x 1.2 ml (2.3 g) syringes  
4 x Micro 20 ga tips

\* Trademark of a company other than Ultradent. \*\* As provided by original manufacturer. 1. Data on file.



# COMPOSITES

## PermaSeal™

PENETRATING COMPOSITE SEALER



Black Micro™ FX™ Tip page 134

- Bonds to composite and etched enamel
- Seals microcracks
- Protects and revitalizes composite restorations

PermaSeal composite sealer is a light-cured, methacrylate-based, unfilled resin. Its low viscosity allows excellent penetration, and the ultrathin layer minimizes the need for occlusal adjustment.

PermaSeal composite sealer minimizes staining and wear by sealing voids and irregularities created during the polishing process. Place on Class V composite margins to reduce microleakage.<sup>2</sup> PermaSeal sealer bonds well to composite-type provisional restorations such as ExperTemp™ material and can be used to revitalize old composites as well.

### NEW RESTORATIONS



Courtesy of Dr. Dan Fischer.



Before: Interproximal spaces and slight rotations to be corrected with Peak™ Universal Bond adhesive and composite.

After restoring and polishing, etch 5 seconds and apply PermaSeal composite sealer to seal composite and create a glossy finish. Air thin and light cure for 10 seconds.

### EXISTING RESTORATIONS



Courtesy of Dr. Brett Richins.



Clean surfaces and margins to be sealed thoroughly with Consepsis™ Scrub slurry, a micro etcher, or freshen with a bur and rinse thoroughly. Etch the enamel immediately adjacent to the restoration and all accessible composite surfaces for 15 seconds. If the enamel is not prepared as described above, etch for 30 seconds. Proceed to PermaSeal sealer application.

Restoration immediately after PermaSeal composite sealer application.



Smooth the provisional surface. Etch for 5 seconds, apply PermaSeal sealer onto surfaces, gently air thin, and light cure for 10 seconds.

*"Hands down, your composite sealer makes the composite look finished, gives it a glossy look, and 'fills' the microscopic pits. It makes or breaks my composites! I can't live without it!"*

—DR. RICHARD J. HAULEY — SALT LAKE CITY, UT



### 631 - PermaSeal Syringe Kit

4 x 1.2 ml (1.3 g) syringes  
10 x Black Micro FX tips

**Note: PrimaDry drying agent is great in conjunction with air drying just prior to PermaSeal composite sealer placement.**

## PrimaDry™

DRYING AGENT



Black Micro FX™ Tip page 134

PrimaDry drying agent contains 99% organic solvents and 1% primer and is optimal for pit and fissure drying and preparation. It rapidly volatilizes moisture content of pits and fissures. The ultrafine primer film allows UltraSeal XT™ plus sealant to flow perfectly into every pit and fissure.



### 716 - PrimaDry Syringe 4pk

1.2 ml (.953 g) syringes



HILLARY HUBBARD - Skull Arch, Arches National Park

# ENDODONTICS

ChlorCid  
ChlorCid V  
ChlorCid Surf  
File-Eze EDTA Lubricant  
Ultradent EDTA 18% Solution  
Consepsis  
Consepsis V  
Irrigation Protocol  
UltraCal XS  
Ultradent Citric Acid 20%  
J-Temp  
Skin Syringe

PermaFlo Purple  
NaviTip Reference Guide  
Endodontic Tips  
MTAFlow White  
MTAFlow  
EndoREZ Canal Sealer  
UniCore  
DermaDam Synthetic  
DermaDam  
Luer Vacuum Adapter  
TriAway Adapter



# ENDODONTICS

All of Ultradent's irrigants, lubricants, and medicaments are compatible with methacrylate resin sealers.

## ChlorCid™ and ChlorCid™ V

3% SODIUM HYPOCHLORITE SOLUTIONS



ChlorCid V solution is perfect for cleaning and debriding during instrumentation.



NaviTip™ Tip 29 ga/25 mm  
Single Sideport page 139



NaviTip™ Tip 31 ga/25 mm  
Double Sideport page 139

ChlorCid and ChlorCid V solutions contain 3% sodium hypochlorite for cleaning and debriding during instrumentation. ChlorCid V solution is more viscous for enhanced flow control and lubrication, if desired.

### 4612 - ChlorCid Bottle 1pk

480 ml (499.2 g) bottle



Ground shipping only.

### 1467 - ChlorCid V IndiSpense Syringe 1pk

30 ml (31.2 g) syringe



## ChlorCid™ Surf

3% SODIUM HYPOCHLORITE SOLUTION  
WITH SURFACTANT



ChlorCid Surf 3% sodium hypochlorite solution includes surfactant to modify surface tension. This allows the irrigant to flow into the difficult areas of the root anatomy.

### 4613 - ChlorCid Surf Bottle 1pk

480 ml (499.2 g) bottle

Ground shipping only.



## Sable™ Seek™ CARIES INDICATOR



Black Mini™ Brush Tip page 134

Sable Seek caries indicator is used as a fast, easy way to locate the root canal orifice.

Sable Seek, see page 103.



All of Ultradent's irrigants, lubricants, and medicaments are compatible with methacrylate resin sealers.

## File-Eze™ EDTA Lubricant

FILE LUBRICANT



NaviTip™ Tip 30 ga/25 mm page 139

NaviTip™ Tip 29 ga/25 mm page 139

- Peroxide free; will not affect the set of resin sealers

File-Eze file lubricant is an effective 19% EDTA in a water-soluble, viscous solution for chelating, lubricating, and debriding root canal preparations.

**Note:** The following lubricants contain peroxides that are not compatible with EndoREZ™ canal sealer: EndoGel, \* EndoSequence, \* Glyde, \* ProLube, \* RC-Prep, \* and SlickGel ES. \*



### 1075 - File-Eze Syringe Kit

4 x 1.2 ml (1.43 g) syringes

5 x Each 30 ga NaviTip tips

17 mm, 21 mm, 25 mm, and 27 mm



### 297 - File-Eze Syringe 4pk

1.2 ml (1.43 g) syringes



### 682 - File-Eze IndiSpense™ Syringe 1pk

30 ml (35.64 g) syringe

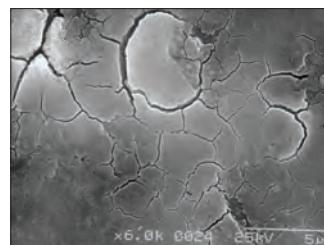
## Ultradent™ EDTA 18% Solution



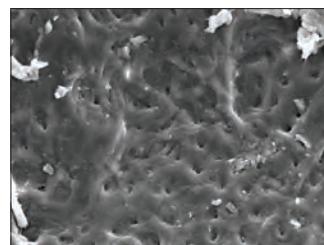
NaviTip™ FX™ Tip 30 ga/25 mm page 139

NaviTip™ FX™ Tip 30 ga/17 mm page 139

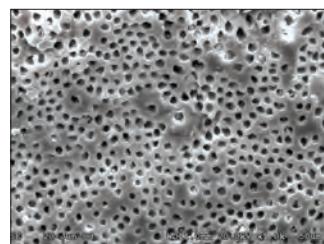
A root canal chelating agent that conditions/cleans through a chelation process, Ultradent EDTA 18% Solution is the irrigant of choice for smear layer removal and can be used as a final irrigant prior to obturation.



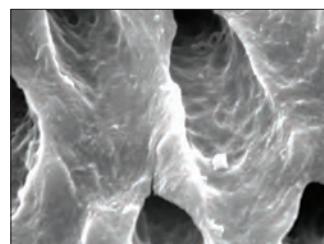
1. After canal instrumentation (no irrigants or lubricants). Smear layer intact.



2. After canal instrumentation plus sodium hypochlorite. Smear plugs still intact.



3. After canal instrumentation with both sodium hypochlorite and EDTA. Smear layer is removed. Clean, open tubules.



4. Close-up of Figure 3.

### 4616 - EDTA Bottle 1pk

480 ml (532.32 g) bottle



### 162 - EDTA IndiSpense Syringe 1pk

30 ml (33.27 g) syringe

\* Trademark of a company other than Ultradent.



# ENDODONTICS

All of Ultradent's irrigants, lubricants, and medicaments are compatible with methacrylate resin sealers.

## Consepsis™

2% CHLORHEXIDINE ANTIBACTERIAL SOLUTION



NaviTip™ Tip 31 ga - Double Sideport Irrigator page 139

NaviTip™ Tip 30 ga/25 mm page 139

Consepsis antibacterial solution is recommended for procedural endodontic disinfection and as a final endodontic rinse prior to canal obturation.<sup>2,3</sup> Consepsis solution should be used after smear layer removal for canal disinfection. Sodium hypochlorite should be rinsed and removed prior to using Consepsis solution.

**Note: DO NOT mix Consepsis solution or any chlorhexidine solution with ChlorCid™ sodium hypochlorite solution in the canal, as a harmful brown precipitate will form.**

### 4614 - Consepsis Bottle 1pk

480 ml (446.4 g) bottle



Ground shipping only.

### 491 - Consepsis Syringe 20pk

1.2 ml (1.12 g) syringes



### 687 - Consepsis IndiSpense™ Syringe 1pk

30 ml (27.9 g) syringe

## Consepsis™ V

2% CHLORHEXIDINE ANTIBACTERIAL VISCOUS SOLUTION



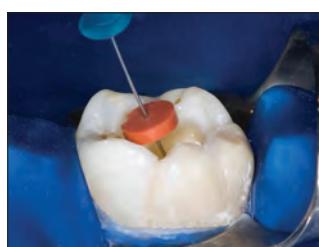
- Designed for endodontic cleaning purposes
- A more viscous formulation of Consepsis antibacterial solution
- Stays in place, even in maxillary canals

The viscosity of Consepsis V antibacterial viscous solution makes it the perfect antibacterial irrigant in cases where you want to have more control than a liquid will give you.

Consepsis V solution can be used in the canal in place of formocresol as an antibacterial agent and interappointment intracanal medication.

**Note: In cases of emergency treatments when there isn't enough space created to place calcium hydroxide, Consepsis V solution can be placed as the interappointment medicament.**

**Use a NaviTip tip to express Consepsis V solution into the canal and seal with temporary restoration.**



Use Consepsis V solution to disinfect canals as an interappointment intracanal medication.



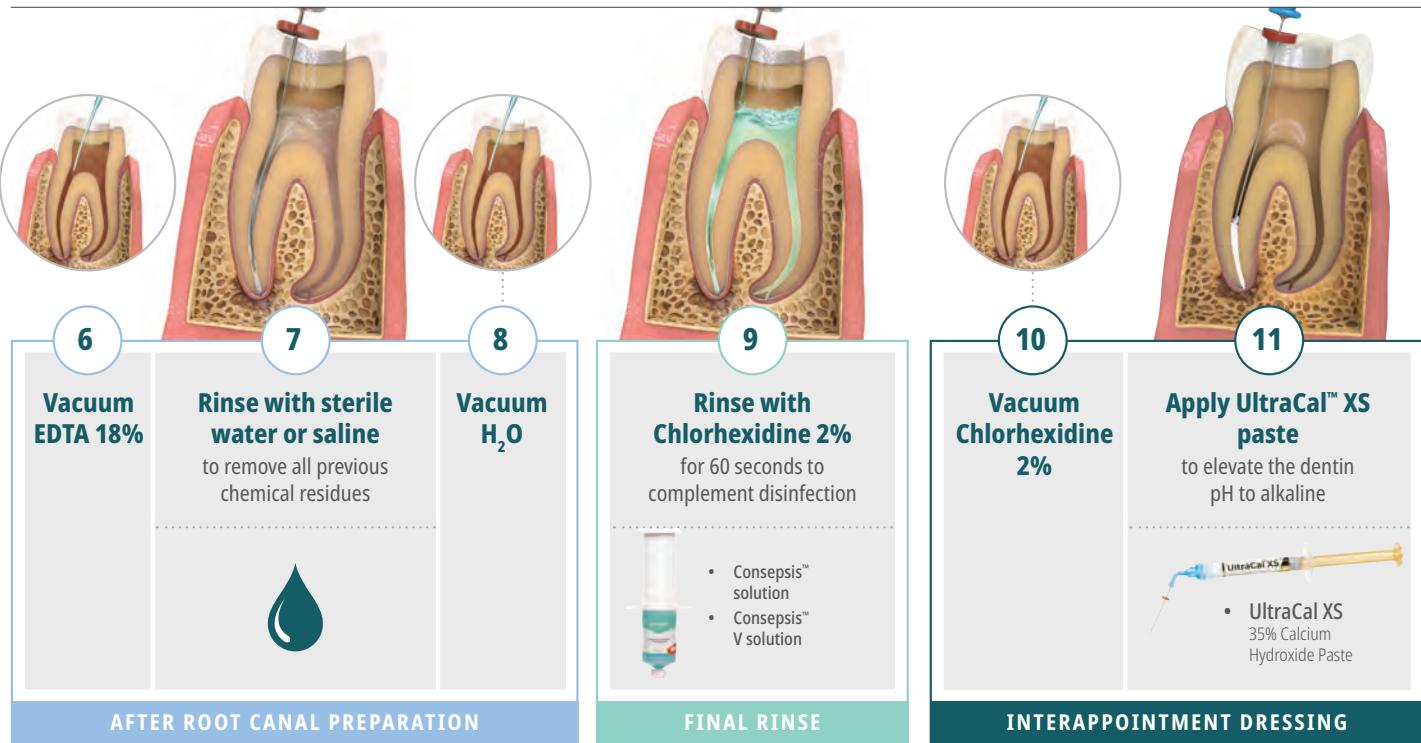
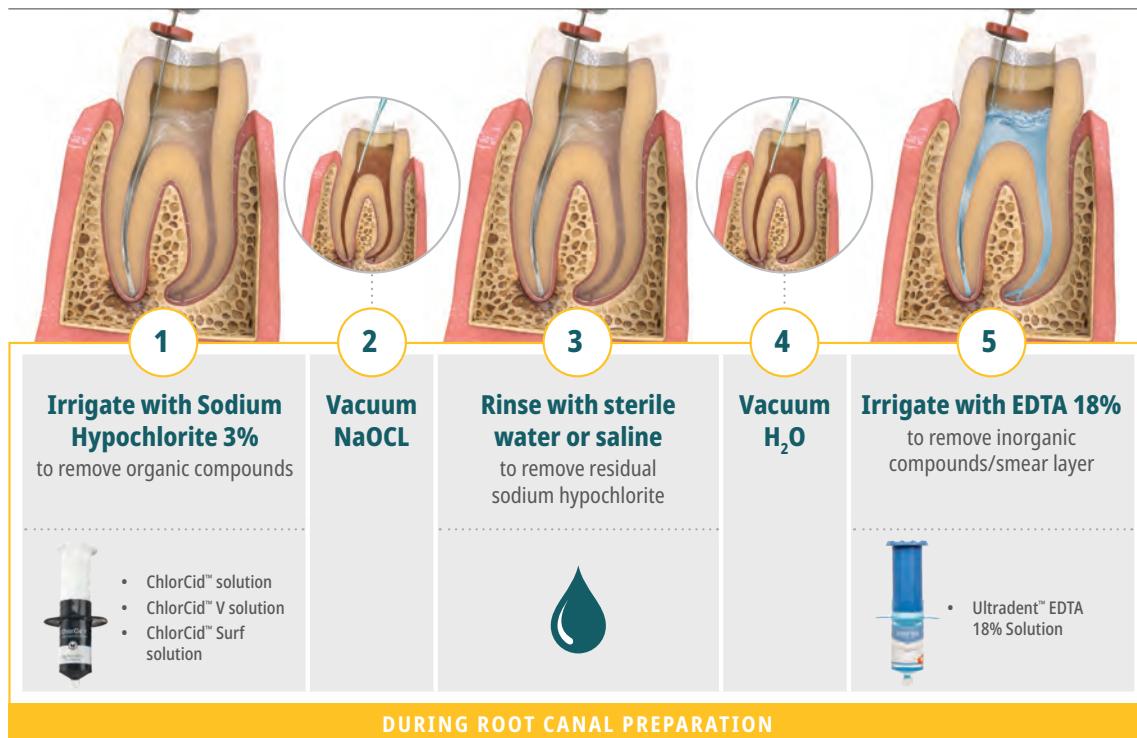
### 2210 - Consepsis V IndiSpense Syringe 1pk

30 ml (27.9 g) syringe

**1.** realityesthetics.com. **2.** Leonardo MR, Filho MT, Silva LAB, Bonifácio KC, Ito IY. In vivo antimicrobial activity of 2% chlorhexidine used as a root canal irrigating solution. *J Endod.* 1999;25(3):167-171. **3.** Mohammadi Z, Abbott PV. Antimicrobial substantivity of root canal irrigants and medicaments: a review. *Aust Endod J.* 2009;35(3):131-139.



## IRRIGATION PROTOCOL





# ENDODONTICS

All of Ultradent's irrigants, lubricants, and medicaments are compatible with methacrylate resin sealers.

## UltraCal™ XS

35% CALCIUM HYDROXIDE PASTE



NaviTip™ Tip 29 ga Single Sideport tip page 139

- Radiopaque
- High pH
- Superior delivery control

UltraCal XS calcium hydroxide paste is a uniquely formulated calcium hydroxide paste that is both aqueous and radiopaque, with a high pH (12.5). It is recommended to use the larger 29 ga NaviTip Single Sideport tip for predictable flow, enabling direct placement. UltraCal XS paste can be thoroughly removed from the canal using Ultradent Citric Acid and a NaviTip™ FX™ tip.

UltraCal XS paste elevates the dentin pH to alkaline, making it the ideal medium to be used as an interappointment dressing in clinical situations involving root resorption, dressing material, pulp capping, apexification, and perforations.<sup>1</sup>



### 5144 - UltraCal XS Syringe Kit

4 x 1.2 ml (1.76 g) syringes

5 x Each 29 ga NaviTip Single Sideport tips  
17 mm, 21 mm, 25 mm, and 27 mm



### 5145 - UltraCal XS Syringe 4pk

### 5149 - UltraCal XS Syringe 20pk

1.2 ml (1.76 g) syringes

<sup>1</sup>. Pedrinha VF, Cuellar MRC, de Barros MC, et al. The vehicles of calcium hydroxide pastes interfere with antimicrobial effect, biofilm polysaccharide matrix, and pastes' physicochemical properties. *Biomedicines*. 2022;10(12):3123. doi:10.3390/biomedicines10123123.

## Ultradent™ Citric Acid 20% Solution



NaviTip™ FX™ Tip 30 ga/25 mm page 139



NaviTip™ FX™ Tip 30 ga/17 mm page 139



Empty 1.2 ml syringe page 141

- Recommended as a cleanser/conditioner of prepared root canals
- Removes smear layer
- Slightly viscous formula facilitates lubrication
- Removes calcium hydroxide paste

Ultradent Citric Acid is a mild acidic material that is effective at dissolving/cleaning calcium hydroxide from canals (e.g., UltraCal XS paste). It is also recommended as a cleanser/conditioner to remove smear layer from dentinal walls.



### 329 - Citric Acid IndiSpense™ Syringe 1pk

30 ml (31.26 g) syringe



# J-Temp™

TEMPORARY RESIN

## J-Temp™

LIGHT-CURED TEMPORARY RESIN



Black Mini™ Tip page 134

### Four clinical indications for use:

- Temporary restorations (endodontics, walking bleach technique, inlay/onlay, cusp buildup)
- Splinting between multiple implant copings for impressions to resist impression material distortion
- Provide structure for isolation clamping and to act as a barrier to endodontic irrigants
- Bite ramps and temporary occlusal buildups during orthodontics
- Self-leveling<sup>1</sup>
- Less than a 5% shrinkage rate<sup>2</sup>
- Purple color for ease of identification and removal
- Dye free

J-Temp temporary resin is a radiopaque, light-cured, flowable, methacrylate-based resin that provides a durable, temporary material for multiple clinical indications. J-Temp resin is self-leveling,<sup>1</sup> has less than a 5% shrinkage rate,<sup>2</sup> and its distinctive purple color is easy to distinguish from enamel and dentin<sup>3</sup> without being too noticeable to the patient. With such versatility and quality, J-Temp temporary resin will quickly become a mainstay in your practice.



### 4897 - J-Temp Syringe Kit

4 x 1.2 ml syringes

20 x Black Mini tips



BEST  
PRODUCT



### TEMPORARY RESTORATION: ENDODONTICS



1. Prepare root canal system.



2. Insert cotton/Teflon pellet (or other barrier) and pack to protect the root canal entrance.



3. Apply J-Temp temporary resin incrementally in 2-3 mm layers.



4. Light cure between layers and use burs to adjust occlusion.

1. Data on file. 2. Data on file. 3. Data on file.



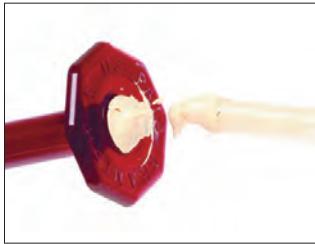
## Skini Delivery Syringe



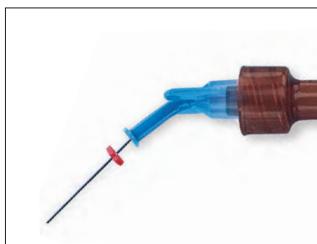
In dentistry, air often gets in the way of the materials used in canals. Displacing that air is essential for achieving a predictable seal and completely filling the canal preparation. The EndoREZ delivery system is optimized to displace air and create the highest seal possible by delivering materials from the bottom of the canal up, achieving bubble-free and complete application.



1. Transfer EndoREZ™ canal sealer out of the dual barrel syringe into back of a Skinibarrel using the Mixing tip.



2. Fill syringe to back flange so no air remains between plunger and EndoREZ canal sealer using the Mixing tip.



3. Attach a 29 ga NaviTip™ tip with Single Sideport of appropriate length. Express a small amount of EndoREZ canal sealer extraorally to verify flow. Make sure tip end is not bound in the apical region before expressing sealant.



0.5 ml	20pk
Skini Delivery Syringe	1680

## PermaFlo™ Purple

ANATOMICAL INDICATING COMPOSITE



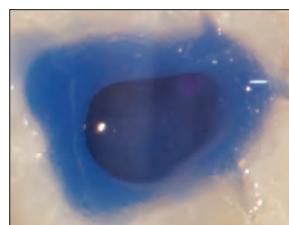
Micro 20 ga Tip page 136

PermaFlo Purple composite is used with an adhesive system to create an easily identified coronal seal. The purple color simplifies location of the pulp chamber floor when accessing the pulp chamber for future therapy.

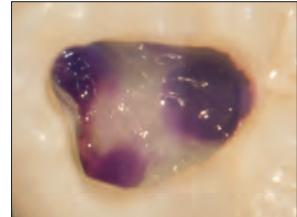
Courtesy of Dr. Carlos Ramos.



1. Root canal has just been completed and cleaned of excess EndoREZ canal sealer in the pulp chamber. (If significant unset EndoREZ canal sealer is exposed at canal orifice, coat with thin layer of Ultra-Blend™ plus liner and light cure.) Blot or air dry. Note: If eugenol or similar-based sealers have been used, wait until set and freshen all chamber and/or preparation surfaces with diamond bur prior to bonding.



2. Etch and place Peak™ Universal Bond adhesive; light cure.



3. Apply less than 1 mm thick layer of PermaFlo Purple. Light cure 10 seconds to create an immediate coronal seal. When a post and/or core is prepared, the purple identifies the position of root canal preparation. The contrast shows the clinician the pulp chamber floor in relation to the canal orifices, minimizing risk of perforation.

**Note: Apply dentin bonding agent first. Remember that eugenol-containing sealers can prevent polymerization of bonding resins. We recommend EndoREZ hydrophilic resin canal sealer or bioceramic root canal sealer.**



### 962 - PermaFlo Purple Composite Syringe Kit

2 x 1.2 ml (2.23 g) syringes  
4 x Micro 20 ga tips



## NaviTip™ Tip Reference Guide

- Provide controlled delivery close to the apical third
- Flexible, stainless steel cannulae easily navigate curved canals

	Product	Recommended Tip	Compatible Tips
	1467 - ChlorCID™ V IndiSpense Syringe	NaviTip™ 29 ga Single Sideport	—
	682 - File-Eze™ IndiSpense Syringe	NaviTip™ 29 ga or 30 ga	NaviTip™ 29 ga Single Sideport
	162 - EDTA 18% IndiSpense Syringe	NaviTip™ 31 ga Double Sideport Irrigator	NaviTip™ 29 ga, 30 ga, and NaviTip™ FX™
	687 - Consepsis™ IndiSpense Syringe	NaviTip™ 31 ga Double Sideport Irrigator	NaviTip™ 29 ga, 30 ga, and NaviTip™ FX™
	2210 - Consepsis™ V IndiSpense Syringe	NaviTip™ 29 ga	Black Micro™ FX™ Tip
	5144 - UltraCal™ XS Kit	NaviTip™ 29 ga Single Sideport	For direct pulp capping and pulp floor perforation application, use Micro 20 ga tip
	329 - Citric Acid	NaviTip™ FX™	NaviTip™ 30 ga and NaviTip™ 31 ga Double Sideport Irrigator
	5900 - EndoREZ™ Kit	NaviTip™ 29 ga Single Sideport	—
	3980-1 - MTAFlow™ Kit	NaviTip™ 29 ga	—
	4980 - MTAFlow™ White Kit	NaviTip™ 29 ga	—



Potential Considerations: Always verify flow and functionality prior to intraoral use.

**WARNING:**

- Use recommended endodontic tip • Make sure rubber stopper is in position
- Take extra precaution when not using sideport tips • Make sure tip is not wedged in the canal



## Capillary Tips

- Evacuates canals and substantially minimizes use of paper points
- Narrow, flexible taper accesses curved canals
- Great for dental abscess procedures

Never use to deliver irrigating materials or endodontic chemistries.

Attach to the Ultradent™ Luer Vacuum Adapter for moisture removal from endodontic canals.

LOK-TITE™	Internal diameter	20pk	50pk
0.014" Capillary	0.36 mm	341	3099
0.019" Capillary	0.48 mm	186	1425



## Micro Capillary™ Tips

- Bright color is easily identified against soft tissues
- The world's smallest molded tips

Attach to the Ultradent Luer Vacuum Adapter for moisture removal of small prep areas and small periodontal pockets.

LOK-TITE™	Tip length	20pk	100pk
0.008" Micro Capillary	5 mm	1120	1802
0.008" Micro Capillary	10 mm	1121	—



## Endo-Eze™ Irrigator Tip

- Provides ideal reach while expressing chemicals towards the canal wall, reducing pressure directly towards the apex
- Comes with a flexible, blunt cannula with a unique, anti-obturating end
- Non-sterile

Designed for: Ultradent™ 5 ml syringe.

	Tip length	20pk
27 ga (0.40 mm) Endo-Eze Irrigator	25 mm	207



22 ga 20 ga 19 ga 18 ga

## Endo-Eze™ Tips

- Great for endodontic procedures such as post cementation and core buildups
- Flexible, strong cannulae
- Bend easily
- Length 19 mm

Designed for: Air/water delivery.  
Use with: TriAway™ Adapter and other Ultradent syringes.

	Bendable tip	20pk	100pk
22 ga - 0.028" Endo-Eze	0.70 mm	348	1431
20 ga - 0.035" Endo-Eze	0.90 mm	347	1430
19 ga - 0.042" Endo-Eze	1.06 mm	346	1429
18 ga - 0.049" Endo-Eze	1.25 mm	345	1428



## WARNING:

- Use recommended endodontic tip • Make sure rubber stopper is in position
- Take extra precaution when not using sideport tips • Make sure tip is not wedged in the canal



### NaviTip™ 29 ga Tips with Single Sideport

- Designed to direct the flow of chemistry through the sideport of the tip before flowing down into the area of the apex, thus reducing the risk of product extrusion
- Flexible, stainless steel cannula easily navigates curved canals
- Bendable tip

**29 ga** delivers paste materials: MTAFlow™, EndoREZ™, Ultrudent EDTA 18% Solution, File-Eze™, ChlorCid™, ChlorCid™ Surf, and UltraCal™ XS.

NOTE: UltraCal™ XS calcium hydroxide paste should only be used with NaviTip 29 ga Single Sideport tips.

LOK-TITE™	Tip length	20pk
29 ga - 0.0129" NaviTip	27 mm	4989
29 ga - 0.0129" NaviTip	25 mm	4990
29 ga - 0.0129" NaviTip	21 mm	4991
29 ga - 0.0129" NaviTip	17 mm	4992
<b>29 ga-29 ga NaviTips</b>	<b>27-17 mm</b>	<b>5143</b>



### NaviTip™ 29 ga Tips

- Provide controlled delivery to the apex
- Flexible, stainless steel cannulae easily navigate curved canals
- Bendable tip

**29 ga** delivers paste materials: MTAFlow™, File-Eze™, Ultrudent EDTA 18% Solution, Consepsis™, Consepsis™ V, ChlorCid™, and ChlorCid™ Surf.

LOK-TITE™	Tip length	20pk	50pk
29 ga - 0.0129" NaviTip	27 mm	5115	1377
29 ga - 0.0129" NaviTip	25 mm	5114	1376
29 ga - 0.0129" NaviTip	21 mm	5113	1374
29 ga - 0.0129" NaviTip	17 mm	5112	1378
<b>29 ga-29 ga NaviTips</b>	<b>27-17 mm</b>	<b>5116</b>	<b>1379</b>



### NaviTip™ 30 ga Tips

- Provide controlled delivery to the apex
- Flexible, stainless steel cannulae easily navigate curved canals
- Bendable tip

**30 ga** delivers solutions: ChlorCid™, Consepsis™, Ultrudent™ Citric Acid 20% Solution, File-Eze™, and Ultrudent™ EDTA 18% Solution.

LOK-TITE™	Tip length	20pk	50pk
30 ga - 0.0118" NaviTip	27 mm	1354	1424
30 ga - 0.0118" NaviTip	25 mm	1250	1423
30 ga - 0.0118" NaviTip	21 mm	1349	1422
30 ga - 0.0118" NaviTip	17 mm	1249	1421
<b>30 ga-30 ga NaviTips</b>	<b>27-17 mm</b>	<b>1351</b>	<b>3319</b>



### NaviTip™ 31 ga Tips with Double Sideport Irrigator

- Double sideports deliver irrigants safely, minimizing the possibility of chemicals being expressed past the apex
- One of the world's smallest cannulae navigate the most intricate canal spaces

Designed for: Consepsis, ChlorCid™, ChlorCid™ Surf, Ultrudent™ Citric Acid 20% Solution, and Ultrudent™ EDTA 18% Solution.

LOK-TITE™	Tip length	20pk	50pk
31 ga - 0.0098" NaviTip	21 mm	5121	5122
31 ga - 0.0098" NaviTip	27 mm	5123	5124



### NaviTip™ FX™ 30 ga Tips

- One-of-a-kind brush cleans, scrubs, and irrigates simultaneously
- Rigid cannula

Designed for: Ultrudent™ Citric Acid 20% Solution, Consepsis™, and Ultrudent™ EDTA 18% Solution.

Listed as an "EXCELLENT" product by a prominent independent research institute.<sup>1</sup>

LOK-TITE™	Tip length	20pk
30 ga - 0.0118" NaviTip FX	17 mm	1452
30 ga - 0.0118" NaviTip FX	25 mm	1454

<sup>1</sup> Clinical Research Associates Newsletter, Volume 29, Issue 1, January 2005.



## Endo-Eze™

### MTAFlow™ White and MTAFlow™ MINERAL TRIOXIDE AGGREGATE REPAIR CEMENT



- Has bioactive apatite-forming properties<sup>2</sup>
- Mixes into a smooth consistency
- Resists washout
- Can be delivered with 29 ga NaviTip™ tip depending on consistency
- Predictable quick setting
- Has an adaptable mixing ratio based on procedure
- Available in white nonstaining formula

Endo-Eze MTAFlow and MTAFlow White mineral trioxide aggregate repair cements have the same unique properties. Both are designed to mix and deliver easily with your desired consistency. When using the NaviTip 29 ga tip you're assured precise placement for apexification, apical plug, resorption, and perforation. MTAFlow White repair cement is ideal for use above the clinical margin because it contains a radiopacity agent that is nonstaining; it will not be visible in the esthetic zone of the tooth.

"MTA cement is a bioactive material. The formation of hydroxyapatite (HA) will cover the surface of the MTA exposed to body fluids, and that layer of HA will no longer look like a foreign material to the living cells. Therefore, the MTA will support healing."<sup>3</sup>

**Warning: MTA has limited antimicrobial properties.  
When MTAFlow cement is used in primary dentition vital pulpotomy, use only sterile water during the procedure.**

<sup>1</sup> realityesthetics.com. <sup>2</sup> Guimarães BM, Vivan RR, Piazza B, et al. Chemical-physical properties and apatite-forming ability of mineral trioxide aggregate flow. *J Endod.* 2017;43(10):1692–1696. doi:10.1016/j.joen.2017.05.005  
<sup>3</sup> Sarkar NK, Caicedo R, Ritwik P, et al. Physicochemical basis of the biologic properties of mineral trioxide aggregate. *J Endod.* 2005;31(2):97-100.

## THE DIFFERENCE YOU CAN FEEL

MTAFlow repair cements have a smooth consistency due to the ultrafine powder and proprietary gel medium. The formulation is resistant to washout, which helps to ensure that the mixture stays right where you place it. Plus, it can be delivered using Ultradent's syringes and tips, ensuring precise placement for effective treatment.



1. Use a cement spatula to remove excess powder. **DO NOT** use powder without leveling at edge of scoop.
2. Shake from top to bottom 3 times. Make sure that gel is in tip end of bottle before expressing.

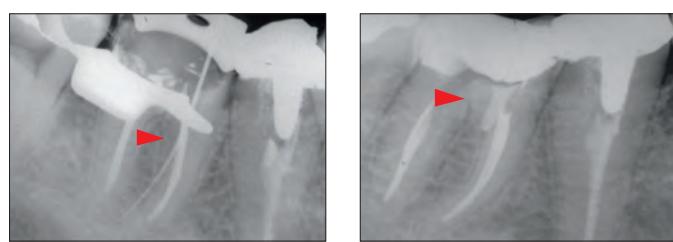


3. After mixing, load the mixed MTAFlow cement into back of clear Skini syringe.
4. Insert the plunger and express a small amount of material through the tip.



5. Mixed Endo-Eze MTAFlow cement inside syringe will be usable for up to 15 minutes.
6. Use thin consistency and a NaviTip™ 29 ga tip to deliver MTAFlow cement inside canal.

After 5 minutes you can lightly rinse and air dry the area and it will not dislodge the MTAFlow cement. MTAFlow cement, mixed and placed inside the Skini syringe, can be used for up to 15 minutes after mixing. Complete cure and strengthening is four weeks.



Perforation located in cervical third of mesial buccal canal.

MTA cement in place showing repair.



### THE RIGHT CONSISTENCY FOR THE RIGHT PROCEDURE

The mixing ratio of the powder and gel components of MTAFlow repair cements are adaptable based on the procedure. MTAFlow White cement's nonstaining formula is specifically designed to be used for procedures like primary dentition vital pulpotomy and pulp capping. After placing MTAFlow repair cement, allow an initial set time of 5 minutes, then cover with Ultra-Blend™ plus liner and restore.

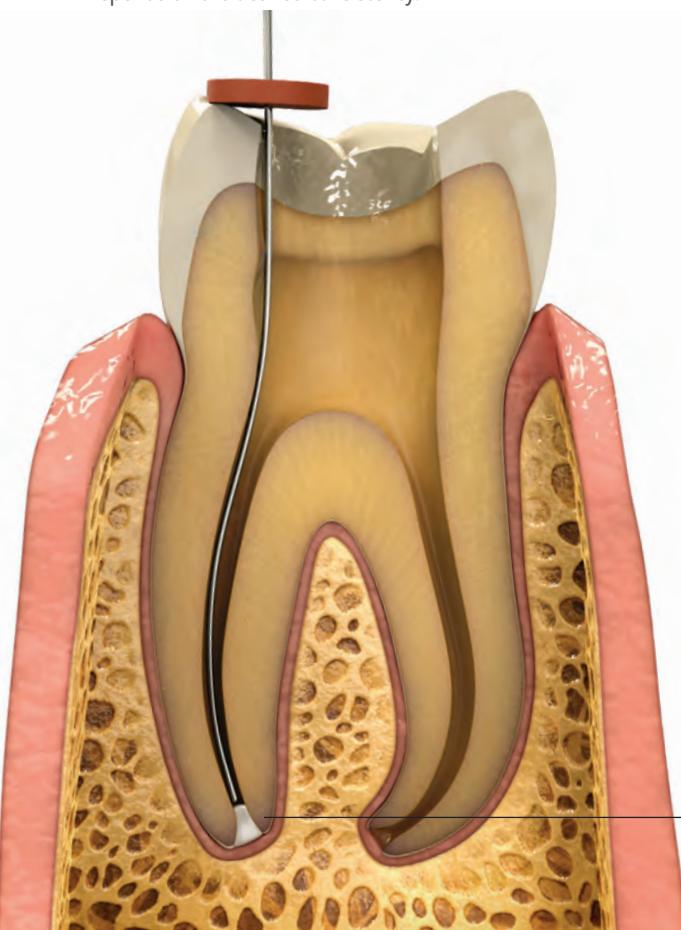
Whatever consistency you need, you can be sure MTAFlow repair cement will be effective, non-gritty, and easy to deliver accurately. More gel or powder may be added at any time during mixing to achieve the desired consistency.

#### MIXING PROPORTION SUGGESTIONS (POWDER AND GEL)\*

Applications	Pulp Capping, Pulp Chamber Perforation, Primary Dentition Vital Pulpotomy	Resorption, Apexification, Apical Plug	Root End Filling
Powder (Measuring Spoon)	2 big ends (0.26 g)	1 big end plus 1 small end (0.19 g)	1 big end plus 1 small end (0.19 g)
Gel Drops	3 drops	3 drops	1 drop**
Consistency	Thick	Thin	Putty
Delivery Tip	Micro 20 ga tip	NaviTip 29 ga tip	Non-syringe delivery

\* More powder or gel can be added to achieve desired consistency.

\*\* Depends on the desired consistency.



### EVERYTHING YOU NEED IN ONE PLACE

MTAFlow repair cement kits come with the essential tools you'll need to mix and deliver cement. The kits contain enough MTA powder and gel to complete 8–10 applications.



#### 4980 - MTAFlow White Repair Cement Kit

1 x Each Technique guide, instructions for use, 2 g MTAFlow powder,  
2 ml MTAFlow gel, and measuring spoon  
10 x SkinI syringes  
10 x Luer Lock caps  
20 x Micro 20 ga tips



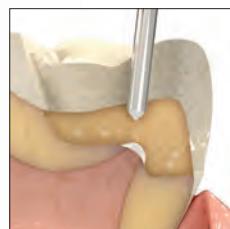
#### 3980-US - MTAFlow Repair Cement Kit

1 x Each Technique guide, instructions for use, 2 g MTAFlow powder,  
2 ml MTAFlow gel, and measuring spoon  
10 x SkinI syringes  
10 x Luer Lock caps  
20 x Micro 20 ga tips

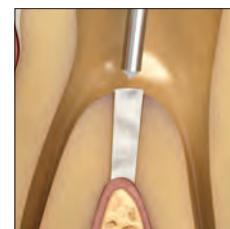


#### 3981-US - MTAFlow Repair Cement Refill

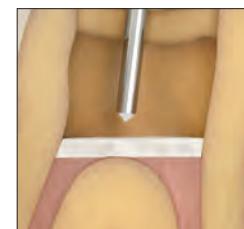
1 x Each Technique guide, instructions for use, 2 g MTAFlow powder,  
2 ml MTAFlow gel, and measuring spoon



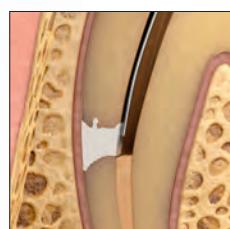
PULP CAPPING



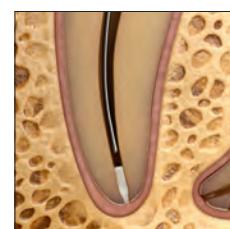
PULP CHAMBER  
FLOOR PERFORATION



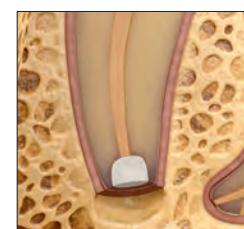
PRIMARY DENTITION  
VITAL PULPOTOMY



APEXIFICATION



APICAL PLUG



ROOT END FILLING



Note: The following lubricants contain peroxides that are not compatible with EndoREZ canal sealer: EndoGel,\* EndoSequence,\* Glyde,\* ProLube,\* RC-Prep,\* and SlickGel ES.\*

## EndoREZ™

CANAL SEALER

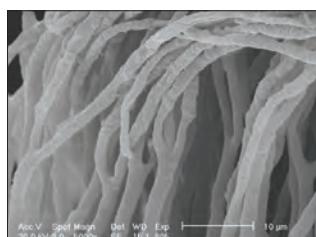
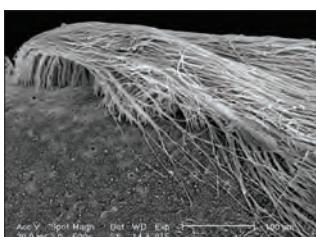


20–30 minute regular set

- The world's first hydrophilic and self-priming resin sealer
- More effective obturation in less time
- Provides a complete, thorough seal<sup>2</sup>
- Has the same radiopacity as gutta percha
- Bonds to resin-based core/composite materials
- Retreatable when combined with gutta percha<sup>3</sup>
- Provides syringe delivery to the apical third

EndoREZ canal sealer minimizes the amount of chair time required for obturation. This thixotropic material has an affinity for the moisture found deep in dentinal tubules and lateral canals<sup>4</sup> provides a complete, thorough seal.<sup>2</sup> Since methacrylate-based EndoREZ canal sealer relies on chemistry rather than heat or pressure to fill the canal, the risk of additional root trauma/fracture is greatly reduced.<sup>5</sup> Additionally, EndoREZ canal sealer is versatile enough to be used as the sealer with any obturation method, e.g., master cone, lateral condensation, or warm gutta percha.

EndoREZ canal sealer contains a special hydrophilic organophosphate methacrylate monomer that increases its hydrophilicity and produces a resin with a strong affinity for moisture with resin penetration of 1,000 µm into tubules.<sup>6</sup>

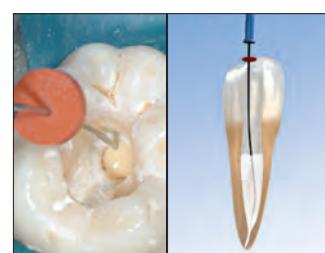
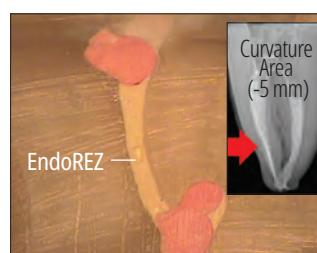
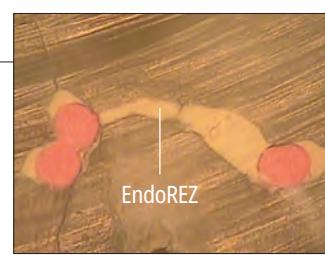
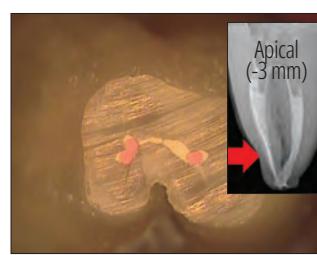
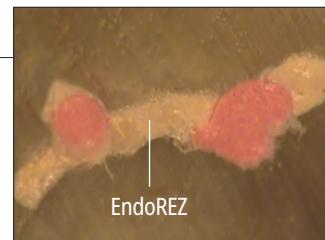
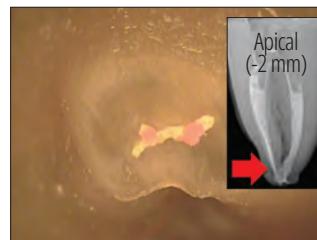


EndoREZ canal sealer penetrates into tubules and adapts to the walls like no other sealer on the market.



EndoREZ canal sealer results in predictable fills that are radiopaque, easily diagnosed, and suitable for retreatment and post-and-core procedures.

The improved flowability of EndoREZ canal sealer allows the sealer to reach the isthmus and intracanal areas during the obturation procedure without using any special device.

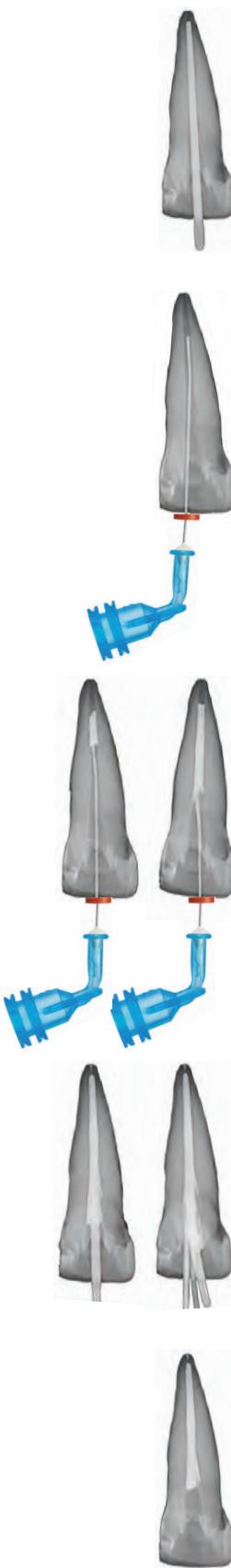


Ultrudent's patented NaviTip™ tip delivers EndoREZ canal sealer into entire anatomy of canal in one step.

\* Trademark of a company other than Ultrudent. **1.** realityesthetics.com. **2.** Zmener O, Pameijer CH. Clinical and radiographic evaluation of a resin-based root canal sealer: an eight-year update. *J Endod.* 2010;36(8):1311-1314. **3.** Zmener O, Banegas G, Pameijer C. Efficacy of an automated instrumentation technique in removing resin-based, zinc oxide and eugenol endodontic sealers when retreating root canal: an in vitro study. *Endod Pract.* 2005;8:29-33. **4.** Zmener O, Pameijer CH, Serrano SA, Viduera M, Macchi RL. Significance of moist root canal dentin with the use of methacrylate-based endodontic sealers: an in vitro coronal dye leakage study. *J Endod.* 2008;34(1):76-79. **5.** Hammad M, Qualtrough A, Silikas N. Effect of new obturating materials on vertical root fracture resistance of endodontically treated teeth. *J Endod.* 2007;33(6):732-736. doi:10.1016/j.joen.2007.02.004 **6.** Data on file.



### ENDOREZ CANAL SEALER SEQUENCE OF CLINICAL USE



1. Fit gutta percha point to working length. Verify radiographically.

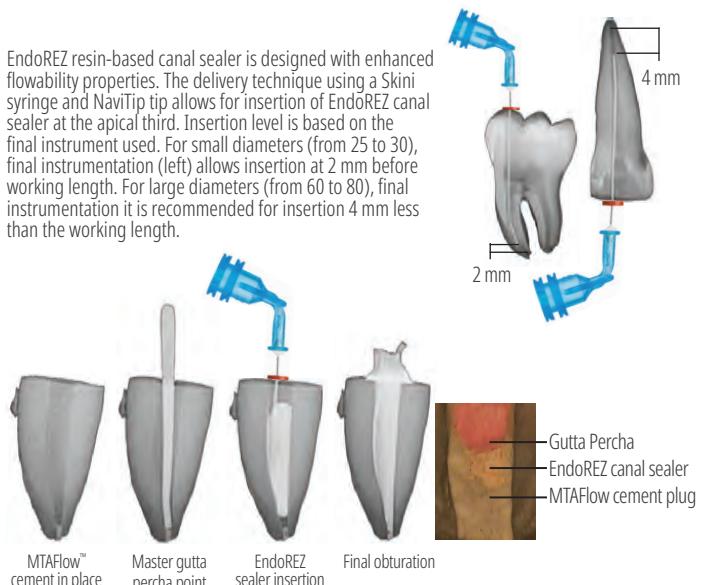
2. Remove moisture from canal space using Capillary tip and Ultrudent™ Luer Vacuum Adapter, followed by a paper point (paper point should be damp 1–3 mm at tip). Canal should be damp, not desiccated, prior to obturating with hydrophilic Endorez sealer. Deliver hydrophilic Endorez sealer using a NaviTip™ 29 ga tip with Single Sideport, inserting the tip 2–4 mm short of working length.

3. Express Endorez canal sealer with light pressure into canal while withdrawing tip. Keep the NaviTip tip orifice buried in material while expressing Endorez canal sealer and withdrawing tip.

4. Slowly insert master gutta percha point cone to working length. Be sure to use a single gentle movement toward apical area. Avoid using a “pump” movement with cone. Passive or cold lateral compactions can be used. Endorez canal sealer will set in about 20–30 minutes.

5. Light cure canal sealer with VALO™ LED curing light for 40 seconds. Initial surface polymerization with curing light is less than 0.3 mm thick and aids in immediate restoration. Trim excess gutta percha with a very hot instrument or using a tip with ultrasonification (no water). Complete restorations following obturation to properly seal canal entrance. Do not leave cotton pellets between obturation and temporary restoration.

Endorez resin-based canal sealer is designed with enhanced flowability properties. The delivery technique using a Skinny syringe and NaviTip tip allows for insertion of Endorez canal sealer at the apical third. Insertion level is based on the final instrument used. For small diameters (from 25 to 30), final instrumentation (left) allows insertion at 2 mm before working length. For large diameters (from 60 to 80), final instrumentation it is recommended for insertion 4 mm less than the working length.



Cases of incomplete formation of apex or reabsorbed foramen can be treated in one visit with an apical MTAFlow cement plug. This will prevent the extrusion of the Endorez canal sealer and create a biological seal at apical foramen.



**5900 - Endorez Syringe Kit**  
1 x 5 ml (8.15 g) syringe  
20 x Mixing tips

### Opalescence™ Endo

NON-VITAL “WALKING BLEACH”  
- 35% HYDROGEN PEROXIDE



Black Mini™ Tip page 134

- 35% hydrogen peroxide
- Easy to place inside pulp chamber
- 1–5 day treatment

For more information on Opalescence Endo,  
see page 173.



## UniCore™ POST, DRILL, AND ACCESSORY POST SYSTEM

2024<sup>1</sup>  
REALITY  
REALITY'S  
EXCELLENCE

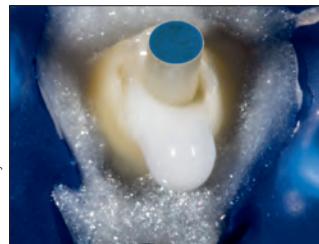


- Superior strength<sup>4</sup>
- Esthetic and radiopaque
- Color-matched drills and posts
- Ultradent's UniCore "Kit of Kits" provides all items needed for post requirements
- Accessory Posts allow for better adaptation in flared or oval canals

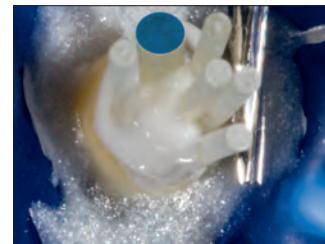
UniCore Posts are composed of glass fibers. Unidirectional UniCore glass fiber posts have a flexural strength similar to dentin.<sup>3</sup> The gentle taper of the UniCore Post corresponds to the natural anatomy of the tooth and perfectly matches the post space created by the UniCore Drill. The five sizes and colors of UniCore Posts correspond to those of the UniCore Drill. The UniCore Drill is unique in its ability to remove obturators while preparing a post chamber that perfectly corresponds to its post. The UniCore Drill features a patented heat-generating tip, which facilitates the removal of fiber posts, rigid carriers, and traditional gutta percha. Its heat-dissipating, diamond-coated collar preserves tooth structure, and its specially designed flutes cut canal walls laterally instead of vertically. UniCore Accessory Posts are placed alongside the master post to allow better adaptation in the case of flared or oval canals.

	Accessory Post	Size 0	Size 1	Size 2	Size 3	Size 4
Apical Ø	0.4 mm	0.6 mm	0.8 mm	1.0 mm	1.2 mm	1.5 mm
Coronal Ø	0.8 mm	1.0 mm	1.16 mm	1.36 mm	1.56 mm	1.76 mm
Taper	0.26°	2.1°	1.8°	1.8°	1.8°	1.3°
Length	16 mm	19 mm	19 mm	19 mm	19 mm	19 mm
Physical properties <sup>4</sup>				UniCore quartz fiber post		
Flexural modulus of elasticity (GPa)				43–44		
Flexural strength (MPa)				1500–1600		
Tensile strength (MPa)				1200		
Modulus of elasticity at 30° (GPa)				13 (similar to dentin)		
Interlaminate shear strength (MPa)				70–80		

Courtesy of Dr. Carlos Ramos.



UniCore master post in place.



Additional accessory posts.



Final.

For step-by-step use with PermaFlo DC, see page 7.

*"The literature clearly describes the C-Factor conditions that can lead to substantial polymer stress buildup in root canals. It has been estimated that up to 54% of the dentin bond interface can separate, resulting in gap formation and subsequent early failure of the endodontic post and core. When the area of the most coronal aspect of the root canal is over 25% larger than the diameter of the Master UniCore Fiber Post, it is prudent to insert the UniCore Accessory Posts alongside the Master Post to take up the core composite space/volume with longitudinal fiber. This technique is fast and effective. We at the Dugoni School of Dentistry have produced AADR/IADR studies that show the pushout strength increases when the core composite volume is decreased by displacing it with Accessory Fiber Posts. For just a few dollars more, the dentist can assure maximum robust adhesion to dentinal walls as well as create a more substantial core to prepare for the final crown. Flexural strength, anti rotation/pull-out resistance, and compressive strength are all enhanced with these great new UniCore Accessory Posts."*

—DR. PATRICK L. ROETZER, DDS, FICD, FACD – UNIVERSITY OF THE PACIFIC,  
DUGONI SCHOOL OF DENTISTRY – CALIFORNIA, USA

1. realityesthetics.com. 2. Lindblad RM, Lassila LV, Salo V, Vallittu PK, Tjäderhane L. Effect of chlorhexidine on initial adhesion of fiber-reinforced post to root canal. *J Dent.* 2010;38(10):796–801. doi:10.1016/j.jdent.2010.06.011.

3. Data on file. 4. Data on file.



### UNICORE™ DRILL Ultrasafe

- Durable drill can be used to up to 15 times to remove gutta percha during post preparation or rigid carrier removal, and up to 5 uses on preexisting fiber post removal
- Drills and posts are color coded according to size, simplifying chairside use
- Patented diamond-coated collar prevents binding in access openings
- Uniquely designed flutes ensure rapid and consistent removal of debris from canal
- Heat-generating tip eases all obturator removal procedures



### UNICORE™ POST Prestressed fibers and bondable

- Microporous surface ensures micromechanical retention
- No chairside chemical treatment required
- Radiopaque beyond highest ISO standards
- Translucent post transmits light to the complete depth of preparation
- Gently tapered design follows natural tooth anatomy
- Can be removed if endodontic retreatment is required



The UniCore Post is noticeably more radiopaque than the leading competitor.<sup>1</sup>



### 7132 - UniCore Starter Kit

1 x Each drill sizes 1 and 2  
5 x Each posts sizes 1 and 2



### 7120 - UniCore Kit "Kit of Kits"

1 x Each drill sizes 1, 2, 3, and 4  
5 x Each posts sizes 1, 2, 3, and 4



### 7133 - UniCore Size 0 Supplement Kit

1 x Drill size 0  
5 x Posts size 0



### 7129 - UniCore Accessory Posts 10pk

0.4 mm Posts size X

### UniCore Drills

Size	mm	1pk	10pk
0	0.6 mm	7134	—
1	0.8 mm	7121	4091
2	1.0 mm	7122	4092
3	1.2 mm	7123	—
4	1.5 mm	7124	—



### UniCore Posts

Size	mm	5pk	25pk
0	0.6 mm	7135	—
1	0.8 mm	7125	4096
2	1.0 mm	7126	4097
3	1.2 mm	7127	—
4	1.5 mm	7128	—



1. Data on file.



# ENDODONTICS

## DermaDam™ Synthetic

DENTAL DAM

2024<sup>1</sup>  
REALITY  
Pain Star Award  
★★★★★

### Zero sensitizing proteins

DermaDam Synthetic dental dam is not made with natural rubber latex, but is designed to be just as flexible and durable as dams that are composed of natural rubber latex.



299 - DermaDam **Medium Synthetic 0.20 mm 20pk**

330 - DermaDam **Medium Synthetic 0.20 mm 60pk**

6"x 6" (15 cm x 15 cm)

## DermaDam™

RUBBER DAM

2024<sup>1</sup>  
REALITY  
Pain Star Award  
★★★★★

- Low dermatitis potential
- Strong and tear resistant
- Powder free to reduce allergic reactions

DermaDam rubber dam is made from pure latex rubber and is powder free, which reduces the possibility of latex reactions. Quality processing ensures a low content of surface proteins.



311 - DermaDam **Medium 0.20 mm 36pk**

6"x 6" (15 cm x 15 cm)



314 - DermaDam **Heavy 0.25 mm 36pk**

6"x 6" (15 cm x 15 cm)

## Ultradent™ Luer Vacuum Adapter



Capillary Tip page 138

Note: Capillary tips should never be used to deliver irrigating materials or endodontic sealers.



- A great time saver for any practice
- Dries canals quickly and efficiently
- Minimizes paper point use

Slide Ultradent's Luer Vacuum Adapter onto any chairside HVE unit to efficiently remove irrigants and debris. Compatible with any Luer tip, the Luer Vacuum Adapter saves time and minimizes the use of paper points. It can be used with Capillary tips, which have tapered, flexible cannulae that reach deep into canals for enhanced cleaning and drying.

### DRIES CANALS FASTER THAN EVER



1. Isolate with rubber dam and OpalDam resin barrier. Irrigate canals through NaviTip™ 31 ga Double Sideport Irrigator tip.



2. With Capillary tip attached to vacuum, slide tip deep into canal. Move tip in and out while vacuuming.



3. The Capillary tip allows visibility to see what is coming from inside the canal, easily identifying its content.



4. Insert paper points to verify level of dryness.

"The Luer Vacuum Adapter eliminates the need for fumbling with paper points! And the canals seem to be much drier—we couldn't do without it!"

—DR. JEFF ROSENTHAL — CHESTERLAND, OH



230 - Luer Vacuum **Adapters 10pk**



1375 - TriAway Adapter **Irrigator 20pk**

Potential Considerations: Always verify flow and functionality prior to intraoral use.

## TriAway™ Adapter

Use for controlled administration of water and/or air to depths of tiny cavity preparations, such as minimally invasive operative-type preparations or endodontic preparations. Note: Do NOT use in open canals.

1. realityesthetics.com.



MELISSA AXEN - Left Fork Subway Entrance

# EQUIPMENT

VALO X  
VALO Grand  
VALO  
Gemini EVO  
Gemini Accessories  
Ease-In-Shields  
UltraTect  
Machine III Accessories  
Ultrawave Accessories



# EQUIPMENT

## VALO™ Family

### LED CURING LIGHTS



Reality Five Star Award, 12x Winner (2012–2023)

Cellerant Best of Class, Technology Award, 6x Winner (2012–2015, 2017, 2019)

Dentistry Today Top 50 Technology Products, Readers' Choice Award, 5x Winner (2012, 2015, 2017, 2018, 2019, 2024)

Dentistry Today Top 25 Aesthetic/Restorative Products, Readers' Choice Award, 4x Winner (2020–2023)

Dental Townie Choice Awards, 9x Winner (2014–2017, 2019–2023)

Dental Townie Choice Award "Best New Product", 2x Winner (VALO Grand 2022, VALO X 2023)



VALO X, 10 sec, trans shade



Competitor, 10 sec, trans shade



Competitor, 10 sec, trans shade



Competitor, 10 sec, trans shade



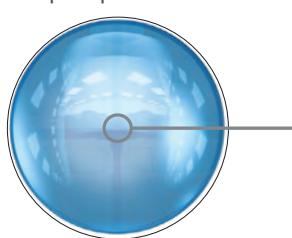
Competitor, 3 sec, trans shade



Competitor, 1 sec, trans shade

VALO X	VALO GRAND	VALO Retired
<b>Actual Lens Size</b>		
12.5 mm (123 mm <sup>2</sup> )	11.7 mm (108 mm <sup>2</sup> )	9.8 mm (74 mm <sup>2</sup> )
<b>LED Chips</b>		
12 LEDs	4 LEDs	4 LEDs
<b>Wavelength</b>		
380 nm – 515 nm	385 nm – 515 nm	385 nm – 515 nm
375 400 425 450 475 500 525 WAVELENGTH (nm)	375 400 425 450 475 500 525 WAVELENGTH (nm)	375 400 425 450 475 500 525 WAVELENGTH (nm)
<b>Power (mW)</b>		
1350 STANDARD 2700 XTRA POWER	970 STANDARD 2260 XTRA POWER	670 STANDARD 1570 XTRA POWER
<b>Irradiance (mW/cm<sup>2</sup>)</b>		
1100 STANDARD 2200 XTRA POWER	900 STANDARD 2100 XTRA POWER	900 STANDARD 2100 XTRA POWER
<b>Joules (J)</b>		
13.5 STANDARD 13.5 XTRA POWER	9.7 STANDARD 6.8 XTRA POWER	6.7 STANDARD 4.7 XTRA POWER
<b>Beam Profile</b>		
<b>12 mm Molar Coverage</b>		

Unique glass lens system forms the light's collimated blended beam



1. realityesthetics.com

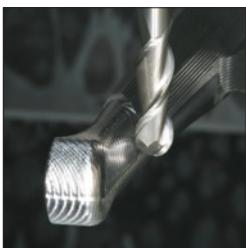


### POWER

The collimation and uniformity of a curing light's beam affects the amount of energy that reaches the restoration site. A dispersed beam will deliver less power than a beam that remains collimated and can lead to undercured restorations and eventual failures. A beam with hot or cold spots yields inconsistent curing, which can compromise restorations and cause sensitivity.

### DURABILITY

Created from a solid bar of high-grade aerospace aluminum, the durable VALO light is virtually indestructible. True unibody construction via machining ensures durability and eliminates weak connection points and increased bioburden. It also allows for excellent heat dissipation and the elegant, ergonomic, streamlined design that enables the VALO light to access areas other curing lights simply cannot reach.



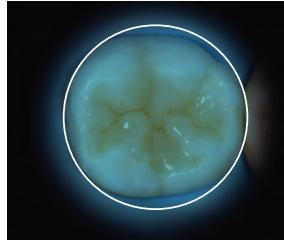
### 5-YEAR MANUFACTURER WARRANTY

We are proud of our manufacturing process and stand behind the quality of the VALO light. Each VALO light comes with a 5-year manufacturer's warranty, so you can be confident in your purchase.

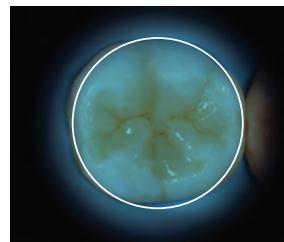
### ACCESSIBILITY

The VALO family of curing lights have a low-profile design to allow easy access to posterior restorations without sacrificing patient comfort.<sup>1</sup> The slim head allows the light to be placed directly over the curing site, no matter where it is in the mouth, ensuring all aspects of the preparation are covered. And the larger lenses give a larger curing surface area, so you can get the right light in the right place.

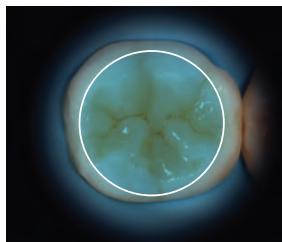
### 12 MM MOLAR COVERAGE



VALO X curing light  
Diameter and Surface Area  
**12.5 mm & 144 mm<sup>2</sup>**



VALO Grand curing light  
Diameter and Surface Area  
**11.7 mm & 107 mm<sup>2</sup>**



VALO curing light  
Diameter and Surface Area  
**9.8 mm & 78 mm<sup>2</sup>**

### DISTAL ACCESSIBILITY

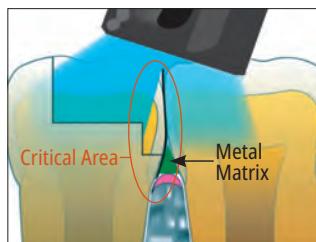


COMPETITOR: The angle of a competitor's 60° light guide causes overextension of jaw and often makes it impossible for light to reach all aspects of preparation.

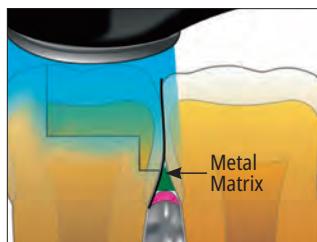


VALO: The VALO light's slim head allows easy and direct access to all curing sites.

### ACCESS WITH A MATRIX



Angled light on a restoration with a matrix band can result in insufficient curing.



The VALO light's direct access and a collimated beam result in complete curing.

1. Moreira RJ, de Deus RA, Ribeiro MTH, et al. Effect of light-curing unit design and mouth opening on the polymerization of bulk-fill resin-based composite restorations in molars. *J Adhes Dent.* 2021;23(2):121-131. doi:10.3290/j.ad.b1079561.



# EQUIPMENT

Note: If you need support or service on your VALO product, please contact Equipment Support at 801.553.4574.

## PRODUCT SPECIFICATIONS

	VALO X	VALO Grand	VALO (Retired)
<b>Range of Light Output (nm)</b>	380 nm–515 nm	385 nm–515 nm	385 nm–515 nm
<b>Peak Wavelengths (nm)</b>	380–420 nm and 420–515 nm	395–415 nm and 440–480 nm	395–415 nm and 440–480 nm
<b>Power (mW)</b>			
<b>Standard</b>	1350 mW	970 mW	670 mW
<b>High Power</b>	NA	1620 mW	970 mW
<b>Xtra Power</b>	2700 mW	2260 mW	1570 mW
<b>Irradiance* (mW/cm<sup>2</sup>)</b>			
<b>Standard</b>	1100 mW/cm <sup>2</sup>	900 mW/cm <sup>2</sup>	900 mW/cm <sup>2</sup>
<b>High Power</b>	NA	1500 mW/cm <sup>2</sup>	1300 mW/cm <sup>2</sup>
<b>Xtra Power</b>	2200 mW/cm <sup>2</sup>	2100 mW/cm <sup>2</sup>	2100 mW/cm <sup>2</sup>
<b>Total Energy Per Cycle</b>			
<b>Standard</b>	13.5 J (10 seconds)	9.70 J (10 seconds)	6.65 J (10 seconds)
<b>High Power</b>	NA	6.46 J (4 seconds)	3.83 J (4 seconds)
<b>Xtra Power</b>	13.5 J (5 seconds)	6.30 J (3 seconds)	4.65 J (3 seconds)
<b>Curing Time Modes</b>			
<b>Standard</b>	10	20/15/10/5	20/15/10/5
<b>High Power</b>	NA	1/2/3/4	1/2/3/4
<b>Xtra Power</b>	5	3	3



## RESTORATIVE SOLUTION



LEARN MORE AT [ULTRADENT.COM](http://ULTRADENT.COM)

	VALO X	VALO Grand	VALO (Retired)
<b>Dimensions</b>			
<b>Lens Diameter</b>	12.5 mm	11.7 mm	9.75 mm
<b>Cordless</b>	8.9 x 0.83 x 0.83 in (226 x 21 x 21 mm)	8 x 1.28 x 1.06 in (203 x 32.5 x 27 mm)	8 x 1.28 x 1.06 in (203 x 32.5 x 27 mm)
<b>Corded</b>	Cord Length: 6 feet (1.8 m)	9.26 x 0.79 x 0.79 in (23.5 x 2 x 2 cm)	9.26 x 0.79 x 0.79 in (23.5 x 2 x 2 cm)
		Cord Length: 6 feet (1.8 m)	Cord Length: 6 feet (1.8 m)
<b>Wand Weight</b>			
<b>Cordless</b>	Unit: 3.8 oz (108 gram) With Batteries: 4.8 oz (136 gram)	Cordless Unit: 5.3 oz (150 gram) With Batteries: 6.7 oz. (190 grams)	Cordless Unit: 5.3 oz (150 gram) With Batteries: 6.7 oz. (190 grams)
<b>Corded</b>	Corded: 5.6 oz (158 gram)	Corded Unit: 8 oz (226 grams)	Corded Unit: 8 oz (226 grams)
<b>Power Operation</b>	Cordless/battery or Corded	Cordless/battery unit Corded Unit	Cordless/battery unit Corded Unit
<b>Battery</b>	Protected, Rechargeable, Lithium-Ion Battery 11MR14/65 3.7V, 900mAH 3.33WH	Rechargeable, Safe Chemistry Lithium Iron Phosphate Battery (LiFePO4) RCR123A, 3.2V, 400mAH 1.28WH	Rechargeable, Safe Chemistry Lithium Iron Phosphate Battery (LiFePO4) RCR123A, 3.2V, 400mAH 1.28WH

\*Irradiance conforms to ISO 10650 when measured with a Gigahertz spectrum analyzer.

## Your complete system for QUALITY RESTORATIONS

### VALO™ X Curing Light

The VALO X curing light ensures a complete and accurate cure of all the products in Ultradent's Restorative Solution. Start to finish, we have everything you need for your restorative workflow.



# VALO™ X

BROADBAND LED CURING LIGHT



## NEW COLORS

- Now you can express your individual style in the office with timeless, vibrant color

## INCREASED LENS SIZE

- 12.5 mm lens covers any tooth while maintaining accessibility and patient comfort

## ACCELEROMETER FUNCTION

- Allows you to quickly and easily move through curing and diagnostic aid modes

## MULTI-CONFIGURATION

- Can be used in a corded or cordless configuration

## HIGH-GRADE AEROSPACE ALUMINUM

- Unibody design is exceptionally durable and allows for excellent thermal management

## SIMPLIFIED INTERFACE

- Curing and diagnostic aid modes are indicated, operated, and activated with top and bottom buttons or by Accelerometer Function

## 12 LED CHIPSET

- Provides high-intensity, broadband light for excellent beam uniformity, curing depth, and beam collimation

## 5-YEAR WARRANTY

- Includes a 5-year Manufacturer Warranty

CURING MODES: Standard Power Mode, Xtra Power Mode | DIAGNOSTIC AID LIGHT MODES: White Light Diagnostic Aid Mode, Black Light Diagnostic Aid Mode

## CYCLING BETWEEN MODES

**CURING MODES:**  
Move the VALO X light forward in a drum tap motion to access and cycle through curing modes.



**DIAGNOSTIC AID LIGHT MODES:**  
Move the VALO X light to the side in a drum tap motion to access and cycle through diagnostic aid light modes.

## LENS ACCESSORIES

## TWO CURING LENSES



ProxiCure™ Ball  
Lens  
**5889**

PointCure™  
Lens  
**5890**

## THREE DIAGNOSTIC AID LENSES



TransLume™  
Lens  
**5891**

Diffuser  
Lens  
**5892**

Interproximal  
Lens  
**5893**

# NEW COLORS

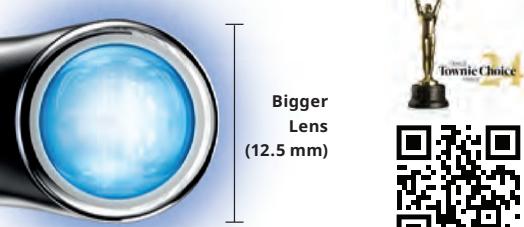
## SAME IMPRESSIVE POWER



# EQUIPMENT

## VALO™ X

BROADBAND LED CURING LIGHT



Scan here for more information on the VALO X light.



- Twelve ultra-high-energy broadband LEDs cure all light-curable dental materials
- Optimally collimated beam delivers consistent, uniform power
- Two curing modes, Standard Power and Xtra Power, accommodate your preferences
- Extremely durable build, crafted with high-grade aerospace aluminum, allows for excellent thermal management
- Simplified interface with curing and diagnostic aid modes included
- Slim, unibody design and ergonomic shape allows unprecedented access to all restoration sites<sup>1</sup>
- Accelerometer Function allows you to quickly change between modes with a drum-tap motion
- Second activation button on the underside allows for intuitive operation
- Accessory lenses for curing and diagnostic aid purposes
- Power adapter allows clinicians to use the light as cordless or corded
- International power supply is suitable for power outlets from 100 to 240 volts

The VALO X light is the curing light reimagined. Its simplified design allows for one-button activation and its Accelerometer Function allows the clinician to cycle between power and diagnostic aid modes with a simple wave of the wand. This eliminates awkward fumbling during a procedure, reduces the likelihood of dropping the instrument, and helps clinicians keep their minds on the task at hand. It uses a custom, multiwavelength light-emitting diode (LED) for producing high-intensity light at 380–515 nm, which is capable of polymerizing all light-curable dental materials while providing excellent breadth of cure and consistent performance. This intensity will also penetrate porcelain and is capable of curing underlying resin cements. The handpiece is designed to rest in a standard dental unit bracket or can be custom-mounted using the bracket included in the VALO X kit.

<sup>1</sup> Moreira RJ, de Deus RA, Ribeiro MTH, et al. Effect of light-curing unit design and mouth opening on the polymerization of bulk-fill resin-based composite restorations in molars. *J Adhes Dent.* 2021;23(2):121–131. doi:10.3290/j.jad.b1079561.



### 5973 - VALO X Kit

1 x VALO X LED curing light  
5 x Accessory lenses

2 x Rechargeable batteries

1 x Battery charger, 1 x Power supply (for battery charger or cord adapter), 1 x Cord adapter

1 x Corded handpiece bracket holder, 1 x Blue-light-blocking light shield, 1 x Sample pack of barrier sleeves

### 6538 - VALO X Colors Kit - GALAXY PURPLE



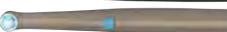
### 6497 - VALO X Colors Kit - AURORA PINK



### 6499 - VALO X Colors Kit - NEBULA GREEN



### 6498 - VALO X Colors Kit - STARDUST GRAY



### 6496 - VALO X Colors Kit - HORIZON RED



### 6519 - VALO X Colors Kit - TWILIGHT BLUE



### 6539 - VALO X Colors Kit - ONYX BLACK



1 x VALO X LED curing light

1 x Diffuser lens

2 x Rechargeable batteries

1 x Battery charger, 1 x Power supply (for battery charger or cord adapter\*), 1 x Blue-light-blocking light shield

1 x Sample pack of barrier sleeves - \*Cord adapter not included



### 4665 - VALO X Barrier Sleeves 100pk

### 5898 - VALO X Barrier Sleeves 600pk

### 5839 - Curing Light Ease-In-Shields Kit

OD 5+ @ 400 – 500nm

1 x Ease-In-Shield, 1 x Adjustable headstrap,  
1 x Microfiber cloth, 1 x Hard case



### 5437 - VALO X Rechargeable Batteries 2pk



### 4951 - VALO X Battery Charging Unit 1pk



### 5189 - VALO X Assembled Cord 1pk



### 4952 - VALO X Power Supply 1pk

**Note: If you need support or service on your VALO product, please contact Equipment Support at 801.553.4574.**

## EQUIPMENT



### VALO™ Grand Cordless

LED CURING LIGHT



- Ultra-high-energy broadband LEDs cure all light-curable dental materials
- Three curing modes, Standard Power, High Power Plus, and Xtra Power, accommodate your preferences
- Optimally collimated beam delivers consistent, uniform power
- Extremely durable, slim, ergonomic shape allows unprecedented access to all restoration sites<sup>2</sup>
- Unique unibody design is extremely durable and lightweight
- Highly efficient LEDs and aerospace unibody aluminum keep wand body cool to the touch
- Second activation button on the underside allows for intuitive operation
- Battery-operated, cordless wand design provides optimal convenience and flexibility
- Operates on environmentally responsible, safe, inexpensive, rechargeable batteries

VALO Grand Cordless curing light uses a custom, multiwavelength light-emitting diode (LED) for producing high-intensity light at 385–515 nm, which is capable of polymerizing all light-curable dental materials. This intensity will also penetrate porcelain and is capable of curing underlying resin cements similar to a quality halogen light. The VALO Grand Cordless curing light uses VALO rechargeable batteries and a battery charger suitable for power outlets from 100 to 240 volts. The handpiece is designed to rest in a standard dental unit bracket or can be custom-mounted using the bracket included in the kit. It can also be stored on a countertop or in a drawer. The VALO Grand curing light is equipped with a sensor that registers movement of the light; when the light is not being used, the VALO Grand curing light will automatically go into sleep mode and when moved will return to the most recently used setting.

**1.** realityesthetics.com. **2.** Moreira RJ, de Deus RA, Ribeiro MTH, et al. Effect of light-curing unit design and mouth opening on the polymerization of bulk-fill resin-based composite restorations in molars. *J Adhes Dent.* 2021;23(2):121–131. doi:10.3290/j.adb.1079561.



#### 5972 - VALO Grand Cordless Kit - Black

1 x VALO Grand LED curing light  
4 x Rechargeable batteries  
1 x Battery charger  
1 x Charging unit power supply  
1 x Handpiece bracket holder  
1 x Blue light blocking light shield  
1 x Sample pack of barrier sleeves



4666 - VALO Grand Cordless Barrier Sleeves 100pk

5896 - VALO Grand Cordless Barrier Sleeves 600pk

#### 3604 - VALO Grand Light Shield 1pk



#### 508 - Blue Light Blocking Glasses 1pk



#### 5839 - Curing Light Ease-In-Shields Kit

OD 5+ @ 400 – 500nm  
1 x Ease-In-Shield  
1 x Adjustable headstrap  
1 x Microfiber cloth  
1 x Hard case



**WARNING:** Only use rechargeable batteries stated in the IFU. Some rechargeable batteries can affect the function of the VALO curing light.

#### 5963 - VALO Grand Rechargeable Batteries 2pk



#### 5962 - VALO Grand Battery Charging Unit 1pk



#### 5961 - VALO Power Supply 1pk



# EQUIPMENT

## VALO™ Grand Corded

LED CURING LIGHT



11.7 mm  
Lens



- Ultra-high-energy broadband LEDs cure all light-curable dental materials
- Optimally collimated beam delivers consistent, uniform power
- Three curing modes, Standard Power, High Power Plus, and Xtra Power, accommodate your preferences
- Extremely durable, slim, ergonomic shape allows unprecedented access to all restoration sites<sup>2</sup>
- Unique unibody design is extremely durable and lightweight
- Highly efficient LEDs and aerospace unibody aluminum keep wand body cool to the touch
- Second activation button on the underside allows for intuitive operation
- International power supply is suitable for power outlets from 100 to 240 volts; no batteries needed

VALO Grand Corded LED curing light uses a custom, multiwavelength light-emitting diode (LED) for producing high-intensity light at 385–515 nm, which is capable of polymerizing all light-curable dental materials. This intensity will also penetrate porcelain and is capable of curing underlying resin cements. The VALO Grand curing light has a medical-grade, international power supply and is suitable for power outlets from 100 to 240 volts. The handpiece is designed to rest in a standard dental unit bracket or can be custom-mounted using the bracket included in the kit.

**1.** realityesthetics.com. **2.** Moreira RJ, de Deus RA, Ribeiro MTH, et al. Effect of light-curing unit design and mouth opening on the polymerization of bulk-fill resin-based composite restorations in molars. *J Adhes Dent*. 2021;23(2):121–131. doi:10.3290/j.ad. b1079561.

Note: If you need support or service on your VALO product, please contact Equipment Support at 801.553.4574.



### 5971 - VALO Grand Corded Kit

1 x VALO Grand LED curing light - 7' cord  
1 x Power supply with universal plugs - 6' cord  
1 x Handpiece bracket holder  
1 x Blue light blocking shield  
1 x Sample pack of barrier sleeves



4669 - VALO Grand Barrier Sleeves 100pk  
5897 - VALO Grand Barrier Sleeves 600pk



### 508 - Blue Light Blocking Glasses 1pk



### 5839 - Curing Light Ease-In-Shields Kit

OD 5+ @ 400 – 500nm  
1 x Ease-In-Shield  
1 x Adjustable headstrap  
1 x Microfiber cloth  
1 x Hard case

### 1667 - VALO Corded Surface Mounting Bracket 1pk



### 5930 - VALO Power Supply - 6' cord

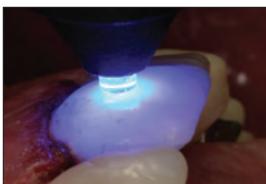
### 5933 - VALO Power Supply - 16' cord



## VALO™ Accessory Lenses

Lenses are reusable and should be disinfected using an intermediate-level disinfectant.

### PointCure™ Lens



The PointCure lens is a clear 2.5 mm diameter lens that is ideal for point curing (tacking) veneers and all porcelain crowns.

5890 - VALO X  
PointCure Lens 2pk



4082 - VALO Grand  
PointCure Lens 2pk



5934 - VALO/VALO Ortho  
PointCure Lens 2pk



### ProxiCure™ Ball Lens



The ProxiCure Ball lens helps to hold the matrix band in interproximal contact during polymerization.

5889 - VALO X  
ProxiCure Ball Lens 2pk



4081 - VALO Grand  
ProxiCure Ball Lens 2pk



5936 - VALO/VALO Ortho  
ProxiCure Ball Lens 2pk



### TransLume™ Lens



The TransLume lens facilitates the visualization and location of cracks, defects in teeth, or restorative materials.

5891 - VALO X  
TransLume Lens 2pk



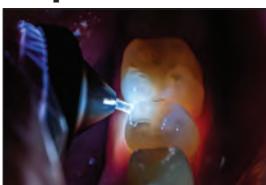
4084 - VALO Grand  
TransLume Lens 2pk



5937 - VALO/VALO Ortho  
TransLume Lens 2pk



### Interproximal Lens



The Interproximal lens is a 1 mm white light lens that allows white light to be placed between teeth for observation of shadows, anomalies, or caries in the interproximal spaces.

5893 - VALO X  
Interproximal Lens 2pk



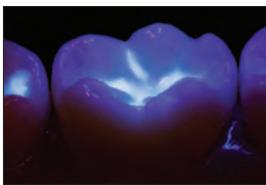
4658 - VALO Grand  
Interproximal Lens 2pk



4629 - VALO/VALO Ortho  
Interproximal Lens 2pk



### Black Light Lens



The Black Light lens aids in detecting the fluorescent particles in resin for easy differentiation from natural enamel.

N/A

4319 - VALO Grand  
Black Light Lens 1pk



5939 - VALO/VALO Ortho  
Black Light Lens 1pk



### White Light Lens



The White Light lens provides a pure, controlled, natural light source to aid in accurate shade matching.

N/A

4628 - VALO Grand  
White Light Lens 2pk



N/A

### VALO X Diffuser Lens

In Black Light diagnostic aid mode, the Diffuser lens gives visual aid of fluorescent particles in various dental resins.  
In White Light diagnostic aid mode, the Diffuser lens provides a pure, controlled, natural light source to aid in accurate shade matching.

5892 - VALO X Diffuser  
White Light Lens 1pk



N/A

N/A



## EQUIPMENT



**GEMINI EVO™**  
810 + 980 DIODE LASER

THE NEXT EVOLUTION IN LASER DENTISTRY

The Gemini EVO diode laser gives you the benefits of a higher 100-watt peak power for faster cutting, less heat, and ultra-clean incisions in soft tissue.



## Gemini EVO™

810 + 980 DIODE LASER



Dentistry Today Top 100, 4x Winner (2016–2020)

Dentistry Today Top 50 Technology Products, Readers Choice 2023

Dentistry Today Editors' Choice Award 2023

Cellerant Best of Class, Technology Award, 3x Winner (2017–2019)

Good Design Award

Dental Product Shopper "Best Product" 2022

- Delivers 100 watts of peak power for faster cutting, less heat, and ultra-clean incisions in soft tissue<sup>1</sup>
- 3-in-1 design allows you to choose the optimal wavelengths for coagulation, ablation, or a combination of both
- Three photobiomodulation adapters (3 mm, 7 mm, and 25 mm) are included so your patients can experience the benefits of laser dentistry
- Streamlined display and user interface gives more intuitive and user-friendly control
- 16 preset procedures are divided into three categories for efficient, intuitive use
- Uses the same tips as the original Gemini laser
- Patented single-use tips and autoclavable handpiece for easy laser use and simple sterilization between procedures
- Wi-Fi connectivity allows for over-the-air updates and dedicated tech support
- Mobile app and Dashboard monitor usage statistics, including ROI and procedure data
- Battery operation and wireless foot pedal allow for convenient movement from operator to operator
- Two-year warranty with an option to extend up to a five-year warranty
- Designed and assembled in the U.S. from U.S./imported components

The revolutionary line of Gemini soft tissue lasers makes laser dentistry easier than ever. With dual wavelength diode lasers delivering up to 100 watts of super-pulsed peak power, Gemini EVO laser offers faster and gentler cutting with greater clinical predictability.<sup>1</sup>

Soft tissue diode lasers are minimally invasive and can perform many procedures without the need for incisions or sutures, resulting in less trauma, bleeding, and discomfort for patients.



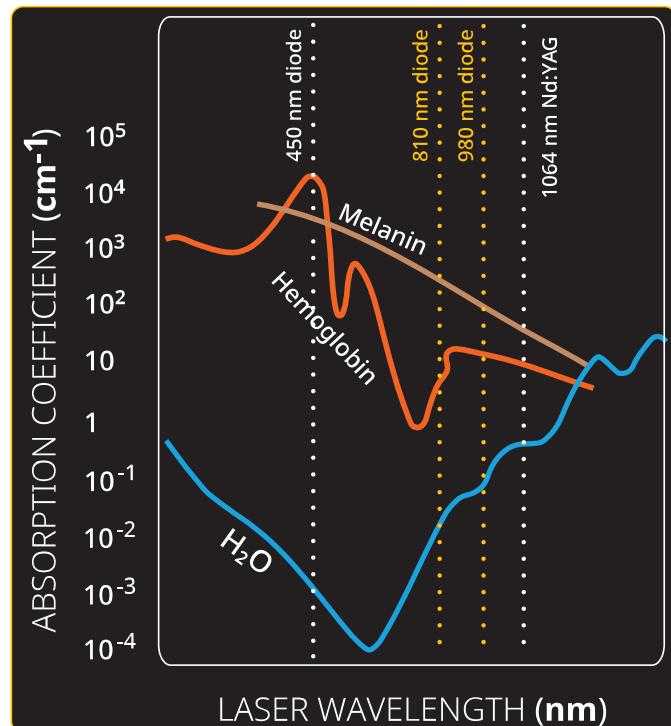
**1.** R Borchers. Comparison of diode lasers in soft tissue surgery using CW and superpulsed mode, an in vivo study. *Int J Laser Dent.* 2011; 1(1):17–27. **2.** Akbulut N, Kursun ES, Turmer MK, Kamburoglu K, Gulsen U. Is the 810-nm diode laser the best choice in oral soft tissue therapy? *Eur J Dent.* 2013;7(2):207–211. doi:10.4103/1305-7456.110174. **3.** S Purnat. Versatility of 810 nm laser in dentistry. *J Laser Health Academy.* 2007; (4).

Additionally, laser procedures often result in less pain and swelling than procedures performed using traditional methods, such as electrocautery or a scalpel, leading to reduced healing time for increased patient comfort and satisfaction. The ability to precisely target and treat specific areas of soft tissue with great accuracy leads to more predictable and consistent outcomes.

BENEFITS	SCALPEL	ELECTROSURGE	LASER
Efficient soft tissue removal	X	X	X
Excellent hemostasis		X	X
Generally safe around implants	X		X
Requires less anesthesia			X
Reduced post-operative pain			X
Less risk of gingival recession	X		X
Reduced swelling and discomfort			X
No suturing required		X	X
Decontaminates wound edges		X	X
Photobiomodulation			X

### WAVELENGTH & TISSUE INTERACTION

Dental soft tissue diode lasers work by emitting a focused beam of light (non-ionizing infrared radiation of 800–980 nm wavelength) that is absorbed by the water, hemoglobin, and pigment molecules within soft tissue. This causes the molecules to heat up and vaporize, allowing the laser to cut through the tissue with great precision. The laser also coagulates, cauterizes nerve endings, and decontaminates surrounding tissue, resulting in improved hemostasis, reduced patient discomfort, and a lower risk of post-op infections.

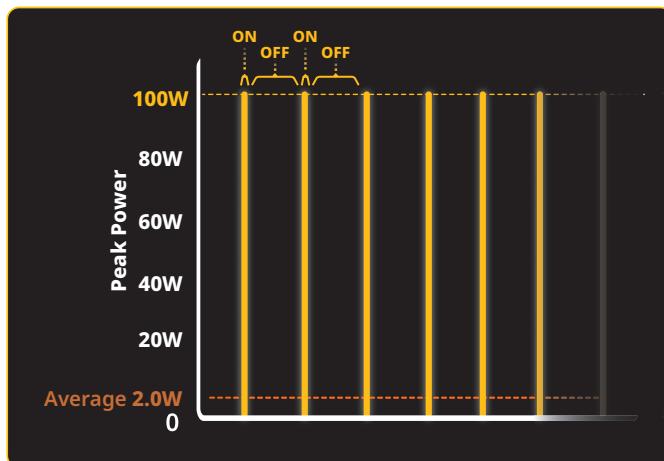


Selecting the optimal wavelength is important for maximizing the laser's efficacy in soft tissue applications. The Gemini EVO laser features 810 nm, 980 nm, and dual wavelength options to combine the best absorption in melanin, hemoglobin, and water to provide the greatest clinical versatility.<sup>2,3</sup>

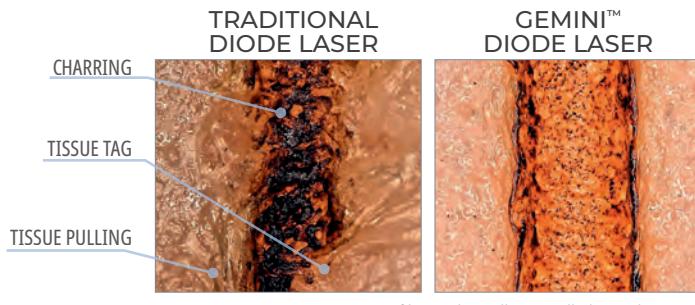


# EQUIPMENT

## PEAK POWER AND SUPER-PULSING

**GEMINI EVO****2.0 W** Average Power OutputGemini EVO Laser  
Pulse Duration: 0.05 ms  
Pulse Interval: 2.45 ms

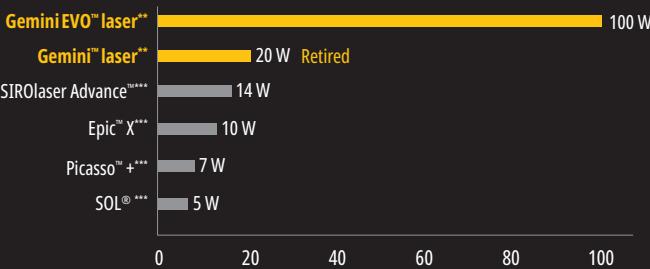
The desired results with the least risk of unwanted thermal damage can be achieved with very short pulses at the highest power density for the shortest time possible.<sup>1,2</sup>



1 Watt Average Power, 400 micron fiber, Robotically Controlled Speed.

Gemini EVO laser's high peak power allows for efficient ablation, while the short pulses allow soft tissues to cool during the procedure, reducing charring and thermal damage to the collateral tissues. This results in increased patient comfort without compromising the speed or effectiveness of the treatment.<sup>1,2</sup>

## DIODE LASER PEAK POWER COMPARISON\*



## PHOTOBIOMODULATION



Gemini EVO laser offers photobiomodulation (PBM) therapy options, allowing clinicians to provide pain relief to patients with various dental conditions or post-operative discomfort. The integrated PBM attachments make it easy for clinicians to deliver light energy to improve cellular function, reduce pain, inflammation, and promote accelerated healing.<sup>3,4</sup>

### The benefits of PBM:

- Temporary pain relief
- Improved local blood circulation
- Temporary relaxation of muscle
- Modulation of inflammation
- Acceleration of soft and hard tissue healing



Photobiomodulation protocols are available to help you and your patients get the most of PBM therapy treatment.



Scan here to connect with other Gemini laser fans on our Facebook page



Scan here to see more info about the Gemini EVO laser on our website

\* Data published by manufacturer. \*\* Peak power in dual wavelength mode. \*\*\* Trademark of a company other than Ultradent. **1.** Goharkhay K, Moritz A, Wilder-Smith P, et al. Effects on oral soft tissue produced by a diode laser in vitro. *Lasers Surg Med.* 1999;25(5):401-406. doi:10.1002/(sici)1096-9101(1999)25:5<401::aid-lsm6>3.0.co;2-6. **2.** Borchers R. Comparison of diode lasers in soft tissue surgery using CW and superpulsed mode, an in vivo study. *Int J Laser Dent.* 2011; 1(1):17-27. **3.** Ross G, Ross A. Photobiomodulation: an invaluable tool for all dental specialties. *J Laser Dent.* 2009;17(3):117-124. **4.** Mármore BC, Brochado FT, Schmidt TR, et al. Defocused high-power diode laser accelerates skin repair in a murine model through REDOX state modulation and reepithelialization and collagen deposition stimulation. *J Photochem Photobiol B.* 2021;225:112332. doi:10.1016/j.jphotobiol.2021.112332.



## WIFI CONNECTIVITY & DASHBOARD

The Gemini EVO Dashboard, you have additional tools, training, and information at your fingertips so you can get the most out of your laser.



### Dashboard Includes:

- Procedure reports
- Helpful videos, support content, and CE-training courses
- PBM protocols
- Software updates and over-the-air support
- Usage statistics
- ROI tracker
- Extended warranty options
- Promotions and more



25 mm Tip

7 mm Tip

3 mm Tip

## BUILT-IN PHOTOBIMODULATION

Three PBM adapters are included for intraoral and extraoral treatment.

- 3 mm
- 7 mm
- 25 mm



## HAPTIC SENSE & TOUCH TECHNOLOGY

- Haptic Sense can be enabled on the foot pedal to add an additional indicator that the laser is firing
- Haptic Touch is available on the handpiece during PBM preset procedures to add physical sensation for the patient during treatment



## GUIDED TOUCH INTERFACE

- Operating the Gemini EVO laser is easier than ever. Only relevant icons light up to help guide you through the interface and make the proper input selection





Courtesy of the late Dr. Stephen Tracey.

#### TOOTH EXPOSURE



Pre-op.



Immediately Post-op.



Immediate Bracket Bonding.

#### CUSPID EXPOSURE



Pre-op.



Immediately Post-op.

**CLINICAL BENEFITS:** Easily remove tissue over an impacted tooth, such as a cuspid or molar, for immediate bracket/button attachment. This quick and painless procedure is typically accomplished with topical anesthetic with little to no bleeding. Bypassing the need to wait for passive eruption can save many months of orthodontic treatment.

**PATIENT BENEFITS:** A quick and painless way to speed up orthodontic treatment without needing to see a specialist.

Courtesy of Dr. Ray Voller.

#### BIOPSY/FIBROMA



Pre-op.



Immediately Post-op.



Post-op.

#### HYGIENE INDICATIONS

- Laser soft tissue curettage
- Reduction of bacterial level (decontamination) and inflammation
- Removal of diseased, infected, inflamed, and necrosed soft tissue within the periodontal pocket
- Removal of highly inflamed edematous tissue affected by bacterial penetration of the pocket
- Sulcular debridement (removal of diseased, infected, inflamed, and necrosed soft tissue in the periodontal pocket to improve clinical indexes including gingival index, gingival bleeding index, probe depth, attachment loss, and tooth mobility)

#### BACTERIAL DECONTAMINATION OR LASER BACTERIAL REDUCTION (LBR)



**CLINICAL BENEFITS:** Using a diode laser for bacterial reduction can significantly reduce the bacterial load in the sulcus and reduce the risk of cross-contamination between sites during hygiene procedures. The procedure is quick and efficient, taking only 10–20 seconds per tooth.

**PATIENT BENEFITS:** Reduced pocket depths and improved overall periodontal health.

#### SULCULAR DEBRIDEMENT OR SOFT TISSUE CURETTAGE



**CLINICAL BENEFITS:** Diode lasers can selectively target and remove diseased tissue in periodontal pockets, promoting healthy tissue regeneration.

**PATIENT BENEFITS:** Reduced pocket depths and improved overall periodontal health.





## EQUIPMENT

Note: If you would like to order the PBM adapters or Gemini EVO foot pedal, please contact Equipment Support at 801.553.4574.

### Gemini EVO™

810 + 980 DIODE LASER



- Delivers 100 watts of peak power for faster cutting, less heat, and ultra-clean incisions in soft tissue<sup>1</sup>
- 3-in-1 design allows you to choose the optimal wavelengths for coagulation, ablation, or a combination of both
- Three photobiomodulation adapters (3 mm, 7 mm, and 25 mm) are included so your patients can experience the benefits of laser dentistry
- Streamlined display and user interface gives more intuitive and user-friendly control
- 16 preset procedures are divided into three categories for efficient, intuitive use
- Uses the same tips as the original Gemini laser
- Patented single-use tips and autoclavable handpiece for easy laser use and simple sterilization between procedures
- Wi-Fi connectivity allows for over-the-air updates and dedicated tech support
- Mobile app and Dashboard monitor usage statistics, including ROI and procedure data
- Battery operation and wireless foot pedal allow for convenient movement from operatory to operatory
- Two-year warranty with an option to extend up to a five-year warranty
- Designed and assembled in the U.S. from U.S./imported components

### 9120 - Gemini EVO Laser Kit

1 x Gemini EVO Laser  
 1 x Foot pedal  
 3 x Safety glasses sets  
 10 x 5 mm disposable fiber tips  
 1 x Power supply  
 3 x PBM Adapters (25 mm, 7 mm, 3 mm)



8983 - Gemini EVO 5 mm Pre-Initiated Tip 25pk  
 8984 - Gemini EVO 7 mm Uninitiated Tip 25pk



9127 - Gemini EVO Handpiece Shell 1pk



9125 - Gemini EVO Power Supply 1pk



### 5837 - Dual Wave Ease-In-Shields Kit

OD 5+ @ 800-900nm OD 6+ @ 900-<980nm  
 OD 7+ @ 980-1064nm OD 6+ @ >1064-1080nm  
 1 x Ease-In-Shield  
 1 x Adjustable headstrap  
 1 x Microfiber cloth  
 1 x Hard case



8985 - Gemini EVO Safety Glasses 1pk



### 9123 - Gemini EVO Intraoral PBM Adapter Kit

1 x 3 mm Photobiomodulation (PBM) adapter  
 1 x 7 mm Photobiomodulation (PBM) adapter



### 9124 - Gemini EVO Extraoral PBM Adapter Kit

1 x 25 mm Photobiomodulation (PBM) adapter  
 2 x Disposable spacer tips  
 1 x Cleaning cloth



8999 - Gemini EVO PBM Spacer Tip Kit 5pk

<sup>1</sup>. Borchers R. Comparison of diode lasers in soft tissue surgery using CW and superpulsed mode, an in vivo study. *Int Laser Dent.* 2011; 1(1):17-27.

Note: The Gemini laser has been retired; however, accessories and replacement parts remain available. If you need support or service on your Gemini Product, please contact Equipment Support at 801.553.4574.

# EQUIPMENT



## Gemini™ Accessories

810 + 980 DIODE LASER



8986 - Gemini Handpiece Shell 1pk



8983 - Gemini EVO 5 mm Pre-Initiated Tip 25pk  
8984 - Gemini EVO 7 mm Uninitiated Tip 25pk



8981 - Gemini Power Supply 1pk



5837 - Dual Wave Ease-In-Shields Kit

OD 5+ @ 800-900nm OD 6+ @ 900-<980nm  
OD 7+ @ 980-1064nm OD 6+ @ >1064-1080nm  
1 x Ease-In-Shield  
1 x Adjustable headstrap  
1 x Microfiber cloth  
1 x Hard case



8985 - Gemini Safety Glasses 1pk



8998 - Gemini PBM Adapter Kit

1 x 25 mm Photobiomodulation (PBM) adapter  
2 x Disposable spacer tips  
1 x Handpiece holder clip  
1 x Cleaning cloth



8999 - Gemini PBM Spacer Tip Kit 5pk



**EASE-IN-SHIELDS™**

Protective Loupe Inserts

WORK WITH YOUR LOUPES,  
**UNINTERRUPTED**





**Ease-In-Shields™**  
PROTECTIVE LOUPE INSERTS



- Allow you to wear loupes during laser or curing procedures
- Provide hands-free eye protection so you can use both hands for procedures
- Easy installation: drop in and go
- Lightweight polycarbonate construction



Ease-In-Shields Kit Contents



**5837 - Dual Wave Kit**

OD 5+ @ 800-900nm OD 6+ @ 900-980nm  
OD 7+ @ 980-1064nm OD 6+ @ >1064-1080nm



**5839 - Curing Light Kit**

OD 5+ @ 400 - 500nm



**5832 - Universal Soft Tissue Kit**

OD 4+ @ 800-<900nm, OD 6+ @ 900-<980nm,  
OD 7+ @ 980-1064nm, OD 6+ @ >1064-1080nm



**5835 - Universal Hard Tissue Kit**

OD 4+ @ 1800 - 3000 nm, OD 5+ @ 1980 - 2550 nm,  
OD 6+ @ 10600 nm



**5836 - CO<sub>2</sub> Kit**

0.3<OD<0.49 @ 520-535nm  
OD 6+ @ 9000-11000nm



**5838 - Diode Soft Tissue Kit**

OD 5+ @ 800-830nm



**5843 - Pink Diode Soft Tissue Edition Kit**

OD 5+ @ 800-830nm



**5842 - Multi-Wave Kit**

OD 8+ @ 180 - 385 nm, OD 4+ @ 795 - <840 nm,  
OD 5+ @ 840 - <960 nm, OD 7+ @ 960 - 1400 nm,  
OD 4+ @ >1400 - <3000 nm, OD 6+ @ 10600 nm



**5844 - Clear CO<sub>2</sub> Kit**

OD 5+ @ 190 - 390nm  
OD 6+ @ 9000 - 11000nm



**5845 - Tri-Wave Kit**

OD 4+ @ 440-475 nm, OD 2+ @ 655-665 nm,  
OD 4+ @ 960-995 nm



**5846 - Nd:YAG and Er:YAG Kit**

OD 6+ @ 1010-1030 nm, OD 7+ @ 1030-1070 nm,  
OD 6+ @ 1070-1080 nm, OD 4+ @ 1800-3000 nm



# EQUIPMENT

## UltraTect™

PROTECTIVE EYEWEAR

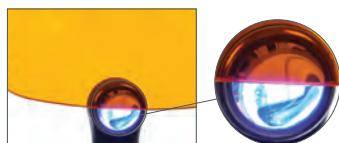


UltraTect protective eyewear is made for the modern dental environment. The high-quality, lightweight frames and polycarbonate lenses are both comfortable and durable, and they meet ANSI and CE safety standards for protection against impact injuries and chemical exposure. Clinicians, assistants, and patients all benefit from the safety and comfort of UltraTect eyewear.

**Note: Do not use for laser protection.**



Glasses are flexible and impact resistant for ultimate durability.



Orange lenses protect against the blue light generated by the VALO™ curing lights.

**914 - Black-Green Frame/Gray Lens 1pk**

**501 - Black Frame/Clear Lens 1pk**

**508 - Black Frame/Orange Lens 1pk** (Blue Light Blocking Glasses)

## Machine III/Ultravac Accessories

### Ultrasep™ III

MOLD RELEASE



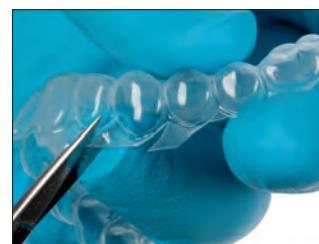
- Quickly and easily removes vacuum-formed parts
- Minimizes distortion and reduces defects
- Does not contain CFC propellants or solvents
- Provides outstanding surface coverage
- Does not contain color and is nonstaining

**176 - Ultrasep III 1pk**

## Ultradent™ Ultra-Trim

SCALLOPING SCISSORS

- Precisely trims tray border around interdental papilla
- Spring-loaded to minimize finger fatigue
- Grips tray material easily
- Made of durable stainless steel



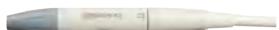
**605 - Ultradent Ultra-Trim Scalloping Scissors 1pk**

Note: If you need service or repair on your Ultrawave product, please contact Equipment Support at 801.553.4574.

## EQUIPMENT



### Ultrawave™ Accessories



F12617 - Ultrawave XS LED Handpiece 1pk



F12101 - Ultrawave Handpiece 1pk

### Ultrawave™ Acteon®\* Satelec®\* Wrenches

F00446 - Flat Wrench



F81330 - Ultrawave Wrench

### Ultrawave™ Acteon®\* Satelec®\* Tips

- Corrosion resistant: steel alloy is resistant to corrosion caused by decontamination
- Variety of applications: tips are available for scaling, endodontics, periodontal treatment, and restorative procedures
- Tensile strength: each tip is designed to meet the specific requirements of the procedure<sup>1</sup>
- Sterilization: tips are autoclavable and suitable for sterilization
- Ring color correlates with Ultrawave Power Setting

**Scaling** Supragingival and subgingival tips are ideal for standard scaling, as well as cases where high power is needed for tenacious calculus removal.

**Restoration** Ball-diamond tips are ideal for preparing small proximal cavities and allow interproximal treatment while preserving the adjacent tooth.



For supra- and subgingival scaling. Designed for greater power.

F00245 - Ultrawave 1 Slim Scaling Tip 1pk



Recommended for treating simple cases and gross supragingival scaling.

F00246 - Ultrawave 1 Scaling Tip 1pk



For removal of biofilm and soft deposit. Tip is etched in 3 mm increments.

F00254 - Ultrawave 10Z Scaling Tip 1pk

**Endodontics & Apical Surgery** These tips are specially designed for all the challenging applications during a root canal treatment, including removal of calcification in the pulp chamber, removal of separated instruments, and retreatment. The innovative tip design improves passive ultrasonic irrigation, facilitating superior performance in root canal cleanings.



Tapered smooth tip for retreatment and instrument fragment removal.

F88018 - Ultrawave ET25 Tip 1pk



Removes the cement interface between post and canal wall.

F88011 - Ultrawave ET20 Tip 1pk



**Periodontal** Periodontal tips allow for a full-mouth periodontal debridement. Deposits are removed by methodically crisscrossing all root surfaces using low lateral pressure combined with very low amplitude. This provides tactile sensitivity unequalled by any other ultrasonic tip for more comfortable treatment.



Most popular tip for treatment of anterior teeth. The guiding edge is used parallel to the pocket.

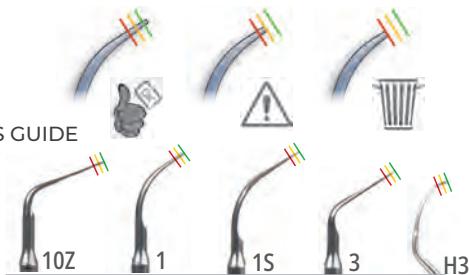
F00369 - Ultrawave H3 Tip 1pk



Recommended for examining and maintenance of moderate to deep pockets or furcations.

F01001 - Ultrawave TK1-1S Tip 1pk

#### TIP EFFECTIVENESS GUIDE



\* Acteon® and Satelec® are trademarks of Satelec, a company of Acteon Group. 1. Data on file.



# ultrapro™ Tx

## TRUE INNOVATION FOR EVERY POLISHING NEED



It's a complete line for your practice. Our Ultrapro™ Tx Air handpiece and the Ultrapro™ Tx Cordless handpiece are designed to be light, ergonomic, and comfortable. Plus, they work with nearly any DPA for high versatility. Our Ultrapro™ Tx Sweep™ DPA significantly reduces splatter,<sup>1</sup> a truly innovative solution as part of the whole Ultrapro Tx product line.

1. Data on file.

Ultrapro Tx, see pages 120–121.



AMY HIBBARD - Cedar Breaks National Monument

# ETCH AND BOND

Ultra-Etch  
Peak SE Primer  
Peak Universal Bond  
PQ1  
Peak-ZM Primer  
Ultradent Porcelain Repair Kit  
Ultradent Porcelain Etch  
Silane  
Ultra-Blend plus  
Consepsis



# ETCH AND BOND

The industry leader for more than 35 years

## Ultra-Etch™

ETCH AND RINSE ETCHANT



Blue Micro™ Tip page 135



Inspiral™ Brush Tip page 135



### 163 - Ultra-Etch Syringe Kit 4pk

4 x 1.2 ml (1.584 g) syringes  
20 x Blue Micro tips

### 167 - Ultra-Etch Syringe Kit 20pk

20 x 1.2 ml (1.584 g) syringes  
40 x Blue Micro tips



### 383 - Ultra-Etch IndiSpense™ Syringe Kit

1 x 30 ml (39.6 g) IndiSpense syringe  
20 x 1.2 ml empty syringes  
20 x Blue Micro tips



### 164 - Ultra-Etch Syringe 4pk

### 168 - Ultra-Etch Syringe 20pk

### 1407 - Ultra-Etch Syringe 50pk

1.2 ml (1.584 g) syringes



### 685 - Ultra-Etch IndiSpense Syringe 1pk

30 ml (39.6 g) syringe



### 129 - Ultra-Etch Empty Syringe 20pk

1.2 ml (1.584 g) empty syringes

Listed as a "CAN'T LIVE WITHOUT" product by a prominent independent research institute for more than 20 years.<sup>7</sup>

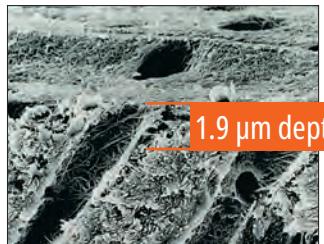
- Self-limiting<sup>2</sup> on dentin
- Penetrates smallest fissures and won't run on a vertical surface<sup>3</sup>
- Precise placement
- Etch and rinse
- Rinses cleanly, leaves no residue

Ultra-Etch etchant 35% phosphoric acid solution features ideal viscosity, which facilitates precise placement and superior control. It is self-limiting in its depth of etch (average depth of 1.9 µm with 15-second etch),<sup>2</sup> creating an etch pattern that adhesives can penetrate for increased bond strength. Studies demonstrate Ultra-Etch etchant's unique self-limiting chemistry on dentin creates an optimal surface to receive resin.<sup>2,4,5</sup> Though Ultra-Etch etchant is viscous, it can penetrate into the occlusal fissures or vertical surfaces due to physical and chemical properties that promote capillary action. Its ideal viscosity maintains a layer that is thick enough to prevent premature drying.

Ultra-Etch etchant is indicated for use on dentin and enamel to create optimal bonding surfaces. Ultra-Etch etchant can be used for 5 seconds to remove the salts created by etching porcelain.

**Note:** Do not use phosphoric etchant on metals or zirconia, as this will reduce bond strength.

Courtesy of Dr. Jaleena Fischer-Jessop.



Clinical experience and FE-SEM evaluations show that 15 seconds etch time on both dentin and cut enamel provides optimal condition of both tissues.<sup>2,4,5</sup>

Ultra-Etch etchant's phosphoric acid is proven to be uniquely self-limiting in its depth of etch.<sup>2</sup> Acids with a greater depth of etch than Ultra-Etch etchant go beyond the optimum level and increase the potential for incomplete resin impregnation.<sup>5,6</sup>

"Ultra-Etch etchant has the best consistency and viscosity I've found. I've used it every day in my practice for over 19 years. Etches that come in kits or as samples are never opened ... and some are hard to give away!"

—DR. C. BRADFORD THOMAS – GALVESTON, TX

"I am a self-proclaimed 'bondodontist.' I use Ultra-Etch etchant almost every time I sit down to work. It is perfect—especially the viscosity. It goes where you want it to go and stays there until I rinse it off. Other reps are always bringing me something to try, and it either doesn't flow, flows too much, or doesn't come in a syringe. Enough said."

—DR. DAVID D. MAY – HEMET, CA

1. realityesthetics.com. 2. Perdigão J, Lopes M. The effect of etching time on dentin demineralization. *Quintessence Int.* 2001;32(1):19–26. 3. Data on file. 4. Data on file. 5. Perdigão J, Lambrechts P, Van Meerbeek B, Vanherle G. A FE-SEM study of the ultra-morphology of etched dentin. *J Dent Res* 75 (IADR Abstracts); 1996. 6. Data on file. 7. "Can't Live Without" Clinical Research Associates Newsletter, Volume 21, Issue 7, July 1997.



## Peak™ SE Primer

NO-RINSE SELF-ETCHING PRIMER



Black Mini™ Brush Tip page 134

- When used with Peak Universal Bond adhesive, provides top-rated bond strengths by an independent non-profit dental education and product testing institute<sup>2</sup>
- Delivers fresh, stable chemistry
- Easy, one-coat technique
- Precise and convenient application
- No rinse needed

Peak SE Primer is a self-etching primer mixed and delivered in the unique JetMix™ syringe. JetMix technology separates precise quantities of strong acid (pH 1.2) and optimized priming resin to prevent the hydrolytic breakdown and degradation that occurs with other self-etch chemistries. Components are kept separate until the clinician activates them. The mixed chemistry is stable and can be used for 120 days. Peak SE Primer is used prior to Peak Universal Bond adhesive to achieve unsurpassed bond strengths.<sup>3</sup>

Ideal for light-accessible bonding procedures. The Peak self-etch adhesive system, which includes Peak SE Primer and Peak Universal Bond adhesive, can be used for immediate dentin sealing (IDS) procedures prior to impressions and temporizations.

### FOR INDIRECT BONDING

Courtesy of Dr. Rich Tuttle.



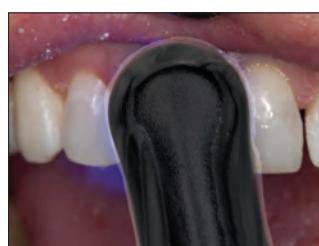
1. Brush Peak SE Primer onto preparation for 20 seconds.



2. Thin/dry for 3 seconds.



3. Apply a puddle coat of Peak Universal Bond adhesive and scrub for 10 seconds into dentin.



4. Thin/dry for 10 seconds and light cure for 10 seconds on Standard Power mode with VALO™ curing light.

## Highest Bond Strengths to Dentin and Enamel<sup>1</sup>

COMPARISON OF 3 SELF-ETCH ADHESIVE SYSTEMS,  
UNIVERSITY OF IOWA COLLEGE OF DENTISTRY<sup>4</sup>



SEM of cut enamel treated with Peak SE Primer. Note the keyhole appearance of the etched enamel rods.



SEM of cut enamel treated with Clearfil® SE Bond.



SEM of cut enamel treated with Adper® Prompt L-Pop.



5135 - Peak SE Primer Syringe 4pk  
1.0 ml (0.993 g) syringes



4541 - Peak Universal Bond Self-Etch Bottle Kit  
1 x 4 ml (4.13 g) Peak Universal Bond bottle  
4 x 1.0 ml (0.993 g) Peak SE Primer syringes  
40 x Black Mini Brush tips  
50 x Mixing Wells  
50 x Micro Applicator brushes

\* Trademark of a company other than Ultradent. 1. realityesthetics.com 2. Clinicians Report, Volume 5, Issue 8, August 2012. 3. Data on file. 4. Vargas M. Ultramorphological evaluation of the resin-dentin-enamel interface produced by three proprietary self-etching adhesive systems. 2007.



## Peak™ Universal Bond

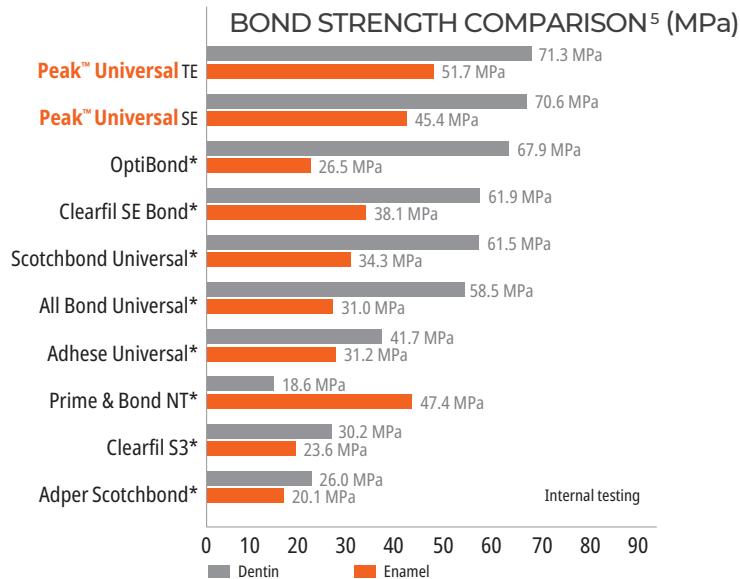
LIGHT-CURED ADHESIVE

2024<sup>1</sup>  
REALITY  
Final Star Review  
5 stars

Inspiral™ Brush Tip page 135

- Features Ultrudent's Dymetech™ phosphate monomer blend for enhanced strength and greater versatility
- Contains 0.2% chlorhexidine to help ensure long-term bond strength<sup>2,3</sup>
- Bonds to all dental substrates
- Ideal for direct and indirect bonding, as well as post and core procedures
- Works with self-etch and total-etch techniques
- Patients experience less post-op sensitivity after being treated with Peak Universal Bond adhesive<sup>4</sup>
- Available in syringe, bottle, and unit-dose delivery

The versatile formulation of Peak Universal Bond adhesive is ideal for direct and indirect bonding, including post and core procedures. Featuring a blend of custom-synthesized phosphate monomers, its viscosity has been optimized for minimal film thickness and superior strength. It is 7.5% filled with an ethyl alcohol solvent carrier and will cure with most dental curing lights, including LEDs.



## MONOMER BLEND

Over decades of refining and improving, Ultrudent's Research and Development team has developed an adhesive that has outperformed the competition.<sup>5</sup> Rather than building around one monomer such as 10-MDP, we realized that a precise combination of monomers was a better solution. Dymetech™ phosphate monomer blend is a proprietary blend of three phosphate monomers and twelve cross-linking methacrylate groups that provides time-tested strength and versatility across virtually all substrates.<sup>5</sup> It is the backbone of the strongest bonding agent we have ever tested.<sup>5</sup>

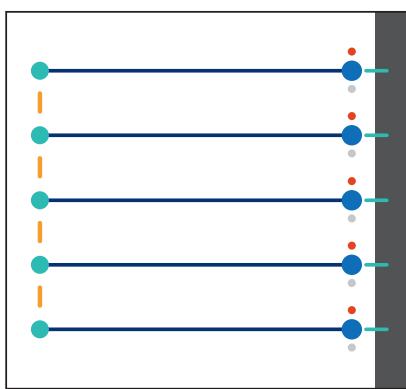


Image 1. 10-MDP

## ILLUSTRATION KEY

- methacrylate groups
- phosphate groups
- other organic structure components
- bond interactions

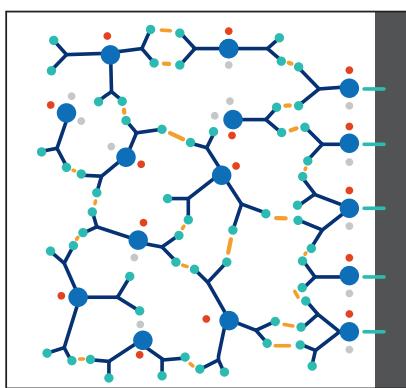


Image 2. Dymetech phosphate monomer blend

Illustrations are meant for demonstration purposes only and may not accurately depict real monomers.

The 10-MDP monomer (Image 1) is a long-chained monomer that consists of a methacrylate group on one end and a phosphate group on the other. This can limit the number of bond interactions. The Dymetech monomer blend (Image 2) has more functional groups (phosphates and monomers) than 10-MDP which creates a greater amount of bond interactions.

\*Trademark of a company other than Ultrudent. **1.** realityesthetics.com **2.** Breschi L, Maravic T, Comba A, et al. Chlorhexidine preserves the hybrid layer in vitro after 10-years aging. *Dent Mater.* 2020;36(5):672-680. doi:10.1016/j.dental.2020.03.009. **3.** Yaghmoor RB, Jamal H, Abed H, et al. Incorporation of MMP inhibitors into dental adhesive systems and bond strength of coronal composite restorations: A systematic review and meta-analysis of in vitro studies. *Jpn Dent Sci Rev.* 2022;58:298-315. doi:10.1016/j.jdsr.2022.09.004. **4.** Data on file. **5.** Data on file.



Thanks to the Dymetech monomer blend, Peak Universal Bond adhesive bonds to dentin, enamel, porcelain, zirconia, metal, and lithium disilicate. It is ideal for direct and indirect bonding procedures as well as post and core procedures. It also works with both self-etch and total-etch techniques. All in all, Peak Universal Bond adhesive has higher bond strengths across more indirect restorative materials than leading competitors.<sup>1</sup>

Illustrations are meant for demonstration purposes only and may not accurately depict real monomers.



Dentin and Enamel



Porcelain/Ceramic



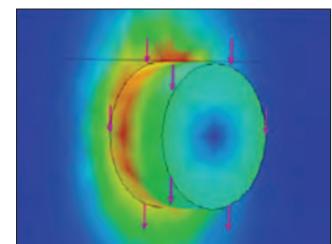
Zirconia



Composite



Metal



Ultradent's shear bond strength testing method has been adopted as the ISO standard (ISO 29022). Many research centers now use this method to determine accurate bond strengths.

1. Siqueira F, Cardenas AM, Gutierrez MF, et al. Laboratory performance of universal adhesive systems for luting CAD/CAM restorative materials. *J Adhes Dent*. 2016;18(4):331–340. doi:10.3290/j.ad.36519.

**5006 - Peak Universal Bond Unit Dose 50pk**  
0.2 ml unit dose



**4543 - Peak Universal Bond Bottle 1pk**  
4 ml (4.13 g) bottle



**4553 - Peak Universal Bond Syringe 4pk**

**4552 - Peak Universal Bond Syringe 20pk**  
1.2 ml (1.24 g) syringes



**4542 - Peak Universal Bond Total-Etch Bottle Kit**

1 x 4 ml (4.13 g) Peak Universal Bond bottle  
4 x 1.2 ml (1.584 g) Ultra-Etch syringes  
40 x Blue Micro tips  
50 x Mixing Wells  
50 x Micro Applicator brushes



**4551 - Peak Universal Bond Total-Etch Syringe Intro Kit**

1 x 1.2 ml (1.24 g) Peak Universal Bond syringe  
1 x 1.2 ml (1.584 g) Ultra-Etch syringe  
20 x Blue Micro tips  
20 x Inspiral Brush tips

**4548 - Micro Applicator Brush 400pk**  
200 x Each color





# ETCH AND BOND

## PQ1™

SINGLE-RESIN BONDING

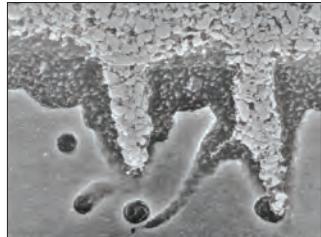
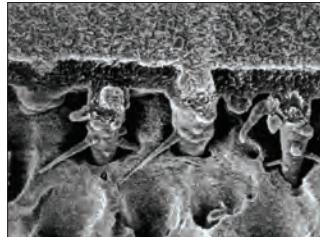


Inspiral™ Brush Tip page 135

- High bond strengths<sup>2</sup> to dentin, creating long-lasting bonds
- Ideal for direct bonding procedures
- Highly filled for convenient placement and ease of use
- Cures with all dental curing lights

PQ1 resin is a syringe-delivered, single-component, light-cured bonding resin that uses ethyl alcohol as a solvent. It is 40% filled and radiopaque.

The unique, patented chemistry of PQ1 resin bonds to dentin/enamel, cast metal, porcelain, and composite. PQ1 resin is also effective for indirect procedures where light curing is possible.



**Note:** Exceptional filler penetration for high-strength bonding.

Courtesy of Prof. Marcos Vargas.

### REFRIGERATE



**641 - PQ1 Syringe 4pk**  
**1806 - PQ1 Syringe 20pk**  
1.2 ml (1.67 g) syringes

## Peak™ -ZM

ZIRCONIA/METAL PRIMER



### Zirconia and metal have met their match!

- Includes a unique blend of phosphate monomers, as well as the MDP monomer
- Significantly enhances bond strengths to resin cements<sup>3</sup>
- Strong bond strengths to zirconia, alumina, and metal restorations

Peak-ZM zirconia/metal primer is specifically designed to provide high adhesion between the zirconia or metal surface and the luting material. Thanks to a chemistry containing the MDP monomer, Peak-ZM primer can increase bond strengths 5 times compared to using a resin cement alone.<sup>3</sup> With Peak-ZM primer, you can feel confident in your zirconia and metal restorations.

**Note:** Not for use with RMGI or GI.

### REFRIGERATE



**2463 - Peak-ZM Zirconia Primer Bottle 1pk**  
4 ml bottle

1. realityesthetics.com. 2. Data on file. 3. Data on file.



## Ultradent™ Porcelain Repair Kit

ETCH, SILANE, BOND RESIN,  
AND FLOWABLE COMPOSITE

2024<sup>1</sup>  
REALITY.  
From Star Award  
5 stars



- Includes all necessary pre-composite placement materials
- Yields the highest porcelain-to-resin bond strengths<sup>2</sup>
- Provides quick, easy repairs without mixing

Porcelain repair procedures are becoming more common. It is financially advantageous and less invasive to repair a chipped porcelain restoration rather than replace it. The Ultradent Porcelain Repair Kit contains all the products and tips needed for composite-to-porcelain, porcelain-to-metal, and porcelain-to-porcelain repairs.

### Rated excellent by a prominent independent research institute.<sup>3</sup>

"Ultradent's Porcelain Repair Kit gives us a good, dependable system for repairing bridges and crowns that chip or break."

—DR. FRED WALDSCHMIDT — BOURBONNAIS, IL

"Ultradent's Porcelain Repair Kit is the only one that works. It includes all the necessary materials and isn't overpriced. All the products are quality."

—DR. LLOYD B. SCHWARTZ — TROY, NY

"The Ultradent Porcelain Repair Kit actually works! I have made repairs, and patients haven't had to come back. With other kits I have tried, the patient ends up having to come back due to refracturing."

—DR. FELICIA CHU — ELGIN, IL

#### REFRIGERATE



#### 1108 - Ultradent Porcelain Repair Syringe Kit

- 1 x 1.2 ml (2.3 g) PermaFlo Dentin Opaquer syringe
- 1 x 1.2 ml (1.584 g) Ultra-Etch syringe
- 1 x 1.2 ml (1.34 g) OpalDam syringe
- 1 x 1.2 ml (1.24 g) Peak Universal Bond syringe
- 1 x 1.2 ml (1.33 g) Porcelain Etch syringe
- 1 x 1.2 ml (0.96 g) Ultradent Silane syringe
- 20 x Black Mini Brush tips
- 20 x Blue Micro tips
- 20 x Micro 20 ga tips
- 20 x Inspiral Brush tips

## STEP-BY-STEP GUIDE FOR PORCELAIN REPAIR

Note: This Quick Guide is meant only to provide an overview; it is not a substitute for instructions provided with individual products. Please carefully read instructions and warnings delivered with products before using them.

Place rubber dam if necessary, and/or cover surrounding teeth and gingival tissue with OpalDam™ light-cured resin barrier using a Black Mini™ tip. Light cure 10 seconds on Standard Power mode with VALO™ curing light.



Roughen ceramic and/or metal surfaces to be repaired using a microabrasion system with 50 µm aluminum oxide particles for at least 60 seconds. Alternatively (although less effective), use a diamond bur.



**Option:** Apply Porcelain Etch with an Inspiral™ Brush tip onto the fractured porcelain surface.



Etch surface for 90 seconds; then suction off gel and carefully rinse with water spray.



**Option:** Apply Ultra-Etch™ etchant for 5 seconds to remove porcelain salts.



Rinse and thoroughly air dry fractured surface.



Apply Silane onto fractured porcelain surface with a Black Mini™ Brush tip.



Let evaporate for 1 minute, and blow with a gentle stream of air until completely dry.



Apply Peak™ Universal Bond adhesive with an Inspiral Brush tip onto fractured surfaces. Air thin gently but thoroughly. DO NOT scrub.



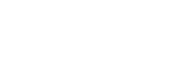
Light cure Peak Universal Bond adhesive for 10 seconds with a VALO LED curing light.



Cover exposed metal with a thin layer of PermaFlo™ Dentin Opaquer composite using a Micro 20 ga tip, then light cure with VALO™ curing light 10 seconds on Standard Power. If using other curing light, cure according to manufacturer's instructions.



Restore fracture by layering light-cured composite.



Finish and polish repaired area.

1. realityesthetics.com. 2. Pameijer CH, Fischer D. Repairing fractured porcelain: how surface preparation affects shear force resistance. *J Amer Dent Assoc.* 1996; 127(2):203-209. 3. Clinical Research Associates Newsletter, Volume 24, Issue 11, November 2000.



# ETCH AND BOND

*"When I use Ultradent Porcelain Etch and Silane, my veneer cases bond securely, and the patient can feel my confidence. At the end of the appointment, I can smile along with my patient."* —DR. TERRY BRAUN — OCALA, FL

## Ultradent™ Porcelain Etch and Silane

### 90-Second Etch—60-Second Silane



Inspirail™ Brush Tip page 135



Black Mini™ Brush Tip page 134

- Etch is easy to control and place
- Yields highest porcelain-to-resin bond strengths<sup>2</sup>
- Silane is a single component
- Use on feldspathic and lithium disilicate (IPS e.max®\*) restorations

Ultradent Porcelain Etch is a viscous, buffered 9% hydrofluoric acid. Silane is a single-component solution.

Porcelain Etch is designed for intraoral or extraoral porcelain etching. Use it for in-office etching of indirect restorations, such as veneers, inlays, etc. After porcelain etching, clean residual debris with Ultra-Etch™ etchant for 5 seconds and rinse thoroughly; follow with Silane application. Studies have demonstrated that Silane, when used with Porcelain Etch and a quality bonding resin, yields the highest bond strength to porcelain when compared with other porcelain bonding products.<sup>2</sup>



1. Etch ceramic bonding surface with Porcelain Etch for 90 seconds, rinse, and dry.



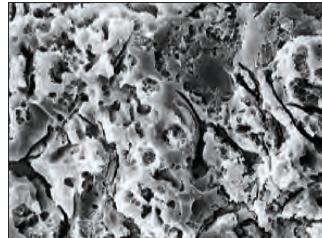
2. Apply Ultra-Etch™ etchant for five seconds to remove porcelain salts and debris formed by hydrofluoric acid etching.



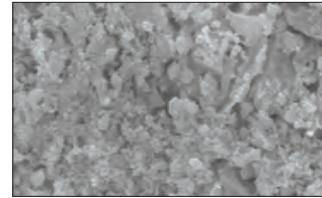
3. Apply a puddle coat of Silane to the inside surface of the prosthesis for 60 seconds, dry, and set aside. Do not rinse. Prosthesis is now ready for luting/cementing.



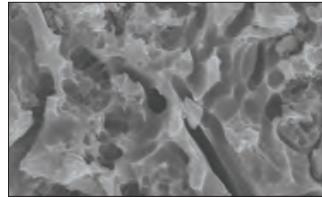
Diamond-cut porcelain surface.



Same porcelain following 90-second etch with Ultradent Porcelain Etch.



Residual silica salts on porcelain, post hydrofluoric acid etching for 90 seconds with Ultradent Porcelain Etch.



Use Ultra-Etch etchant for 5 seconds and rinse to clean residual debris, producing a clean surface for bonding.



Porcelain Etch is delivered from Inspirail Brush tip to prepared porcelain.



After removing porcelain salts with Ultra-Etch etchant, Ultradent™ Silane is applied and dried, followed by Peak™ Universal Bond adhesive.



#### 405 - Porcelain Etch Syringe Kit

2 x 1.2 ml (1.332 g) Porcelain Etch syringes  
2 x 1.2 ml (0.96 g) Silane syringes  
20 x Black Mini Brush tips  
20 x Inspirail Brush tips



#### 406 - Porcelain Etch Syringe 2pk

#### 407 - Porcelain Etch Syringe 4pk

1.2 ml (1.332 g) syringes



#### 410 - Silane Syringe 2pk

1.2 ml (0.96 g) syringes

\* Trademark of a company other than Ultradent. 1. realityesthetics.com. 2. Pameijer CH, Louw NP, Fischer D. Repairing fractured porcelain: how surface preparation affects shear force resistance. *J Amer Dent Assoc.* 1996;127(2):203-209.



## Ultra-Blend™ plus

DENTIN LINER AND PROTECTIVE BASE



Black Micro™ Tip page 135



Black Mini™ Tip page 134

- Bioactive<sup>2</sup> liner and pulp-capping material
- Superior calcium release<sup>3</sup>
- Light durable
- Controlled, precise syringe delivery
- No mixing necessary
- Will not dissolve over time
- Radiopaque
- Highly filled
- Use to cover MTAFlow™ repair cement for pulp capping prior to restoration

Ultra-Blend plus liner is a light-activated, radiopaque material with calcium hydroxide in a urethane dimethacrylate (UDMA) base. It's perfect for pulp capping and will not dissolve over time. Ultra-Blend plus liner is highly filled for minimal shrinkage.



Ultra-Blend plus liner used for pulp capping.

*"We have been using Ultra-Blend plus liner on a daily basis. I use it primarily in deeper cavities as a liner and insulator. The syringe makes it easy to dispense the material, and it hardens quickly with the curing light. It is reliable and has adequate adhesion. I think all of Ultradent's products are excellent."*

—DR. TERRY BRAUN — OCALA, FL

*"Ultra-Blend plus liner, used with Black Micro tips, is the most efficient method for protecting pulp."*

—DR. SHELDON BORUCHOW — AUDUBON, PA

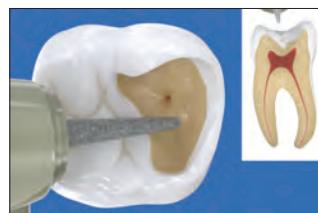
*"Ultra-Blend plus liner has been working well and is easy to use compared to other products."*

—DR. SUZETTE NIKAS — CARMEL, IN

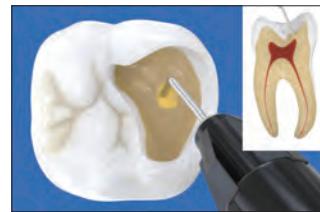
*"Ultra-Blend plus liner application is easy!"*

—DR. MIMI V. JOHNSON — BELLWOOD, IL

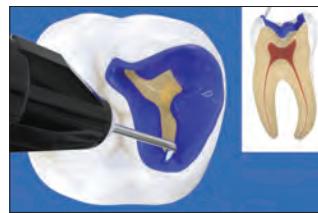
## LIGHT-CURED MATERIAL FOR PULP CAPPING



1. **Small exposure** - Use Ultra-Blend plus liner near pulp (pink) and for small nonhyperemic exposure. For larger exposure and/or hyperemic pulp, endodontic therapy should be considered.



3. **Optional: MTAFlow cement** - If the exposure is larger than a pinhole, apply MTAFlow™ cement onto and slightly around the pulp exposure. Remove excess material with a dry cotton pellet.



5. **Ultra-Etch etchant** - Apply Ultra-Etch™ 35% phosphoric acid etchant solution for 15 seconds. Suction, rinse, and dry until damp. NOTE: If desired, apply Consepsis solution prior to bonding, gently agitating for 60 seconds. Dry until dentin is slightly moist and proceed to the bonding agent.

6. **Dentin bonding/Peak Universal Bond adhesive** - With the Inspira™ Brush tip, apply Peak™ Universal Bond adhesive by painting onto enamel and scrubbing onto dentin for 10 seconds. Air thin at half pressure for 10 seconds and light cure for 10 seconds with the VALO™ curing light on Standard Power mode. Restore with a quality composite.



### 415 - Ultra-Blend plus Syringe Kit

2 x 1.2 ml (1.6 g) Dentin syringes

2 x 1.2 ml (1.68 g) Opaque White syringes

20 x Black Micro tips

20 x Black Mini tips



### 416 - Ultra-Blend plus Dentin Syringe 4pk

### 417 - Ultra-Blend plus Opaque White Syringe 4pk

1.2 ml (1.6 g) Dentin syringes, 1.2 ml (1.68 g) Opaque White

**1.** realityesthetics.com **2.** Pameijer CH, Stanley HR. The disastrous effects of the "total etch" technique in vital pulp capping in primates [published correction appears in Am J Dent 1998 Jun;11(3):148]. Am J Dent. 1998;11:45-54.

**3.** Data on file.



# ETCH AND BOND

## Consepsis™

2% CHLORHEXIDINE ANTIBACTERIAL SOLUTION



Black Mini™ Brush Tip page 134



Blue Mini™ DI Tip page 135

- Reduces potential for postoperative sensitivity<sup>2</sup>
- Helps ensure long-term bond strength<sup>3,4</sup>
- Syringe delivery makes placement easy

Consepsis antibacterial solution is a 2.0% chlorhexidine gluconate solution free of emollients that interfere with bond strength, unlike chlorhexidine mouth rinses.

Minimize post-op sensitivity by thoroughly cleaning the preparation prior to sealing and restoring.<sup>2</sup> Use prior to cementation, luting (provisional and/or permanent), and direct restorative placement. Clean with near-neutral Consepsis solution prior to pulp-capping.

In vivo studies have shown that restorations not treated with chlorhexidine (CHX) exhibited a significant DECREASE in the structural integrity of the collagen network and in bond strength (35% bond strength degradation vs. no degradation in CHX-treated teeth).<sup>3,4</sup>

Use Consepsis antibacterial solution prior to dentin bonding agent application to clean root surface with sensitive root treatment or when bonding.

### WHEN DO YOU USE CONSEPSIS ANTIBACTERIAL SOLUTION?

#### SELF-ETCH - Etch and no rinse

Peak SE + Peak Universal Bond

1. Peak SE Primer



Consepsis solution - **RECOMMENDED**



2. Peak Universal Bond adhesive



#### TOTAL-ETCH - Etch and rinse

Ultra-Etch + Peak Universal Bond

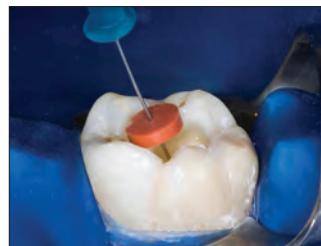
1. Ultra-Etch etchant



Consepsis solution - **RECOMMENDED**



2. Peak Universal Bond adhesive



Use Consepsis solution to disinfect canals during endodontic procedures.



#### 490 - Consepsis Syringe Kit

4 x 1.2 ml (1.116 g) syringes

20 x Blue Mini Dento-Infusor tips

20 x Black Mini Brush tips



#### 404 - Consepsis IndiSpense Syringe Kit

1 x 30 ml (27.9 g) IndiSpense syringe

10 x Blue Mini Dento-Infusor tips

10 x Black Mini Brush tips

20 x 1.2 ml empty syringes



#### 491 - Consepsis Syringe 20pk

1.2 ml (1.116 g) syringes



#### 687 - Consepsis IndiSpense Syringe 1pk

30 ml (27.9 g) syringe

1. realityesthetics.com. 2. Al-Omari WM, Al-Omari QD, Omar R. Effect of cavity disinfection on postoperative sensitivity associated with amalgam restorations. *Oper Dent.* 2006;31(2):165–170. doi: 10.2341/05-8. PMID:16827017 3. Carrilho MR, Geraldeli S, Tay F, et al. In vivo preservation of the hybrid layer by chlorhexidine. *J Dent Res.* 2007;86(6):529–533. 4. Hebling J, Pashley DH, Tjäderhane L, Tay FR. Chlorhexidine arrests subclinical degradation of dentin hybrid layers in vivo. *J Dent Res.* 2005;84(8):741–746.



RACHEL NILSEN - Neffs Canyon

# FINISH

Jiffy Original Composite  
Jiffy Natural Composite  
Jiffy One Single-Use Polishers  
PermaSeal  
PrimaDry  
Jiffy Spin  
Jiffy Universal Ceramic  
Jiffy Natural Universal Ceramic  
Ultradent Diamond Polish Mint

Jiffy Goat Hair Brush  
Jiffy Composite Polishing Brushes  
Jiffy Diamond Strips  
Jiffy Proximal Saw  
DeOx

**Jiffy™**

ORIGINAL COMPOSITE SYSTEM

2024<sup>1</sup>  
REALITY  
Dental Product  
Pros Say Avoall  
★★★★★



- Unique disk shape gives you leverage on working surfaces
- Polishing cups feature a flared, flexible thin-wall design ideal for polishing near the gingiva
- Available with or without autoclavable aluminum blocks\*
- Not made with natural rubber latex
- Autoclavable

**Shaping to Polishing**

Use the green (coarse) Jiffy polishers for quick shaping of composites with overbuilds and slight irregularities. Use the yellow (medium) and then the white (fine) Jiffy polishers for polishing.

**High Shine Polish**

Use the blue (ultrafine) Jiffy HiShine system as an additional polishing step to provide an extra smooth and highly polished finish.

**Final Finish Option**

The unique Jiffy™ Goat Hair Brush used with Ultrudent™ Diamond Polish Mint gives a final esthetic finish to composite or ceramic restorations.

"Jiffy Polishers provide a great finish to my composite restoration in a time-efficient manner."  
—DR. MARK KOENEN – DANVILLE, CA

**4254 - Jiffy Composite Adjusting & Polishing Kit**

3 x Each cups, disks, and points  
(1 coarse, 1 medium, 1 fine)  
2 x Jiffy brushes (1 regular, 1 pointed)

**7010 - Jiffy Composite Polishing Variety Pack**

6 x Cups (2 coarse, 2 medium, 2 fine)  
3 x Disks (1 coarse, 1 medium, 1 fine)  
9 x Points (3 coarse, 3 medium, 3 fine)



**850 - Jiffy Regular Brush 10pk**  
**1009 - Jiffy Pointed Brush 10pk**

**Jiffy Cups, Disks, Points 12pk**

	Cups 12pk	Disks 12pk	Points 12pk
Coarse	7011	7015	7019
Medium	7012	7016	7020
Fine	7013	7017	7021

**Jiffy HiShine Cups, Disks, Points 10pk**

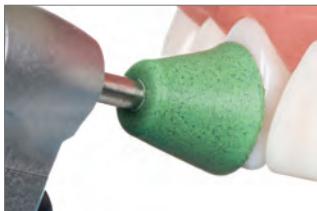
	Cups 10pk	Disks 10pk	Points 10pk
HiShine	7014	7018	7022

\* Ultrudent recommends the use of an aluminum block when autoclaving to prevent warping and deformation.  
1. realityesthetics.com.



## INTRAORAL CONTOURING & SHAPING

Recommended speed: 3,000–8,000 RPM



Jiffy Coarse Green cup shapes cusps, labial/buccal, and cervical surfaces.



Jiffy Coarse Green disk shapes labial/buccal surfaces.



Use Jiffy Coarse Green point to shape occlusal and labial/buccal surfaces.

## INTRAORAL FINISHING & POLISHING

Recommended speed: 3,000–8,000 RPM



Use Jiffy Medium Yellow cup to polish margins and labial/buccal surfaces.



Jiffy Medium Yellow disk polishes labial/buccal surfaces.



Jiffy Medium Yellow point polishes occlusal and labial/buccal surfaces.

## INTRAORAL POLISHING

Recommended speed: 3,000–8,000 RPM



Jiffy Fine White cup creates final polish on cusp, labial/buccal, and cervical areas.



Jiffy Fine White disk creates final polish on labial/buccal surfaces.



Jiffy Fine White point creates final polish on occlusal and labial/buccal surfaces.

## INTRAORAL FINAL POLISHING

Recommended speed: 3,000–8,000 RPM



Use Jiffy Ultrafine Blue HiShine cup as an additional step to create an extra smooth and highly polished finish on cusp, labial/buccal, and cervical areas.



Use Jiffy Ultrafine Blue HiShine disk as an additional step to create an extra smooth and highly polished finish on labial/buccal surfaces.



Use Jiffy Ultrafine Blue HiShine point as an additional step to create an extra smooth and highly polished finish on occlusal and labial/buccal surfaces.

**Jiffy™ Natural**

COMPOSITE POLISHING SYSTEM



- Easily re-creates the luster of natural enamel
- Specially formulated Ultradent diamond grit gives a beautiful finish on any composite material
- Ideal for finishing Ultradent's Mosaic™ universal composite
- Available with or without autoclavable aluminum blocks\*

The Jiffy Natural composite finishing and polishing system consists of malleable spiral-shaped wheels that are designed to easily conform to all tooth surfaces, and a twirl shaped polisher that is ideal for occlusal surfaces.

Recommended speed: 5,000–8,000 RPM



Jiffy Natural Medium Yellow wheels polish all areas except near the gingiva, where a Jiffy Medium cup should be used.

Recommended speed: 5,000–8,000 RPM



Use Jiffy Fine White Natural wheels to create final polish on all areas except near the gingiva, where a Jiffy Fine White Polishing cup should be used.

**6304-1 - Jiffy Natural Composite Polishing Kit**

1 x Jiffy Medium spiral polisher  
1 x Jiffy Fine spiral polisher  
1 x Jiffy Medium twirl polisher  
1 x Jiffy Fine twirl polisher

**6089-1 - Jiffy Natural RA Medium 14 mm Spiral Polishing Wheel 3pk****6090-1 - Jiffy Natural RA Fine 14 mm Spiral Polishing Wheel 3pk**

Note: Do not use Jiffy Natural Universal polishing wheels to polish the labial surface near the gingival line. This can tear the gingiva.

**6305-1 - Jiffy Natural Occlusal Twirl Medium 3pk**  
**6306-1 - Jiffy Natural Occlusal Twirl Fine 3pk**

\* Ultradent recommends the use of an aluminum block when autoclaving to prevent warping and deformation.  
1. [realityesthetics.com](http://realityesthetics.com).



## Jiffy™ One

SINGLE-USE POLISHERS



- No need to re-process the polishers
- Get the luster you and your patients expect with specially formulated diamond grit
- No chance of cross-contamination
- No need to worry about accidentally throwing out multi-use polishers

### SIMPLE, STRAIGHTFORWARD, AND SAFE

Recommended speed: 3,000–8,000 RPM



Polish.



Toss in the bin.



Quick. Easy. Beautiful.

For a one-step polish, start with Medium.  
Need more luster? Use the Fine.

Maximum two-step system for quick and easy polishing.  
The Jiffy One single-use polishing system delivers a beautiful, natural shine while saving you time.



### Jiffy One Cups, Disks, Points 20pk

	Cups 20pk	Disks 20pk	Points 20pk
Medium	7024	7026	7028
Fine	7025	7027	7029



### 7030 - Jiffy One Single Use Polisher Trial Kit

4 x Medium Yellow cups, 2 x Medium Yellow disks, 2 x Medium Yellow points  
4 x Fine White cups, 2 x Fine White disks, 2 x Fine White points



# FINISH

## PermaSeal™

PENETRATING COMPOSITE SEALER



Black Micro™ FX™ Tip page 134

- Bonds to composite and etched enamel
- Seals microcracks
- Protects and revitalizes composite restorations

PermaSeal composite sealer is a light-cured, methacrylate-based, unfilled resin. Its low viscosity allows excellent penetration, and the ultrathin layer minimizes the need for occlusal adjustment.

PermaSeal composite sealer minimizes staining and wear by sealing voids and irregularities created during the polishing process. Place on Class V composite margins to reduce microleakage.<sup>2</sup> PermaSeal sealer bonds well to composite-type provisional restorations such as ExperTemp™ material and can be used to revitalize old composites as well.

### NEW RESTORATIONS



Courtesy of Dr. Dan Fischer.  
Before: Interproximal spaces and slight rotations to be corrected with Peak™ Universal Bond adhesive and composite.



After restoring and polishing, etch 5 seconds and apply PermaSeal composite sealer to seal composite and create a glossy finish. Air thin and light cure for 10 seconds.

### EXISTING RESTORATIONS



Courtesy of Dr. Brett Richins.  
Clean surfaces and margins to be sealed thoroughly with Consepsis™ Scrub slurry, a micro etcher, or freshen with a bur and rinse thoroughly. Etch the enamel immediately adjacent to the restoration and all accessible composite surfaces for 15 seconds. If the enamel is not prepared as described above, etch for 30 seconds. Proceed to PermaSeal sealer application.



Restoration immediately after PermaSeal composite sealer application.



Smooth the provisional surface. Etch for 5 seconds, apply PermaSeal sealer onto surfaces, gently air thin, and light cure for 10 seconds.

*"Hands down, your composite sealer makes the composite look finished, gives it a glossy look, and 'fills' the microscopic pits. It makes or breaks my composites! I can't live without it!"*

—DR. RICHARD J. HAULEY — SALT LAKE CITY, UT



### 631 - PermaSeal Syringe Kit

4 x 1.2 ml (1.3 g) syringes  
10 x Black Micro FX tips

**Note: PrimaDry drying agent is great in conjunction with air drying just prior to PermaSeal composite sealer placement.**

## PrimaDry™

DRYING AGENT



Black Micro FX™ Tip page 134

PrimaDry drying agent contains 99% organic solvents and 1% primer and is optimal for pit and fissure drying and preparation. It rapidly volatilizes moisture content of pits and fissures. The ultrafine primer film allows UltraSeal XT™ plus sealant to flow perfectly into every pit and fissure.

### 716 - PrimaDry Syringe 4pk

1.2 ml (.953 g) syringes



## Jiffy™ Spin

COMPOSITE SHAPING & FINISHING DISKS



- Ultra-thin disks are perfect for interproximal finishing and shaping
- Every component of the Jiffy system works together to create a smooth, esthetic restoration
- Suitable for use on composite materials
- Fine, Medium, and Coarse disks are designed for smoothing and polishing
- Extra-coarse disks allow for rapid shaping and gross removal
- Creates the pristine finish patients love

Recommended speed: 7,000–10,000 RPM

The Jiffy Spin shaping and finishing disk system is a high-quality solution to shape and finish restorations, rapidly and efficiently. Clinicians love the finished results of any set in the Jiffy product line; but if you'd like a faster polish in your repertoire, this is the one to pick out of the lineup.



### 5570 - Jiffy Spin 10 mm Shaping & Finishing Disk Kit

2 x Mandrels, 50 x Extra-Coarse Disks, 50 x Coarse Disks, 50 x Medium Disks, 50 x Fine Disks



### 5571 - Jiffy Spin 14 mm Shaping & Finishing Disk Kit

2 x Mandrels, 50 x Extra-Coarse Disks, 50 x Coarse Disks, 50 x Medium Disks, 50 x Fine Disks



### 5581 - Jiffy Spin Mandrel 10pk

#### Jiffy Spin Shaping & Finishing Disks 75pk

75pk	Extra-Coarse	Coarse	Medium	Fine
10 mm	5582	5572	5573	5574

75pk	Extra-Coarse	Coarse	Medium	Fine
14 mm	5583	5576	5578	5579

**Jiffy™**UNIVERSAL CERAMIC  
ADJUSTING AND POLISHING SYSTEM

- Universal application on all ceramic materials eliminates the need for multiple adjusters and polishers, saving you time and money
- Specially formulated Ultrudent diamond grit provides optimal smoothness and outstanding polishing results while still being gentle on any ceramic material, including zirconia
- Multi-grit diamond particles allow for effective adjustment of ceramics for a truly smooth and high-gloss finish<sup>2</sup>
- Optimized two-step adjusting and polishing sequence
- Maximum diamond retention ensures a long service life
- Autoclavable aluminum block extends the life of the system



**Extraoral Kit for Gross Adjustments and Polishing**  
Use the green (coarse) and yellow (medium) Jiffy grinders and tapers for adjusting of ceramics. The orange Universal wheels and Natural wheels are used to polish.



**Intraoral Kit for Minor Adjustments and Polishing**  
Use the dark orange medium points, cups, and Natural wheels to pre-polish followed by the light orange for a final polish.

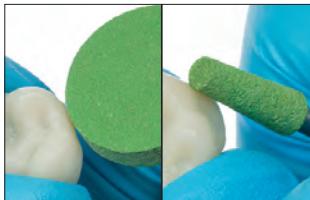
**Final Finish Option**  
The unique Jiffy™ Goat Hair Brush used with Ultrudent™ Diamond Polish Mint gives a final esthetic finish to ceramic restorations.

1. realityesthetics.com 2. Data on file.

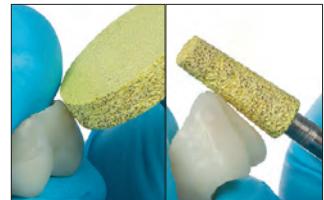
**EXTRAORAL ADJUSTING**

- Use light hand pressure
- Coarse diamond instruments and traditional abrasive stones can generate high heat, causing microfractures, and are not recommended

Recommended speed: 8,000–12,000 RPM



Jiffy Universal Coarse Green grinders are recommended for grinding down sprues and gross adjustment.



Jiffy Universal Medium Yellow grinders are designed for adjustments of lithium disilicate, zirconia, and feldspathic porcelain.

**EXTRAORAL POLISHING**

- Use light hand pressure
- Reduce speed with each step to achieve an ultra-smooth surface

Recommended speed: 7,000–10,000 RPM



1. Use Jiffy HP Medium Universal wheel to pre-polish.



2. Use Jiffy HP Fine Universal wheel to create final polish.

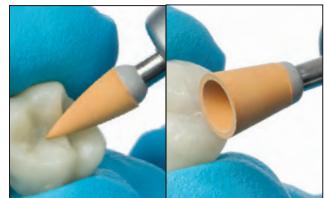
**INTRAORAL POLISHING**

- Use light hand pressure
- Reduce speed with each step to achieve an ultra-smooth surface

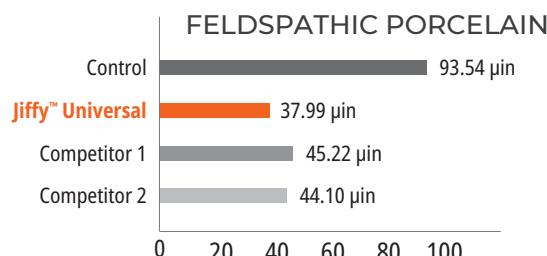
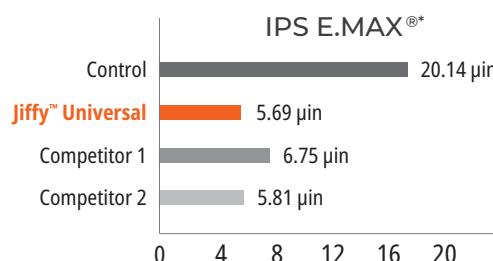
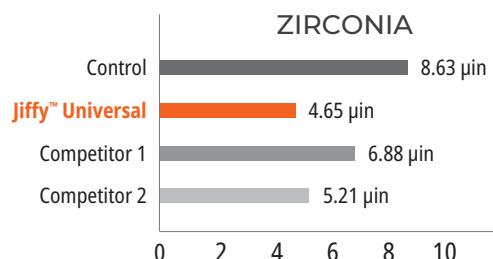
Recommended speed: 5,000–7,000 RPM



1. Use Jiffy Universal RA Medium point and cup to pre-polish.



2. Use Jiffy Universal RA Fine point and cup to create final polish.

SURFACE ROUGHNESS<sup>3</sup>

"These are by far the quickest and best polishing kits I have ever used. The polish on zirconia is incredible. I have never seen a better, more glass-like appearance on zirconia than I have with the Jiffy Universal System."

—DR. ERIC HOLLANDER DDS - AUSTIN, TX

"These polishing kits give a very nice sheen and are better than any others I've used."

—DR. WILLIAM J. DUNBAR DDS - GLENCOE, MN



## 4018-1 - Jiffy Universal Extraoral Adjusting &amp; Polishing Kit

- 2 x Jiffy HP Grinder Wheels (1 coarse, 1 medium)
- 2 x Jiffy HP Grinder Tapers (1 coarse, 1 medium)
- 2 x Jiffy HP Universal Wheels (1 medium, 1 fine)



4238-1 - Jiffy HP Coarse Polishing Grinder Wheel 1pk

4241-1 - Jiffy HP Medium Polishing Grinder Wheel 1pk



4239-1 - Jiffy HP Coarse Polishing Grinder Taper 1pk

4242-1 - Jiffy HP Medium Polishing Grinder Taper 1pk



4236-1 - Jiffy HP Medium Polishing Wheel 1pk

4237-1 - Jiffy HP Fine Polishing Wheel 1pk



## 4019-1 - Jiffy Universal Intraoral Adjusting &amp; Polishing Kit

- 2 x Jiffy RA Universal Points (1 Medium, 1 Fine)
- 2 x Jiffy RA Universal Cups (1 Medium, 1 Fine)
- 2 x Jiffy Natural Spiral Polishing Wheels (1 Medium, 1 Fine)



4108-1 - Jiffy RA Medium Polishing Point 5pk

4109-1 - Jiffy RA Fine Polishing Point 5pk



4234-1 - Jiffy RA Medium Polishing Cup 5pk

4235-1 - Jiffy RA Fine Polishing Cup 5pk

\* Trademark of a company other than Ultradent. 3. Data on file.

**Jiffy™ Natural**

UNIVERSAL CERAMIC POLISHING SYSTEM



- Naturally adapts to any tooth surface, including occlusal anatomy
- Specially formulated Ultradent diamond grit allows for efficient polishing on any ceramic material, including zirconia
- Can be used to refresh older prosthetic cases
- Optimal two-step polishing sequence
- Available with or without autoclavable aluminum blocks\*

The Jiffy Natural Universal ceramic system consists of malleable spiral-shaped wheels that are designed to easily conform to tooth anatomy. Their pliable finger-like extensions easily reach where cups and points can't, and soften super high-gloss finishes for a natural enamel-like result. They are designed to be used in conjunction with the Jiffy Universal ceramic adjusting and polishing system to easily achieve a natural, high-quality finish on all ceramic restorations. The diamond-impregnated wheels are available in both medium and fine grits. The efficient two-step process allows you to easily achieve the most natural finish on any ceramic material including zirconia, lithium disilicate, and porcelain.

**CERAMIC POLISHING**

Recommended speed: 5,000–8,000 RPM

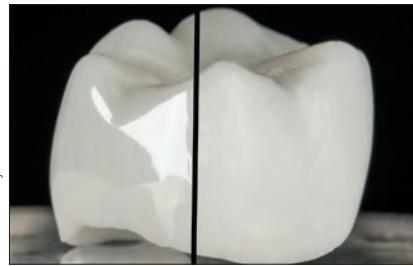


Use Jiffy Natural Universal RA Medium 14 mm wheel to pre-polish all areas except near the gingiva, where a Jiffy RA Medium Universal cup should be used.



Use Jiffy Natural Universal RA Fine 14 mm wheel to create final polish on all areas except near the gingiva, where a Jiffy RA Medium Universal cup should be used.

Courtesy of Dr. Richard Tuttle.



Beautiful, smooth finish achieved on fully contoured zirconia crown in a few minutes' time using the Jiffy Universal Ceramic Adjusting and Polishing System and the Jiffy Natural Universal Ceramic Polishing System.

Note: Do not use Jiffy Natural Universal polishing wheels to polish the labial surface near the gingival line. This can tear the gingiva.

**6080-1 - Jiffy Natural Universal Polishing Kit**

2 x Jiffy RA Medium Natural Universal 14 mm wheels  
2 x Jiffy RA Fine Natural Universal 14 mm wheels

**6082-1 - Jiffy Natural RA Variety 14 mm Spiral Polishing Wheel 6pk****6083-1 - Jiffy Natural RA Medium 14 mm Spiral Polishing Wheel 3pk****6084-1 - Jiffy Natural RA Fine 14 mm Spiral Polishing Wheel 3pk**

\* Ultradent recommends the use of an aluminum block when autoclaving to prevent warping and deformation.



## Ultradent™ Diamond Polish Mint



Black Mini™ Tip page 134

- High-grade white microcrystalline diamond particles
- Unsurpassed esthetic polish
- Ideal for porcelain or composite restorations



Use Ultradent Diamond Polish Mint with Jiffy Goat Hair Brush.

5540 - Diamond Polish Mint Syringe 0.5  $\mu\text{m}$  2pk  
 5541 - Diamond Polish Mint Syringe 1  $\mu\text{m}$  2pk  
 1.2 ml (1.404 g) syringes

## Jiffy™ Goat Hair Brush

- Constructed of fine goat hairs
- Use moderate/firm pressure and high RPM in slow-speed handpiece

Recommended speed: 10,000 RPM



Jiffy Goat Hair Brush is used with Ultradent Diamond Polish for a final esthetic finish on composite or ceramic restorations.

1029 - Jiffy Goat Hair Brush 10pk

## Jiffy™ Composite Polishing Brushes

REGULAR AND POINTED



Each bristle is a polishing instrument. Special fibers are impregnated with abrasive silicon carbide particles.

Easily recognizable by their golden shafts.

- Each bristle contains thousands of silicon carbide polishing particles
- Access and polish occlusal fissures of composites or ceramics
- For composite polishing, "whip" bristles with firm pressure and high RPM in a slow-speed handpiece

Recommended speed: 1,000–3,000 RPM



Use Jiffy Composite Brushes to create a final finish on all surfaces. For best results, apply pressure during polishing.

"The Jiffy brushes are versatile, durable, and dependable."  
 —DR. ANTHONY J. LUPINETTI — YORK, PA



850 - Jiffy Regular Brush 10pk  
 1009 - Jiffy Pointed Brush 10pk



## Jiffy™ Diamond Strips



These finishing strips are flexible, durable, thin, and more aggressive than aluminum oxide strips. The perforated design enhances visibility for more precise contouring. Available in two widths: wide and narrow.



**4670 - Jiffy Diamond Strips Perforated**  
**Narrow Assorted 15pk**

**4674 - Jiffy Diamond Strips Perforated**  
**Wide Assorted 15pk**

*5 x Each Stainless Steel electroplated diamond strips  
(5 Medium, 5 Fine, and 5 Xfine)*

**4671 - Jiffy Diamond Strips Perforated**  
**Narrow Medium 10pk**

**4683 - Jiffy Diamond Strips Perforated**  
**Wide Medium 10pk**

*10 x Stainless Steel electroplated diamond strips*

**4672 - Jiffy Diamond Strips Perforated**  
**Narrow Fine 10pk**

*10 x Stainless Steel electroplated diamond strips*

## Jiffy™ Proximal Saw

The Jiffy Proximal Saw is a very thin stainless steel strip with serrations on one edge. It may be sterilized by autoclave.

**4680 - Jiffy Proximal Saw Stainless Steel 10pk**

*10 x Stainless Steel Ribbon Saw*



HEATHER BOREN - Gold Bar, Moab

# IMPRESSIONS

Thermo Clone VPS  
Thermo Clone VPS Putty  
Thermo Clone Bite Registration  
Thermo Clone Clear Bite Registration  
Thermo Clone Alginate Alternative  
Chromacclone Alginate  
Chromacclone PVS  
Chromacclone PVS Putty



# IMPRESSIONS

## Thermo Clone™ VPS

VINYL POLYSILOXANE IMPRESSION MATERIAL

TAKE A GREAT IMPRESSION THE FIRST TIME



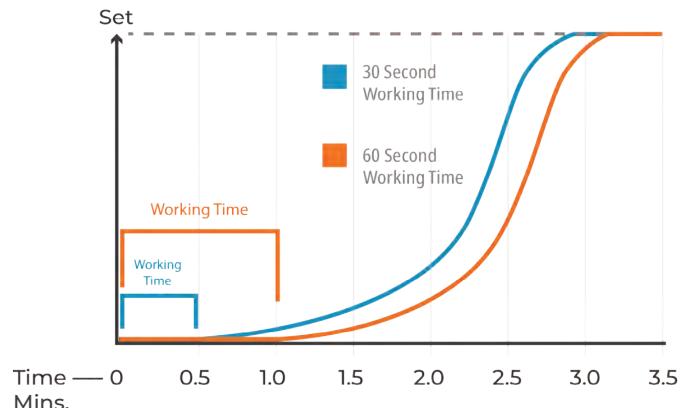
- Thermal-Accelerated Set ensures a long working time and short intraoral setting time
- Increased hydrophilicity reliably captures margins
- Highly thixotropic material flows into all gaps for maximum detail
- High tear strength with superb elastic recovery
- Bubble Gum scent

Thermo Clone impression material is heat-sensitive. This means that as the temperature of the material increases, the setting time decreases. We call this a Thermal-Accelerated Set.

At room temperature, Thermo Clone fast set material stays unset, with a working time of up to 1:00. Once the tray is placed in the patient's mouth, the material rapidly begins to set due to the increased temperature. This accelerated setting time means there's less chance of distortion. See graph in the next column for a comparison of setting times for Thermo Clone heavy body fast set material.

1. realityesthetics.com. 2. Data on file.

### THERMO CLONE HEAVY BODY FAST SET MATERIAL<sup>2</sup>



Note: The Critical Zone denotes the time between when the material starts to set intraorally and when it is completely set. This is when distortions most often occur, resulting in extra lab work, poorly fitting restorations, and costly retakes. Thermo Clone Material minimizes the critical zone.

1. There is no minimum working time; Thermo-Accelerated Set ensures that the material begins to set as soon as it is placed in the patient's mouth.
2. In these examples, with 30-second and 60-second working times, Thermo Clone material was out of the critical zone and fully set at 2:45 mins and 3:15 mins respectively.

The Thermal-Accelerated Set provided by Thermo Clone material gives you a long working time if desired and a short setting time, hence minimal time in the critical zone.

SET TIMES	SET SPEED	WORKING TIME	SET TIME	TOTAL TIME
SUPER LIGHT BODY	FAST	1:00 min	1:15 mins	2:15 mins
	REGULAR	2:15 mins	2:15 mins	4:30 mins
LIGHT BODY	FAST	1:00 min	1:15 mins	2:15 mins
	REGULAR	2:15 mins	2:30 mins	4:45 mins
MEDIUM BODY	FAST	1:00 min	2:15 mins	3:15 mins
	REGULAR	2:15 mins	2:30 mins	4:45 mins
HEAVY BODY	FAST	1:00 min	2:15 mins	3:15 mins
	REGULAR	2:15 mins	2:30 mins	4:45 mins
PUTTY	FAST	2:00 mins	2:00 mins	4:00 mins
BITE REGISTRATION	FAST	0:15 min	0:55 min	1:10 mins
CLEAR BITE REGISTRATION	FAST	0:15 min	0:45 min	1:00 min

Note: Vinyl Polysiloxane (VPS) and Polyvinyl Siloxane (PVS) are one and the same. VPS and PVS can be used interchangeably. They are also an "addition silicone" which contains a platinum catalyst.

Ask about our mix and match  
bulk discount pricing on  
Thermo Clone VPS  
50 ml and 380 ml Cartridges!

## IMPRESSIONS



### Thermo Clone™ VPS 50 ml Cartridges

50 ml	Regular 2pk	Fast 2pk
Super Light	—	4060
Light	4057	4065

2 x 50 ml cartridges  
12 x Each Mixing/IntraOral tips



### Thermo Clone™ VPS 380 ml Jumbo Cartridges



Remove cap.



Attach Thermo Clone  
Mixing tip.



Load mixing machine.

50 ml	Regular 2pk	Fast 2pk
Medium	4058	4066
Heavy	4059	4067

2 x 50 ml cartridges  
6 x Mixing tips



380 ml	Regular 1pk	Fast 1pk
Medium	4068	4070
Heavy	4069	4071

1 x 380 ml cartridges  
1 x Bayonet ring  
10 x Thermo Clone 380 ml mixing tips



50 ml	Fast 10pk
Light	4076

10 x 50 ml cartridges  
48 x Each Mixing/IntraOral tips



### 6065 - Thermo Clone 380 ml Mixing Tip - 50pk

50 x Thermo Clone 380 ml mixing tips  
1 x Bayonet ring



50 ml	Fast 10pk
Heavy	4077

10 x 50 ml cartridges  
30 x Mixing tips



### 4073 - Thermo Clone VPS Putty Kit

1 x Each 200 ml base and 200 ml catalyst and 2 x Scoops





# IMPRESSIONS

## Thermo Clone™ Bite Registration

BITE REGISTRATION MATERIAL

- Intraoral setting time of 55 seconds
- Captures exact detail of patient's occlusal relationship
- Shore A Hardness of 85
- Bubble Gum scent



Thermo Clone Bite Registration material makes a quick, accurate impression for an exact bite registration.

### 4072 - Bite Registration 50 ml 2pk

2 x 50 ml cartridges  
12 x Mixing tips



## Thermo Clone™ Clear Bite Registration

BITE REGISTRATION MATERIAL

- Intraoral setting time of 45 seconds
- Transparent to improve visibility, accuracy, and ease of use
- Shore A Hardness of 62
- An ideal match to ExperTemp™ temporary crown and bridge material when used as a provisional template



The increased accuracy of Thermo Clone Clear Bite Registration material when used as a provisional template makes for temporaries that look and fit more like finished crowns and bridges, increasing patient satisfaction.

### 4079 - Clear Bite Registration 50 ml 2pk

2 x 50 ml cartridges  
6 x Mixing tips



it  
out

## ExperTemp™

TEMPORARY CROWN AND BRIDGE MATERIAL



- 10:1 self-cured chemistry provides exceptional strength, flexibility, and high abrasion resistance<sup>1</sup>
- Fluoresces similarly to enamel<sup>2</sup>
- Low oxygen inhibition at polymerization
- Easily repaired or characterized with a packable composite, a flowable composite, or additional ExperTemp material
- Trims easily and polishes beautifully (polishing optional)
- Available in A1, A2, A3, and Bleach White shades

### PROCEDURE\*

Courtesy of Dr. Jaieena Fischer-Jessop.



1. Prep teeth. Scour with ConsepScrub™ Scrub slurry and STARbrush™ coronal brush.



2. ExperTemp temporary crown and bridge with esthetic translucency.



3. Apply ClearTemp™ LC temporary veneer cement.



4. Use blade to open embrasures without altering margins.



5. ExperTemp material achieves esthetic blend with natural teeth. Three weeks post-op just prior to cementation of permanent veneers.

For more information, see pages 8–9.

1. Data on file. 2. Data on file.



## Thermo Clone™ VPS Alginate Alternative

IMPRESSION MATERIAL



### USE FOR:

- Anatomical models
- Opposing dentition models
- Preliminary impressions
- Fabricating temporary crowns and bridges
- Fabricating simple removable prosthetic restorations
- Producing models for whitening trays, bite trays, and surgical guides
- Fabrication of removable retainers and splints
- Orthodontic work
- Case study models

Thermo Clone Alginate Alternative material flows without slumping and provides great workability. It releases easily from undercuts while capturing clear margins and precise details. You can repour the impression and create multiple models if needed, saving you time and money. All with a pleasant Bubble Gum scent to keep patients happy during the process!

Ease of preparation gives a big advantage over alginate. No powder, mess, or measuring. Anyone in the office can use it, as it goes straight from cartridge to impression tray.

Delivering exceptional dimensional stability, Thermo Clone Alginate Alternative provides analog impression solutions when digital impressions are not the best option. In addition, the scannable material makes it easy to capture digital images without using a powder or contrasting agent.



A Thermal-Accelerated Set means curing begins as soon as it is placed in the patient's mouth—leading to less distortion and imperfections.

### THERMO CLONE ALGINATE ALTERNATIVE

Immediately after  
impression was taken.

24 hours after  
impression was taken.



### ALGINATE COMPETITORS



Note the excellent dimensional stability of Thermo Clone Alginate Alternative 24 hours after the impression was taken. It can be poured immediately or even weeks later if needed.

*Impressions taken with Typodont model.*

50 ml	2pk	10pk
Medium	4327	4328

*2 x 50 ml cartridges, 6 x Mixing tips*



*10 x 50 ml cartridges, 30 x Mixing tips*

380 ml	1pk
Medium	4329

*1 x 380 ml cartridge  
10 x Thermo Clone 380 ml Mixing tips  
1 x Bayonet ring*



THERMO CLONE Alginate Alternative	MIXING RATIO	WORKING TIME	INTRAORAL SETTING TIME	TOTAL SETTING TIME	HARDNESS SHORE
50 ml Cartridge	1:1	1:15 mins	1:15 mins	2:30 mins	A43
380 ml Cartridge	5:1	1:30 mins	1:30 mins	3:00 mins	A45



# IMPRESSIONS

## FOR IMPRESSION TAKING\*

An astringent is a substance that eliminates permeability of epithelium to tissue fluid flow. The result is a dry field, an important tissue management solution. An ideal impression for successful crowns and bridges must accurately capture the preparation margins. This can be ensured only through reliable hemostasis and gingival displacement.

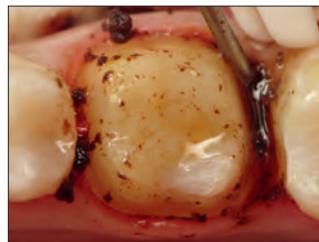
Courtesy of Dr. Jaleena Fischer-Jessop.

### BLEEDING



1. Subgingival preparation with bleeding.

### HEMOSTASIS



2. Scrub Astringedent™ X hemostatic firmly against bleeding sulcus with Metal Dento-Infusor™ tip.

### CLEANING/TESTING



3. Firm air/water spray removes residual coagulum and tests tissue for quality, profound hemostasis.

### DISPLACEMENT



4. Soak Ultrapak™ knitted cord in ViscoStat™ hemostatic, pack, and leave for 5 minutes.

### DRYING/TESTING



5. Remove Ultrapak knitted cord, follow with a firm air/water spray and dry.

### TAKE IMPRESSION



6. Express Thermo Clone VPS impression material.

### RESULT



7. Predictable quality impressions.

\* See IFU for complete instructions.

## HYDROPHILIC

Hydrophilicity ensures precision in your impressions by displacing moisture on all tooth surfaces to capture exact details of teeth.

Hydrophilicity is evaluated based on contact angle, which measures how flat a drop of water spreads over the material. Thermo Clone material is among the industry leaders in hydrophilicity.



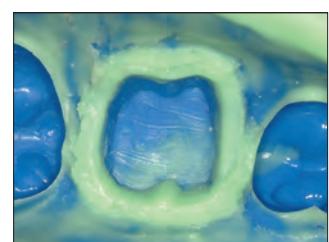
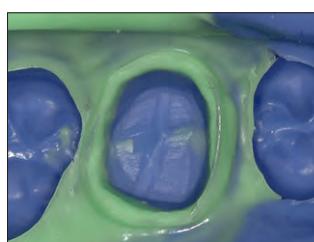
Initial water contact.



After 30 seconds.

## THIXOTROPIC

Thixotropic materials become more fluid as they are agitated—like when they are applied to a crown preparation—and thicken when they are in place. This means that when Thermo Clone material is placed, the material flows into the sulcus and the spaces between teeth. This ensures a detailed impression and clear margins.





**J-Temp™**  
LIGHT-CURED  
TEMPORARY RESIN



SPLINTING BETWEEN MULTIPLE IMPLANT COPINGS FOR IMPRESSIONS TO RESIST IMPRESSION MATERIAL DISTORTION



1. Secure floss between implant copings.



2. Place J-Temp temporary resin in 2–3 mm increments.



3. Alternate sides, working towards the middle.



4. Light cure between each increment



5. Final increment connecting the two sides should be as small as possible to minimize shrinkage.



6. Light cure final increment.



7. It is now ready for open tray impression.

Light-Cured Temporary Resin,  
4 indications in 1, see page 31.

**Chromacclone™**

ALGINATE

- Dimensionally stable up to five days
- Great Bubble Gum flavor
- Dust-free mixing
- Silicone-like consistency
- Highly accurate
- Fast Set changes color
- Extra Fast Set is ideal for sensitive patients

In your busy dental office, every second counts. Every extra minute you save lets you breathe a little easier. With Chromacclone alginate you'll get more than a few extra minutes—you'll get a few extra days. That's because the formulation offers a full five days for you to pour your impressions, not just the few hours you're used to.\*

And as always, Chromacclone 5-day alginate offers the same dust-free formula and reliable set times you depend on. The Fast Set time (53 seconds) features a convenient color-changing formula, while the Extra Fast Set time (45 seconds) is ideal for both young and sensitive patients. Both formulas are available in a pleasant Bubble Gum flavor.

**\*NOTE:** Wrap the impression with a damp paper towel and store in a sealed plastic bag at room temperature (23°C/73°F) to ensure dimensional stability for up to five days.



KIT  
5-DAY FAST SET



REFILL  
5-DAY FAST SET



REFILL  
ORTHO 5-DAY EXTRA FAST SET

**Fast Set: 53 seconds time in mouth**

**Extra Fast Set: 45 seconds time in mouth**

**4033 - Chromacclone 5-day FAST SET Kit**

1 x 1 lb bag of Chromacclone 5-day  
1 x Plastic container, water cup, and scoop

**4034 - Chromacclone 5-day FAST SET Refill**  
**5503 - Chromacclone Ortho 5-day EXTRA FAST SET Refill**

1 x 1 lb bag of Chromacclone 5-day



# IMPRESSIONS

## Chromacclone™ PVS

HYDROPHILIC POLYVINYL SILOXANE IMPRESSION MATERIAL



- Hydrophilic and thixotropic
- Dimensionally stable with great elastic recovery
- Allows you to pour at your convenience
- Tear resistant
- Highly accurate even with multiple pours
- Four viscosities, Fast and Regular Set
- Bubble Gum flavor

Chromacclone PVS impression material captures even the smallest details, enabling you to take effective impressions the first time, every time. Its extremely low contact angle allows it to flow deep into the sulcus for highly visible margins.

The material is super hydrophilic not only during application, but also during immediate pouring of gypsum. It contains special reinforcing branched silicone resins for superior tear resistance so impressions can be easily removed. And its elastic recovery ensures dimensional stability for weeks, allowing you to pour at your convenience.

**Note:** The accuracy of any impression material can be increased with the use of Ultradent's Tissue Management System. Profound hemostasis is paramount before making impressions.

### PROCEDURE\*



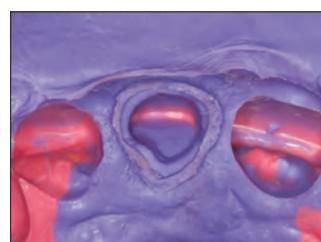
1. Apply light body impression material around outer edges of preparation.



2. Cover preparation in light body impression material.



3. Insert tray and make impression.



4. Remove the tray and examine the impression. Chromacclone PVS material provides excellent margin detail.

SET TIMES	SET SPEED	WORKING TIME	SET TIME	TOTAL TIME
SUPER LIGHT BODY	FAST	1:15 mins	1:30 mins	2:45 mins
LIGHT BODY	REGULAR	2:30 mins	2:30 mins	5:00 mins
	FAST	1:15 mins	1:30 mins	2:45 mins
MEDIUM BODY	REGULAR	2:30 mins	2:30 mins	5:00 mins
	FAST	1:15 mins	1:30 mins	2:45 mins
HEAVY BODY	REGULAR	2:30 mins	2:30 mins	5:00 mins
	FAST	1:15 mins	1:30 mins	2:45 mins
PUTTY	FAST	1:15 min	1:45 mins	3:00 mins
BITE REGISTRATION	FAST	0:20 min	0:70 mins	1:30 mins

50 ml	Regular 2pk	Fast 2pk
Super Light	—	7601
Light	5030	5031
Medium	5020	5021
Heavy	5010	5011

2 x 50 ml cartridges  
10 x Each Mixing tips  
10 x *IntraOral* tips ONLY included with Super Light and Light



50 ml	Regular 10pk	Fast 10pk
Super Light	—	—
Light	5032	5033
Medium	5022	5023
Heavy	5012	5013

10 x 50 ml cartridges  
25 x Each Mixing tips  
50 x *IntraOral* tips ONLY included with Light



50 ml	2pk
70 second Clone Bite	7600

2 x 50 ml cartridges  
12 x Mixing tips



## Chromacclone™ PVS Putty



**5040 - Chromacclone PVS Putty Kit**  
1 x Each 250 g base and 250 g catalyst, and 2 scoops

\* See IFU for complete instructions.



PHYLLIS THIBODEAU - Dimple Dell Park

# ORTHODONTICS

VALO Ortho Cordless  
Gishy Goo

## VALO™ Ortho Cordless

LED CURING LIGHT



Best LED  
Curing Light

- Unique Xtra Power Quadrant mode quickly and efficiently cures five teeth with one touch of a button
- Powerful, optimally collimated beam delivers consistent, even cures directly over the labial face of the bracket
- Slim, low-profile design allows unprecedented access anywhere in the mouth<sup>2</sup>
- Highly efficient LEDs keep the wand body cool to the touch
- Intuitive timer controls are easy to operate and user-friendly
- Battery-operated, cordless wand provides optimal convenience and flexibility
- Uses inexpensive rechargeable batteries

VALO Ortho Cordless curing light uses a custom, multiwavelength light-emitting diode (LED) for producing high-intensity light at 385–515 nm, which is capable of polymerizing all light-cured dental materials. This intensity will also penetrate porcelain and is capable of curing underlying resin cements similar to a quality halogen light. The VALO Ortho Cordless curing light uses VALO rechargeable batteries and a battery charger suitable for power outlets from 100 to 240 volts. The handpiece is designed to rest in a standard dental unit bracket or can be custom-mounted using the bracket included in the kit. It can also be stored on a countertop or in a drawer. The VALO Ortho Cordless curing light is equipped with a sensor that registers movement of the light; when the light is not being used, the VALO Ortho Cordless curing light will automatically go into sleep mode and when moved will return to the most recently used setting.



The customary two-position curing as shown in images A and B is not required with VALO Ortho Cordless light. Its power and collimated beam cause the tooth underneath the bracket to illuminate, curing the resin. Hence, in image C, the clinician can achieve a complete cure from directly above the bracket without having to reposition. Use just two 3-second exposures with the VALO light in Xtra Power Mode for fast, complete curing.

*"The fact that the VALO light is small and lightweight makes it one of a kind and an ideal choice for an orthodontist."*

—DR. PAUL UPATHAM, DDS, MS – SAN DIEGO, CA

\* Awards given to the traditional VALO curing light. The VALO Ortho curing light meets the same rigorous standards of quality and performance. 1. realityesthetics.com 2. Moreira RJ, de Deus RA, Ribeiro MTH, et al. Effect of light-curing unit design and mouth opening on the polymerization of bulk-fill resin-based composite restorations in molars. *Adhes Dent.* 2021;23(2):121–131. doi:10.3290/j.ad.b1079561.



### 5942 - VALO Ortho Cordless Kit

1 x VALO Ortho Cordless LED curing light

4 x Rechargeable batteries

1 x Each Battery charger, charging unit power supply, handpiece mounting bracket holder,

VALO cordless light shield, and Black Light lens

1 x Sample pack of barrier sleeves

**WARNING:** Only use rechargeable batteries stated in the IFU. Some rechargeable batteries can affect the function of the VALO curing light.

### 5963 - VALO Ortho Rechargeable Batteries 2pk



### 5962 - VALO Ortho Battery Charging Unit 1pk



### 5961 - VALO Ortho Charging Unit Power Supply 1pk



### 1667 - VALO Surface Mounting Bracket 1pk



### 5929 - VALO Ortho Light Shield 1pk



### 4667 - VALO Ortho Barrier Sleeves 100pk



### 5939 - Black Light Lens 1pk



### 508 - Blue Light Blocking Glasses 1pk

## Gishy Goo™

POLYVINYL SILOXANE ELASTOMER



- Reduces costly emergency appointments
- Provides lasting comfort for patients' lips, cheeks, and tongue

Gishy Goo material is a specially formulated polyvinyl siloxane elastomer that helps patients get comfortable with orthodontic appliances such as brackets, lingual braces, molar tubes, fixed and functional appliances, mouthguards, and other applications where soft tissues can be protected.

### INSTRUCTIONS\*



1. Squeeze some Gishy Goo material from the syringe onto your finger.



2. Mix Gishy Goo material thoroughly between your fingers for 10 seconds. Don't wait too long or it will set up.



3. Place Gishy Goo material immediately over braces where it hurts. Mold and shape Gishy Goo material. Wait two minutes for it to set.



### 500-059 - Gishy Goo Syringe 10pk

### 2749 - Gishy Goo Syringe 50pk

5 ml syringe



### Umbrella™

TONGUE, LIP, AND CHEEK RETRCTOR



The Umbrella cheek retractor is ideal for a variety of orthodontic procedures that require clear access without compromising patient comfort, including but not limited to: scanning, impressions, bite registrations, tray fitting, bracket placement, in-office whitening, and more.

[Umbrella, see page 100.](#)



### Opalescence Go™ 10% and 15%

PREFILLED WHITENING TRAYS  
- HYDROGEN PEROXIDE



Opalescence Go whitening features ready-to-use convenience with the UltraFit™ tray, for an even more adaptable and comfortable whitening experience over brackets or other orthodontic appliances.

[Opalescence Go, see pages 162–163.](#)



### Gemini EVO™

810 + 980 DIODE LASER

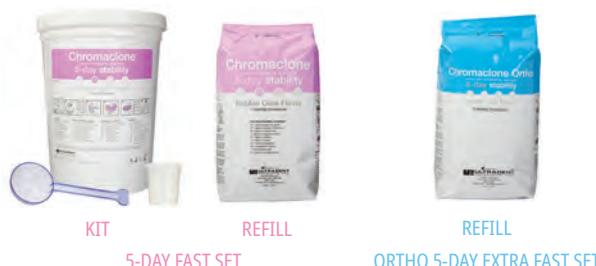


The Gemini EVO soft tissue diode laser allows for timesaving ortho treatments with little to no bleeding and a topical anesthetic. Remove tissue over an impacted tooth for immediate bracket/button attachment which bypasses the wait for passive eruption.

[Gemini EVO, see pages 52–59.](#)



### Chromacclone™ ALGINATE



With Chromacclone you'll get more than a few extra minutes, you'll get a few extra days. That's because the formulation offers a full five days to pour your many orthodontic impressions. After all, perfection can't be rushed.

[Chromacclone, see page 93.](#)



DARREN BECKSTEAD - Grafton

# PREPARE

Umbrella  
DermaDam Synthetic  
DermaDam  
OraSeal  
Sable Seek  
Consepsis Scrub  
STARbrush  
Ultracare  
Halo  
Triodent  
Omni-Matrix  
Omni-Matrix Original  
InterGuard



# PREPARE

## Umbrella™

TONGUE, LIP, AND CHEEK RETRCTOR



- Developed to give you a clear treatment field while making patient comfort a top priority
- Easy to place
- Disposable
- Naturally and gently helps the patient hold their mouth open without pulling or stretching their lips
- A new, innovative tongue-retraction design allows the tongue to comfortably rest behind the tongue guard, keeping it back and away from the working area
- Designed with anatomically placed/shaped bumpers, so clinicians can rest a hand on the patient's mouth without causing discomfort
- Provides relief and comfort to sensitive patients—it won't initiate the gag reflex for most
- Can be kept in place when checking bite

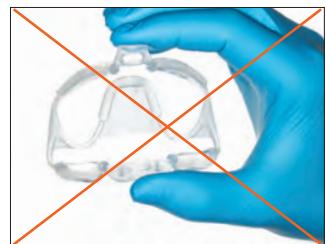
The Umbrella cheek retractor is ideal for a variety of procedures that require clear access without compromising patient comfort, including but not limited to: in-office whitening, anterior restorations, scanning, impressions, bite registrations, surgical procedures, and more.

**4870 - Umbrella Retractor Medium 5pk**  
**4871 - Umbrella Retractor Medium 20pk**  
**5162 - Umbrella Retractor Medium 40pk**  
**5256 - Umbrella Retractor Large 5pk**  
**5257 - Umbrella Retractor Large 20pk**  
**5258 - Umbrella Retractor Large 40pk**

## PROCEDURE



1. Simply press the tabs on the Umbrella tongue, lip, and cheek retractor together, ensuring the arrows on the top tab are pointing up, to prepare for insertion.



DO NOT place the retractor upside down.



2. Ask the patient to place the tip of their tongue on the roof of their mouth.



3. Choose one side of the mouth in which to start, and then comfortably insert the other side of the retractor into the cheek.



4. Use the tabs to center the retractor with the patient's mouth.



5. Check that the patient's tongue is resting comfortably behind the guard, ensuring easy access.



DO NOT place the tongue guard on top of the patient's tongue.



## Opalescence™ Pro

IN-OFFICE POWER WHITENER  
- 40% HYDROGEN PEROXIDE

2024<sup>1</sup>  
REALITY  
Product of the Year  
Finalist Award

Black Mini™ Tip page 134

- NO LIGHT NEEDED!
- Whitens up to 4–5 shades for quick, visible results<sup>2</sup>
- No refrigeration required before mixing
- Powerful 40% hydrogen peroxide gel
- Two to three 20-minute applications for a total of 40–60 minutes of treatment time, not exceeding 3 applications in one visit
- Opalescence Pro whitening gel is designed to maximize patient comfort
- Precise delivery
- Easy to see for placement and removal
- Chairside syringe-to-syringe mixing ensures maximum strength
- Opalescence Pro tooth whitening gel contains potassium nitrate and fluoride

## BEFORE AND AFTER



Before Opalescence Pro in-office whitener.



After two 20-minute applications of Opalescence Pro whitening treatments.

Courtesy of Carol Lent, RDH.



Before Opalescence Pro in-office whitener.



After three 20-minute applications of Opalescence Pro and Opalescence 10% non-PF whitening treatments.

Courtesy of Carol Lent, RDH.

Opalescence Pro, see pages 168–171.

\* See IFU for complete instructions. 1. realityesthetics.com. 2. Rodrigues JL, Rocha PS, Pardim SLS, Machado ACV, Faria-E-Silva AL, Seraidarian PI. Association Between In-Office And At-Home Tooth Bleaching: A Single Blind Randomized Clinical Trial. *Braz Dent J.* 2018;29(2):133-139. doi:10.1590/0103-6440201801726

## DermaDam™ Synthetic

DENTAL DAM



Zero sensitizing proteins

DermaDam Synthetic dental dam is not made with natural rubber latex, but is designed to be just as flexible and durable as dams that are composed of natural rubber latex.



299 - DermaDam **Medium Synthetic 0.20 mm 20pk**  
330 - DermaDam **Medium Synthetic 0.20 mm 60pk**  
6" x 6" (15 cm x 15 cm)

## DermaDam™

RUBBER DAM



- Low dermatitis potential
- Strong and tear resistant
- Powder free to reduce allergic reactions

DermaDam rubber dam is made from pure latex rubber and is powder free, which reduces the possibility of latex reactions. Quality processing ensures a low content of surface proteins.

311 - DermaDam **Medium 0.20 mm 36pk**  
6" x 6" (15 cm x 15 cm)



314 - DermaDam **Heavy 0.25 mm 36pk**  
6" x 6" (15 cm x 15 cm)





# PREPARE

## OraSeal™

### CAULKING AND PUTTY



White Mac™ Tip page 137

- Adheres under water and saliva
- Provides a protective seal against gingival exposure to peroxide or hydrofluoric acid
- Ideal for blocking out unwanted spaces for impressions
- Effectively adheres to wet rubber dams, tissue, teeth, and metal
- OraSeal Putty material has a stiffer consistency than the Caulking material, which some doctors prefer

Use OraSeal Caulking material when an adequate seal is difficult to obtain with compromised teeth or roots. It may also be used to repair rubber dam leaks. It seals the rubber dam when performing a porcelain repair, protecting gingiva from hydrofluoric acid. Deliver into undercuts and below implant bars, precision attachments, etc. to prevent cold cure acrylic or impression material from locking into empty spaces. Fill in gingival embrasures of splints and bridges to facilitate easy cleanup of permanent cement.



OraSeal Caulking material can seal leaks in a rubber dam, even when submerged. Apply around border, then criss-cross over hole until seal is complete.

### PROCEDURE\*



Apply OraSeal Caulking material with Black Mini™ or White Mac delivery tips to prevent leakage of rubber dam during treatment.<sup>2</sup> Procedure can then be performed in a clean, dry field.

### USES\*



Ensure rubber dam seal when using strong peroxide for vital whitening, or when porcelain etching with hydrofluoric acid.



Block out undercuts below and around prosthetic implant clip. Flexing component of clip is covered with putty to accommodate clip flexure during insertion and removal.



Ensure moisture control when bonding lower orthodontic brackets. Seal with Caulking or Putty to prevent saliva from seeping through embrasures and contaminating area.



Block out large interproximal spaces for easy and distortion-free removal of impression.



Use under fixed partial or implant bar prior to making an impression.



Use as a block-out medium prior to anchoring attachments, clips, etc. with cold cure acrylic.



### 352 - OraSeal Syringe Kit

2 x 1.2 ml (1.38 g) OraSeal Caulking syringes  
2 x 1.2 ml (1.44 g) OraSeal Putty syringes  
4 x Black Mini tips  
20 x White Mac tips



1.2 ml syringe (g, see above)	4pk	20pk
Caulking	351	354
Putty	353	355

\* See IFU for complete instructions. 1. realityesthetics.com. 2. Cohen S, Burns RC. *Pathways of the Pulp*. 7th ed. St. Louis, MO: Mosby-Year Book; 1998:123-124.

**Sable™ Seek™**

CARIES INDICATOR



Black Mini™ Brush Tip page 134

- Stains carious and demineralized dentin
- Provides precise, mess-free delivery
- Dark green color is ideal for working near pulp

Sable Seek caries indicator contains FD&C dyes to stain carious and demineralized dentin. It can be very useful for difficult-to-see areas e.g., undercuts of preparations, dark dentin, and areas along the DE junction. The green color of Sable Seek indicator also helps visualization of decay in deep caries cases to help avoid pulp exposure.

**PROCEDURE\***

1. Apply Sable Seek indicator with Black Mini Brush tip.



2. Rinse with air/water and suction. Carious dentin is easily identified.



3. Remove green-black color (carious dentin) with slow-speed round bur or excavator. To control overexcavating near the pulp, remove final portion of caries with hand excavator.



4. Reapply. Rinse and verify appropriate caries removal.

**233 - Sable Seek Syringe Kit**

4 x 1.2 ml (1.223 g) syringes

20 x Black Mini Brush tips

**234 - Sable Seek Syringe 4pk****1805 - Sable Seek Syringe 20pk**

1.2 ml (1.223 g) syringes

**J-Temp™**LIGHT-CURED  
TEMPORARY RESIN

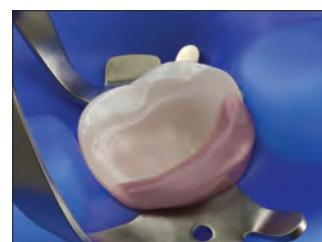
TO PROVIDE STRUCTURE FOR  
ISOLATION CLAMPING AND TO ACT  
AS A BARRIER FOR ENDODONTIC  
IRRIGANTS\*



1. Insufficient tooth structure complicates the placement of clamp and rubber dam.



2. Replace missing tooth structure by placing J-Temp temporary resin in 2-3 mm layers and light cure between. Use a bur to adjust if needed.



3. Rubber dam can now be securely placed to provide a barrier for irrigants.

**Light-Cured Temporary Resin, 4 indications in 1,  
see page 31.**

\* See IFU for complete instructions. 1. realityesthetics.com.

\* See IFU for complete instructions.



# PREPARE

## Consepsis™ Scrub

CHLORHEXIDINE ANTIBACTERIAL SLURRY



White Mac™ Tip page 137



STARbrush coronal brush

- May reduce post-op sensitivity<sup>2</sup>
- Does not compromise bond strength<sup>3,4</sup>
- Nonsplatter formula
- Use to clean prior to cementation or around ortho brackets
- Use with STARbrush™ brush in grooves prior to sealant placement

Consepsis Scrub antibacterial slurry is a lightly flavored 2.0% chlorhexidine gluconate (relative to liquid component) antibacterial scrub. Consepsis Scrub slurry uses inert, finely ground glass as an abrasive scrub, unlike pumice, which may contain several trace impurities from volcanic ash.

**Note:** Never use prophy paste for prep cleaning, as it contains several potentially contaminating ingredients.

Use Consepsis Scrub slurry for removing residual temporary cement prior to permanent cementation and for removing debris. Studies have shown that 2% chlorhexidine, such as Consepsis [Scrub slurry], helps address microorganisms in dentinal tubules better than other tested intracanal medicaments.<sup>5</sup>

**Note:** Evidence demonstrates that you can further reduce post-op sensitivity by sealing dentin with a bonding agent such as Peak™ Universal Bond adhesive before cementation. We recommend using PermaFlo™ DC luting resin for permanent cementation.

See page 28 for Consepsis™ chlorhexidine antibacterial solution.

### PROCEDURE



Use Consepsis Scrub antibacterial slurry with a rubber cup or STARbrush™ coronal brush to remove residual cement.

### BEFORE AND AFTER



Before.

After.



## 732 - Consepsis Scrub Syringe 4pk

1.2 ml (1.89 g) syringes



## 689 - Consepsis Scrub IndiSpense Syringe 1pk

30 ml (47.31 g) syringe

## STARbrush™

CORONAL BRUSH



- Effectively cleans in hard-to-reach areas
- Tight fibers help to prevent messes and apply appropriate pressure
- Great for cleaning pits and fissures with Consepsis™ Scrub antibacterial slurry prior to sealants



Actual size

	50pk	100pk
STARbrush	1092	1093

**1.** realityesthetics.com. **2.** Al-Omari WM, Al-Omari QD, Omar R. Effect of cavity disinfection on postoperative sensitivity associated with amalgam restorations. *Oper Dent.* 2006;31(2):165-170. doi: 10.2341/05-8. PMID:16827017. **3.** Carrilho MR, Geraldeli S, Tay F, et al. In vivo preservation of the hybrid layer by chlorhexidine. *J Dent Res.* 2007;86(6):529-533. **4.** Hebling J, Pashley DH, Tjäderhane L, Tay FR. Chlorhexidine arrests subclinical degradation of dentin hybrid layers in vivo. *J Dent Res.* 2005;84(8):741-746. **5.** Vasudeva A, Sinha DJ, Tyagi SP, et al. Disinfection of dentinal tubules with 2% chlorhexidine gel, calcium hydroxide and herbal intracanal medicaments against *enterococcus faecalis*: an in-vitro study. *Singapore Dent J.* 2017 Dec;38:39-44. doi: 10.1016/j.sj.2017.06.001. PMID: 29229073.



clinical

**PROBLEM:**  
Staining under provisional crowns.

**SOLUTION:**

After proper selection of hemostatic agents, clean tooth well prior to cementing provisionals and use quality sealing provisional hydrophilic cements (e.g., UltraTemp™ temporary luting material).

**CHEMISTRIES (THE "WHYS"):**

1. Hemostatic agents as well as the blood from cut tissues are both sources of iron, which reacts with the hydrogen sulfide gas produced by anaerobic bacteria in this septic environment. The reaction yields ferric sulfide, the harmless yet annoying dark surface stain that is seen below. This stain can occur to a lesser degree solely from the natural iron in blood.

2. Non-sealing cements allow saliva and bacteria to move between the temporary and preparation. Additionally, non-sealing provisionals are problematic as saliva and/or bacteria removes the smear layer, opening tubules to bacteria.

**HOW TO PREVENT/TREAT:**

1. If there is no bleeding you can use a hemostatic agent that is not ferric sulfate-based (e.g., ViscoStat™ Clear hemostatic). If a ferric sulfate-based agent is required, be sure to clean the preparation well as instructed below.
2. Clean the preparation well. This can be done with Consepsis Scrub slurry and a STARbrush coronal brush or by etching with Ultra-Etch etchant for 2–3 seconds and rinsing well.
3. Use a quality hydrophilic provisional cement like Ultradent's non-eugenol, paste-to-paste UltraTemp REZ II temporary cement.

**Note:** Similar staining can occur even under definitive direct and indirect restorations if contamination is on the preparation prior to bonding. It is recommended to etch with Ultra-Etch etchant prior to application of the dentin bonding agent.

**CASE 1**



Two weeks earlier, ViscoStat hemostatic agent was used to arrest bleeding. Provisional crowns were cemented with a popular NON-sealing, hydrophilic, resin-based temporary cement.

**CASE 2**



Provisionals have been removed. Characteristic dark stain is observed on preparations. This can be removed by ultrasonic scaling and scouring with Consepsis Scrub slurry. It's preferable to prevent it by cleaning prior to cementation by using a hydrophilic provisional cements such as UltraTemp REZ II temporary cement.

**Ultracare™**

TOPICAL ANESTHETIC GEL



When you choose Ultracare gel as your topical anesthetic,

**YOU GET A TRIO OF BENEFITS**

- 20% benzocaine for effective numbing
- Rapid onset, numbs tissues in 15–20 seconds<sup>2</sup>
- Delicious Bubble Gum and **dye-free Walterberry™** flavors with no bitter aftertaste



**302 - Ultracare Topical Bubble Gum Bottle**

**301 - Ultracare Topical Walterberry Bottle**

1 x 1 oz bottle

**METHEMOGLOBINEMIA WARNING:**

For external use only. Use of this product may cause methemoglobinemia, a serious condition that must be treated promptly because it reduces the amount of oxygen carried in blood. This can occur even if you have used this product before. Stop use and seek immediate medical attention if you or a child in your care develop pale, gray, or blue colored skin (cyanosis), headache, rapid heart rate, shortness of breath, dizziness or lightheadedness, fatigue, or lack of energy. Product supervision is required for children between 2 and 12 years of age. Do not use if taking sulfonamides, for teething, or in children under 2 years of age.

**1.** realityesthetics.com. **2.** Data on file.



## PREPARE

### Halo™

#### SECTIONAL MATRIX SYSTEM



Maximum tooth separation is achieved through the force of the nitinol ring. This ideal separation allows you to restore a single tooth or back-to-back restorations with ease. The anatomically contoured design of the Halo ring, along with the active wedging provided by the wedges, allows the band to fully adapt to the prep from the gingival margin to the marginal ridge and maintain its shape even in large preparations, helping you achieve anatomically shaped restorations. When you have ideal contacts and well-adapted bands with anatomical curvature, you will see a reduction in the time spent shaping and finishing. The Halo system does exactly that with every restoration.



The easy-to-use Halo sectional matrix system allows you to create beautiful, anatomically contoured composite restorations in less time.



#### 4831 - Halo Original Bands with Instruments Kit

2 x Each *Universal Rings*  
25 x Each *Original Matrices*  
3.5 mm, 4.5 mm, 5.5 mm, 6.5 mm, and 7.5 mm  
25 x Each *Wedges Small, Medium, and Large*  
1 x *Halo Carousel*  
1 x *Tweezers*  
1 x *Forceps*



#### 4832 - Halo Original Bands Kit

2 x Each *Universal Rings*  
25 x Each *Original Matrices*  
3.5 mm, 4.5 mm, 5.5 mm, 6.5 mm, and 7.5 mm  
25 x Each *Wedges Small, Medium, and Large*  
1 x *Halo Carousel*

#### 4835 - Halo Original Bands Mini Kit

2 x Each *Universal Rings*  
5 x Each *Original Matrices*  
3.5 mm, 4.5 mm, 5.5 mm, 6.5 mm, and 7.5 mm  
5 x Each *Wedges Small, Medium, and Large*  
1 x *Halo Carousel*

#### 4833 - Halo Firm Nonstick Bands Kit

2 x Each *Universal Rings*  
20 x Each *Firm Nonstick Matrices*  
3.5 mm, 4.5 mm, 5.5 mm, 6.5 mm, and 7.5 mm  
25 x Each *Wedges Small, Medium, and Large*  
1 x *Halo Carousel*

#### 4834 - Halo Firm Bands Kit

2 x Each *Universal Rings*  
25 x Each *Firm Matrices*  
3.5 mm, 4.5 mm, 5.5 mm, 6.5 mm, and 7.5 mm  
25 x Each *Wedges Small, Medium, and Large*  
1 x *Halo Carousel*



## Halo™ Matrices

### MATRIX BANDS



- Anatomically shaped for ideal contacts
- Curve at marginal ridge creates ideal occlusal embrasure, reducing finishing
- Tweezer holes for easy placement
- Bendable tab allows for easy placement and removal with increased visibility
- Optional color coding according to size for easy identification
- Original bands allow for more adaptability and burnishing, while Firm bands resist deformation and are ideal for tight interproximal spaces

Original	50pk	100pk
3.5 mm	5448	5449
4.5 mm	5450	5451
5.5 mm	5452	5453
6.5 mm	5454	5455
7.5 mm	5456	5457



Firm	50pk	100pk
3.5 mm	5059	—
4.5 mm	5062	5063
5.5 mm	5064	5065
6.5 mm	5066	5067
7.5 mm	5068	—



Firm Nonstick	50pk	100pk
3.5 mm	5049	—
4.5 mm	5051	5052
5.5 mm	5053	5054
6.5 mm	5055	5056
7.5 mm	5057	—



## Halo™ Wedges



- Firm wedge adapts the matrix band at the gingival margin, while being less traumatic to the papillae
- Hollow design makes wedges easy to place and allows wedges to be stacked when multiple wedges are needed
- Easy to distinguish colors help identify sizes of wedges
- Collapsible center for anatomical adaptation of the band

Size	100pk
Small	5042
Medium	5043
Large	5044



## Halo™ Nitinol Rings

### UNIVERSAL RINGS



- Super-elastic nitinol metal maintains force during procedures and reduces cyclic fatigue
- Rings will last over 1,000 uses<sup>1</sup>
- Glass-filled nylon tines won't easily break, and won't collapse into the prep and create under-contoured restorations
- Ring contours secure the band in a natural and anatomical shape, helping to eliminate flash and reducing the amount of finishing needed<sup>2</sup>
- Stackable design allows for use with MODs and other Class II restorations
- Provides ideal separation for back-to-back restorations

Size	1pk	2pk
Universal	5008	5009



## Halo™ Tweezers

### CROSSOVER ACTION TWEEZERS

- Passively hold wedges and matrices
- Simplify placement and removal of Halo matrices
- Ball tip for burnishing
- Crossover action
- Positive mechanical connection for secure handling and powerful grip



5048 - Tweezers 1pk

## Halo™ Forceps

### RING-PLACEMENT FORCEPS

The locking function and angled grip arms of the Halo forceps ensure maximum stability of the ring during placement both mesially and distally.



5047 - Halo Forceps 1pk

<sup>1</sup>. Data on file. <sup>2</sup>. Data on file.



# PREPARE

## WHY CHOOSE A SECTIONAL MATRIX?



- Large food trap above
- Fails to restore proximal anatomy
- Thin contact at the marginal ridge
- Likelihood of fracture, occlusal interference, recurrent caries, and periodontal disease

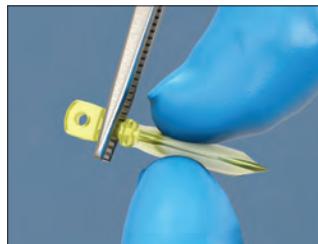


- User-friendly system
- Natural contours
- Tight, anatomically correct contact points at correct height of contour

## HALO STEP-BY-STEP GUIDE\*



1. Select an appropriate matrix band based on required occlusogingival height. Using tweezers, grip the matrix band tab and bend as needed, then place interproximally with the concave surface facing the tooth to be restored.



2. Select wedge that best adapts matrix band to the gingival portion of the preparation. Grip wedge with cotton pliers.



3. Light finger pressure may need to be applied to the matrix band to prevent it from being dislodged during wedge placement.



4. If needed, an additional wedge may be used to provide greater adaptation to gingival cavosurface.



5. Carefully place Halo ring using the ring forceps.



6. The ring should be placed as low as possible with the tine ends of the ring straddling the wedge on each side of the tooth.



7. Inspect matrix band, wedge, and ring placement to ensure that the matrix band is well adapted to the cavosurface margins and that it is in intimate contact with the adjacent tooth.

Courtesy of Dr. James Wright.

## DO CLINICAL CASE



1. Pre-op.



2. Preparation with Halo system.



3. Post-op.

## DO CLINICAL CASE



1. Pre-op.



2. Preparation with Halo system.



3. Post-op.

\* See IFU for complete instructions.

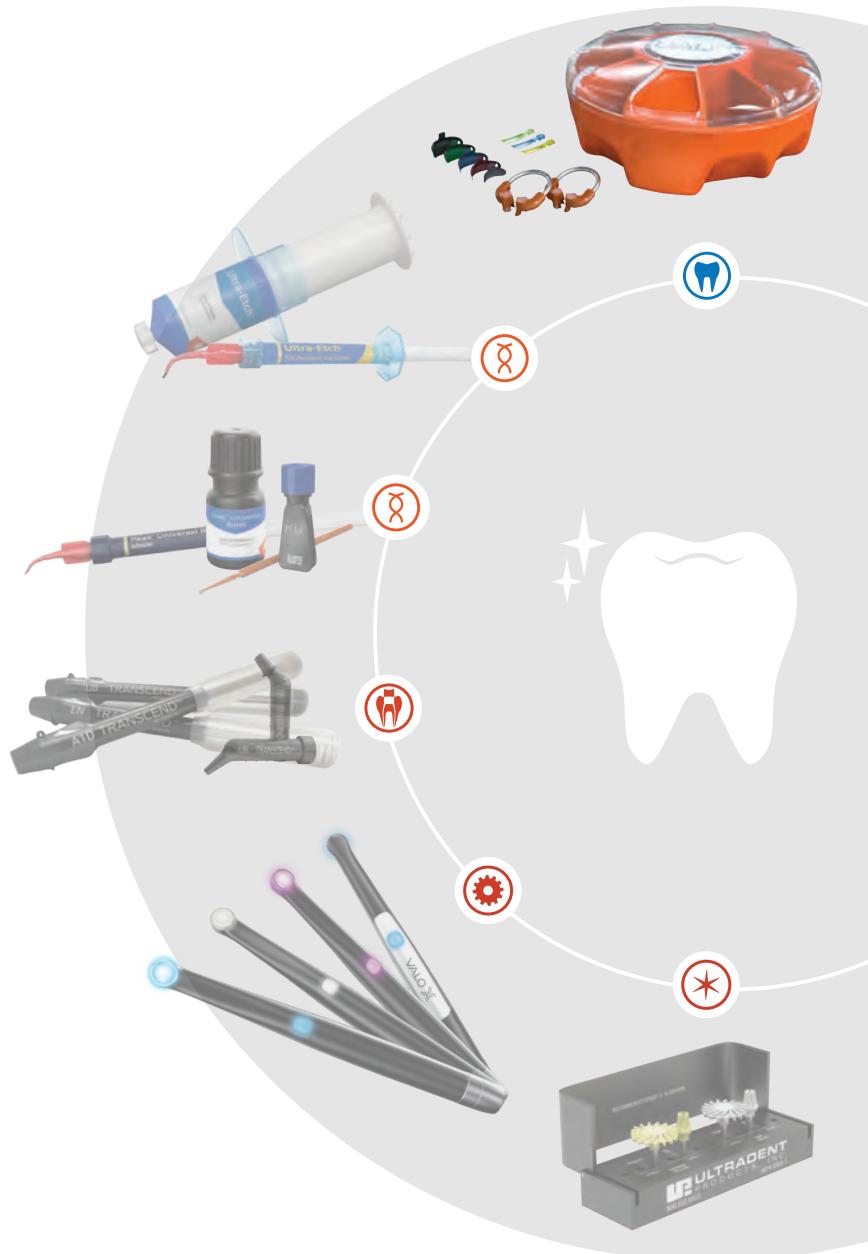


# RESTORATIVE SOLUTION

# Your complete system for **QUALITY RESTORATIONS**

Halo™

The components of the Halo sectional matrix system are anatomically shaped, creating ideal contacts and reducing the time spent shaping and finishing. With the rest of Ultrudent's Restorative Solution, you have everything you need to create beautiful, long-lasting restorations, step by step.



LEARN MORE AT ULTRADENT.COM





**Triodent® SuperCurve Matrix**

SUPERSNUG NON-STICK MATRICES



- Matrix hugs the tooth and prevents any interference with ring placement
- Matrix shape features anatomical accuracy and curvature
- Ultra-thin non-stick finish minimizes adhesion of the bonding agent or composite to the matrix band
- Gingival apron provides matrix coverage for deeper preparations

Size	50pk	90pk
3.5 mm	403417	—
4.5 mm	403418	403404
5.5 mm	403419	403405
6.5 mm	403420	403406
7.5 mm	403412	—

**Triodent® V3 Tab-Matrix™**

SECTIONAL MATRIX



- Matrix bands feature significantly greater horizontal curvature ensuring that more curvature remains as the matrix wraps around the tooth
- Pronounced marginal ridge produces accurate anatomy
- Matrix bands are shaped for commonly encountered cavities and produce excellent seals at the gingival margin
- Super thin matrices
- Placement tab and removal holes are designed for easy gripping with Pin-Tweezers
- Gingival apron on larger sizes provide matrix coverage for deeper preparations

The V3 Tab-Matrix has a pronounced ridge on the occlusal margin, designed to produce natural-looking Class II composite restorations.

Size	50pk	100pk
3.5 mm	403388	—
4.5 mm	403372	403375
5.5 mm	403373	403376
6.5 mm	403374	403377
7.5 mm	403398	—

**Triodent® Pin-Tweezers**

CROSSOVER ACTION TWEEZERS

- Passively hold wedges and matrices
- Simplify placement and removal of Triodent matrices
- Gold tip for pin location
- Ball tip for burnishing
- Crossover action
- Positive mechanical connection for secure handling and powerful grip



402075 - Pin-Tweezers 1pk

**Triodent® Tab-Matrices**

SECTIONAL MATRICES



- Placement tab and removal holes allow for easy placement and removal
- As with all Triodent matrix bands, tab can be bent 90° for contra-angle placement
- Matrix bands are super thin
- Gingival apron provides matrix coverage for deep preparations

Size	100pk
4.5 mm	402072
5.5 mm	402073
6.5 mm	402074





# PREPARE

## Triodent® WedgeGuard

PREPARATION WEDGE



- Prevents bur damage to adjacent tooth
- Saves time and protects gingival papillae
- Detachable guard leaves wedge in place after tooth prep



Size	50pk
Small	403383
Medium	403384
Large	403385



## Triodent® Wave-Wedge™

DISPOSABLE ANATOMICAL WEDGE



- Self-guiding for ease of placement and a true fit and seal
- Design accommodates gingival tissue and is stackable from opposite side
- Strong, anatomical design



Courtesy of Dr. Renato Miotto Palo.

Stacked wedges: One wedge placed from buccal and one from the lingual.

Size	100pk
Small	402066
Medium	402065
Large	402064



## Triodent® Forceps

RING-PLACEMENT FORCEPS

The locking function and angled grip arms of the Triodent forceps ensure maximum stability of the V3 Ring during placement both mesially and distally.



402061 - Ring-Placement Forceps 1pk

## Triodent® V-Wedge

DISPOSABLE ANATOMICAL WEDGE



- Self-guiding and stackable, making them easy to place
- Adapts to the contours of the interproximal space
- Accommodates gingival tissue
- Strong, anatomical design
- Rigid enough to provide tooth separation

Size	100pk
Small Hard	402059
Small Soft	402056
Medium Hard	402058
Medium Soft	402055
Large Hard	402057
Large Soft	402054





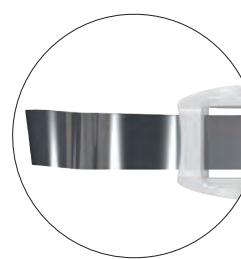
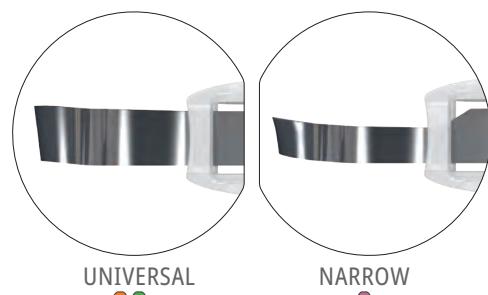
## Omni-Matrix™

DISPOSABLE RETAINER AND MATRIX



- Innovative shape allows procedural visibility and patient comfort<sup>2</sup>
- Ultra-thin burnishable stainless steel adapts to all preparations<sup>3</sup>
- Unique winged and wingless styles meet individual case needs
- Disposable design saves you time and money

The Omni-Matrix disposable retainer and matrix is a superior circumferential matrix band solution. It's a simple restorative tool designed to perfectly customize to any preparation. The band's circumference can be easily adjusted simply by twisting the handle and the pivoting head allows it to access any quadrant of the mouth. Once the restoration is complete, the Omni-Matrix band easily releases without disturbing the restorative material.



*"Fast, easy, convenient, disposable! What else could you ask for?"*  
—DR. GEORGE FREEMAN

Stainless Steel	Wingless 48pk	Winged 48pk
6.5 mm — .001" (.025 mm)	7701	8801
6.5 mm — .0015" (.038 mm)	7702	8802
5.2 mm — .0015" (.038 mm)	7704	8804

1. realityesthetics.com. 2. Data on file. 3. Data on file.



# PREPARE

## Omni-Matrix™ Original

DISPOSABLE RETAINER AND MATRIX



- Disposable
- Easy to place
- Color coded
- Comfortable for patients
- Adaptive, burnishable band
- No placement instruments required
- No lip, cheek, or glove capture

The Omni-Matrix disposable retainer and matrix is designed to be quick and easy to use. Simply adjust the band's circumference by twisting the conical handle. Its patented, articulated head swivels, fitting comfortably into any quadrant of the mouth. Once the restoration is complete, the Omni-Matrix band is easily released, leaving restorative material intact. The stainless steel matrix band is thin, adaptive, and burnishable, and the wingless design allows wedges to be placed with ease.



1. Seat.



2. Tighten.



3. Remove.



4. Dispose.

Stainless Steel	Winged 48pk	Wingless 48pk
6.5 mm — .001" (.025 mm)	2201	1101
6.5 mm — .0015" (.038 mm)	2202	1102
5.2 mm — .0015" (.038 mm)	2204	1104

## InterGuard™

INTERPROXIMAL TOOTH GUARD



The InterGuard interproximal tooth guard reduces risk of iatrogenic damage by protecting adjacent teeth.<sup>2,3</sup> Stable curls at each end leave transition angles clear for full access. The .004 thick stainless steel InterGuard tooth guard is great for tunnel preparations and protecting the adjacent tooth during air abrasion.



Turn curls to face tooth to be prepared. Tie a length of dental floss through hole, as shown, to prevent patient from swallowing the InterGuard tooth guard.

*"InterGuard interproximal tooth guard was developed as a protective shield following the publication of a clinical investigation proving that two-thirds of the approximal surfaces of adjacent teeth showed evidence of iatrogenic preparation damage. In my office I soon found that InterGuard allows you to work both faster and safer, and I am proud to have contributed with a tool which has been called another step in the direction of higher quality dentistry."*

—DR. OLE OSTERBY, INVENTOR — DENMARK



**3097 - InterGuard Kit**  
5 x Each 4.0 mm and 5.5 mm



Size	10pk	50pk
4.0 mm	4016	4011
5.5 mm	4017	4012

1. realityesthetics.com. 2. Linters M, van Amerongen WE, Mandari GJ. Iatrogenic damage to the adjacent surfaces of primary molars, in three different ways of cavity preparation. *Eur Arch Paediatr Dent.* 2006;1(1):6-10. 3. de la Peña VA, García RP, García RP. Sectional matrix: Step-by-step directions for their clinical use. *Br Dent J.* 2016;220(1):11-14.



WADE SMITH - Zion National Park

# PREVENT AND HYGIENE

UltraSeal XT plus  
PrimaDry  
UltraSeal XT hydro  
Ultrapro Tx Cordless Handpiece  
Ultrapro Tx Air Handpiece  
Ultrapro Tx Prophy Paste  
Ultrapro Tx Prophy Angles  
Enamelast Fluoride Varnish  
Universal Dentin Sealant  
Opalpix  
Opalescence Whitening Toothpaste



## UltraSeal XT™ plus

HYDROPHOBIC PIT AND FISSURE SEALANT



Inspiral™ Brush Tip page 135

- Resin-based sealants have high retention rates<sup>2</sup>
- Direct delivery into difficult-to-access areas
- Drip-free placement
- Highly filled resin - 58%
- Penetrates deepest pits and fissures<sup>3</sup>
- Thixotropic/ideal viscosity flowability<sup>3</sup>
- Four shades: Opaque White, Clear, A1, and A2

UltraSeal XT plus hydrophobic pit and fissure sealant is a light-cured, radiopaque composite sealant that contains fluoride. The average particle size is 1.4 microns, and the sealant is 58% filled by weight.<sup>4</sup> UltraSeal XT plus sealant has less polymerization shrinkage than competitive products.<sup>5</sup> Used with the Inspiral™ Brush Tip, the thixotropic nature of UltraSeal XT plus sealant allows the material to thin as it's expressed from the tip, allowing it to penetrate deep into the pits and fissures. When the resin stops flowing, the shear thinning ceases and placement is complete,<sup>3</sup> preventing it from running before it can be light cured. Using PrimaDry™ drying agent with UltraSeal XT plus sealant allows complete penetration into pits and fissures by eliminating moisture that can cause failure in hydrophobic sealants.

### BEFORE AND AFTER

Courtesy of Dr. Jaleena Fischer-Jessop.



Before.



After UltraSeal XT plus sealant.



Before.



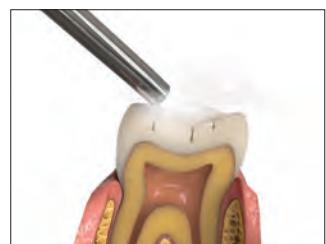
After UltraSeal XT plus sealant.

\*\* See IFU for complete instructions. **1.** realityesthetics.com. **2.** Alirezaei M, Bagherian A, Sarraf Shirazi A. Glass ionomer cements as fissure sealing materials: yes or no? A systematic review and meta-analysis. *J Am Dent Assoc.* 2018; 149(7):640-649.e9. doi:10.1016/j.adaj.2018.02.001 **3.** Data on file. **4.** Data on file. **5.** Data on file. **6.** Reality Ratings. Reality. Reality Publishing Company 1998-2017.

### FIVE SIMPLE STEPS\*\*



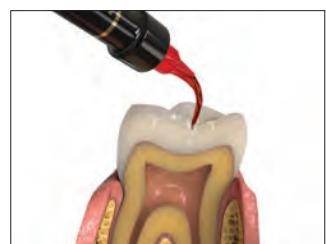
1. Etch for 30 seconds on uncut enamel, 15 seconds on cut enamel. Rinse.



2. Remove visible moisture. PrimaDry™ drying agent will desiccate.



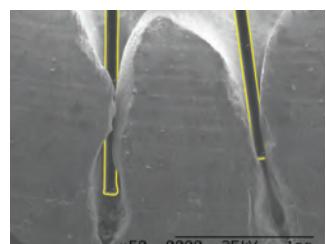
3. Apply PrimaDry agent for 5 seconds with Black Micro™ FX™ tip, then air dry.



4. Place UltraSeal XT plus sealant.



5. Light cure with VALO™ curing light on Standard Power for 10 seconds or 3 seconds on Xtra Power mode.



With its adjustable fibers and helical channel, the Inspiral™ Brush tip is designed to optimally deliver UltraSeal XT sealants.

Image of the bristles and tooth (on the right) were taken at the same magnification, and then overlaid.

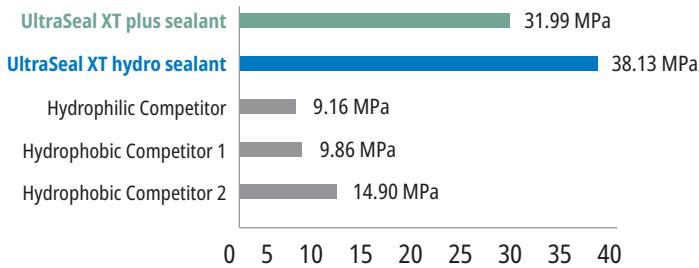
"We use this wonderful product on at least 30 patients a day. As a pediatric dentist for 38 years, prevention of cavities is the cornerstone of our practice. We have tried all the sealant products, and UltraSeal XT plus sealant has been the absolute best for ease of application and long-term retention and durability. The best testimony is having moms who were our patients bring their kids to us for sealants. Many of the moms still have sealants in place and have no cavities." —DR. JAMES HEFFNER — DAVIDSONVILLE, MD

"Being a pediatric dentist, this is one material I cannot practice without. I have never found such a user-friendly sealant that is so easy to apply and with such excellent retention as the UltraSeal XT plus sealant." —DR. DAVID GOLDSTEIN — ORLANDO, FL

"I love the UltraSeal XT plus sealant. I have used many different sealant products in my office as well as the dental school in which I am faculty. Actually, all the pediatric dental instructors had tried eight different sealants to compare, and UltraSeal XT plus was unanimously the sealant of choice. The viscosity, multiple shades, partially filled consistency, and the fact it is fluoride-releasing make UltraSeal XT plus the most reliable and superior sealant that I choose to use on my patients." —DR. ANGELA M. STOUT — ERDENHEIM, PA

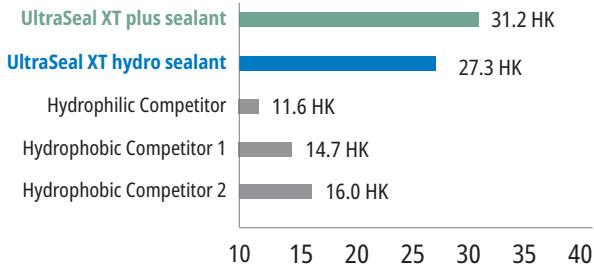


## PHYSICAL PROPERTY COMPARISON

SHEAR BOND<sup>1</sup>

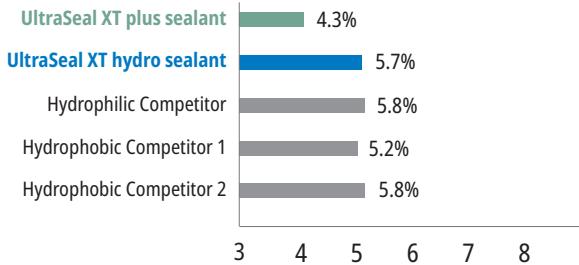
0 5 10 15 20 25 30 35 40

High shear bond strength is essential for retaining the sealant under normal use.

HARDNESS<sup>1</sup>

10 15 20 25 30 35 40

High hardness indicates a strong, durable sealant that won't break away or wear down.

SHRINKAGE<sup>1</sup>

3 4 5 6 7 8

Low shrinkage reduces the risk of marginal gaps which can lead to microleakage.



## UltraSeal XT plus Syringe 4pk and 20pk

Shade	4pk	20pk
Opaque White	726	727
Clear	565	—
A1	1289	—
A2	734	—

1.2 ml (2.04 g) syringes

1. Data on file.

## PrimaDry™

DRYING AGENT



- For use with UltraSeal XT plus pit and fissure sealant
- Reduces microleakage in hydrophobic sealants



Black Micro™ FX™ Tip page 134

PrimaDry drying agent is optimal for pit and fissure drying and prior to placement of hydrophobic sealants. It contains 99% organic solvents and 1% primer. PrimaDry drying agent rapidly volatilizes the moisture content of pits and fissures after rinsing off etchant with water spray and air drying. The ultrafine primer film allows UltraSeal XT plus pit and fissure sealant to flow perfectly into every pit and fissure.

## REFRIGERATE



716 - PrimaDry Syringe 4pk  
1.2 ml (3.53 g) syringes



## Black Micro™ FX™ Tip

- Accommodates various viscosities
- Flocked tip fans out to spread materials in a thin, uniform layer

Designed for: Composite Wetting Resin, Consepsis™ V, PrimaDry™, and PermaSeal™.

For more information on tips,  
see pages 134–140.



## UltraSeal XT™ hydro

HYDROPHILIC PIT AND FISSURE SEALANT



Inspiral™ Brush Tip page 135

- Hydrophilic before it is cured, hydrophobic once cured, and has a self-adhesive quality
- Advanced adhesive technology
- Fluoresces under black light to ensure sealant is still in place
- Highly filled resin - 53%
- Thixotropic/ideal viscosity flowability<sup>2</sup>
- Two shades: Opaque White and Natural

UltraSeal XT hydro hydrophilic pit and fissure sealant is a light-cured, radiopaque composite sealant that contains fluoride. It is stronger and more wear resistant because it is a 53%-filled resin and has less polymerization shrinkage than competitive products.<sup>3</sup> Used with the Inspiral™ Brush Tip, the thixotropic nature of UltraSeal XT hydro sealant causes itself to thin as it's expressed from the tip, allowing complete penetration deep into the pits and fissures. When the resin stops flowing, the shear thinning ceases and placement is complete,<sup>2</sup> preventing it from running before it can be light cured. The advanced hydrophilic chemistry works when all visible moisture has been removed. UltraSeal XT hydro sealant is more forgiving of moisture deep inside pits and fissures.

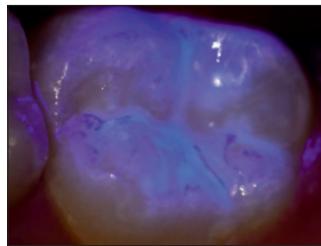
### BEFORE AND AFTER



Before.



After.

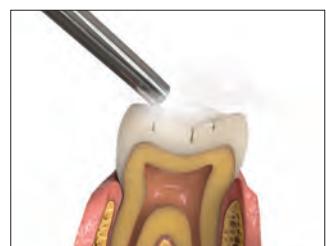


After placing a sealant, it is often difficult to check margins and retention. UltraSeal XT hydro sealant addresses that difficulty with added fluorescent properties. Fully viewable under a black light, the sealant's fluorescence allows you to check the integrity of the sealant at the time of placement and at subsequent visits.

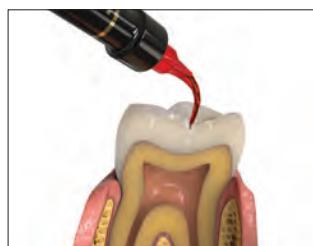
### FOUR SIMPLE STEPS\*



1. Etch for 30 seconds on uncut enamel, 15 seconds on cut enamel. Rinse.



2. Remove visible moisture.



3. Place UltraSeal XT hydro sealant.



4. Light cure with VALO™ curing light on Standard Power for 10 seconds or 3 seconds on Xtra Power mode.

*"Since I have had such great success with Opalescence™ Boost™ and Opalescence™ PF whitening, I also ordered the UltraSeal XT hydro sealant. I was previously using a competitor's sealant and they would pop off within a few weeks at times and just sat on top of the tooth. While placing the UltraSeal XT hydro sealant, you can literally see the sealant going into the pits and fissures! Day and night difference, and the use of the little light is a fun way to show the kids and parents and be able to check them at their 6-month appointments!!!"*

—STEPHANIE VIEAU, DENTAL ASSISTANT — CENTREVILLE, VA

### MARGINAL RETENTION AND MICROLEAKAGE<sup>4</sup>

#### UltraSeal XT hydro Sealant



No microlleakage.



Sealed margins.

#### Competitor Hydrophilic Sealant



Microlleakage.

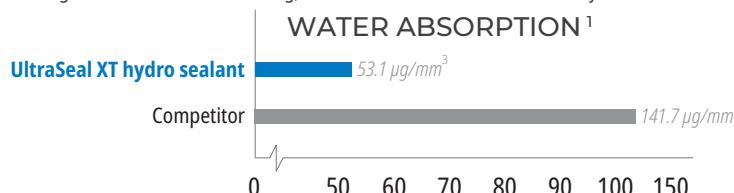


Peeling from margins.

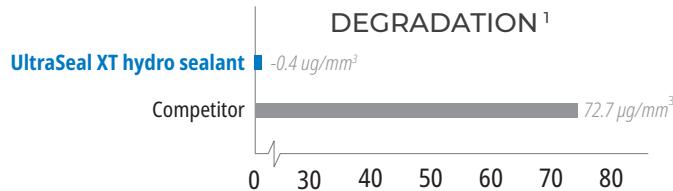
\* See IFU for complete instructions. 1. realityesthetics.com. 2. Data on file. 3. Data on file. 4. Data on file.



High hardness indicates a strong, durable sealant that won't break away or wear down.



Balanced water absorption allows forgiveness in moist environments without degradation.



No degradation as a result of balanced water absorption.



#### UltraSeal XT hydro Syringe Kits

Shade	Kit
Opaque White	3532
Natural	3533

1 x 1.2 ml (2.01 g) UltraSeal XT hydro syringe

1 x 1.2 ml (1.584 g) Ultra-Etch syringe

20 x Blue Micro tips

20 x Inspiral Brush tips



#### UltraSeal XT hydro Syringe 4pk and 20pk

Shade	4pk	20pk
Opaque White	3534	3536
Natural	3535	—

1.2 ml (2.01 g) syringes



#### 35551 - Black Light Keychain 1pk

1. Data on file.



## ULTRADENT'S TOOTH FAIRY PROGRAM

Redeem extracted teeth for credit towards Ultrudent's high-quality products!

### PROGRAM DETAILS



We will credit your Ultrudent account with \$1.00 for each usable tooth you send us.

In order for Ultrudent to develop the quality dental products that we provide, it is necessary that many products be tested on human teeth.

With this in mind, and for your convenience, we have set up a simple process whereby you can dispose of extracted teeth and redeem for credit. This credit can be used to purchase Ultrudent products.

We will supply you with 50 ml bottles of .05% Chlorhexidine Gluconate\* solution for safe storage and shipping. For each usable tooth\*\* you send us, we will credit your Ultrudent account with \$1.00 toward future purchases of Ultrudent products.

To order your bottles for the program, please contact us at **801.552.5512 ext. 4180** or [anita.raisch@ultradent.com](mailto:anita.raisch@ultradent.com).

We appreciate your contribution.

\*Chlorhexidine Gluconate is a decontaminant that conforms to OSHA standards and state laws for shipping teeth. Specific bio-hazard or color-coded labeling is not required under OSHA requirements.

\*\*Usable teeth include whole adult teeth without root canals or major decay. Teeth should be unbroken with the coronal portion significantly intact. Teeth with small fillings or small- to medium-sized decay are acceptable.



# Unlimited Movement

**ultrapro™ Tx  
cordless**



## Ultrapro™ Tx Cordless

HYGIENE HANDPIECE



- Cordless design allows for unlimited movement
- Compatible with most DPAs for maximum usability
- A single wireless charge can last an entire day
- Automatic shutoff after five minutes
- Working output of up to 4,000 RPM
- Wireless Bluetooth foot control
- Lightweight and ergonomic
- 2-year handpiece warranty
- 1-year battery warranty

The Ultrapro™ Tx Cordless handpiece gives you the power of a corded handpiece with the unlimited movement of cordless. The cordless design means you have the ability to approach a tooth from any angle with no cord drag.



### 5275 - Ultrapro Tx Cordless Prophy Motor Kit

1 x Cordless prophy motor  
3 x Sheaths  
1 x Foot control  
1 x Charger base  
2 x Wall chargers  
4 x Prophy angles  
100 x Barrier sleeves  
6 x Black sheath O-rings  
2 x Green motor O-rings

**5276 - Ultrapro Tx Cordless Prophy Sheath Kit**

1 x Sheath  
4 x Black sheath O-rings  
2 x Green motor O-rings

**5531 - Ultrapro Tx Cordless Prophy Wall Charger**

**Replacement Part**  
1 x Wall Charger

**5532 - Ultrapro Tx Cordless Prophy O-Ring**

**Replacement Part**  
6 x Black sheath O-rings  
2 x Green motor O-rings

**5533 - Ultrapro Tx Cordless Prophy Foot Control**

**Replacement Part**  
1 x Foot control

**5534 - Ultrapro Tx Cordless Prophy Charger**

**Base Replacement Part**  
1 x Charger base

**5499 - Ultrapro Tx Cordless Prophy Motor Barrier**

**Sleeves 500pk**  
500 x Barrier sleeves

**Ultrapro™ Tx Air**

HYGIENE HANDPIECE

2024<sup>1</sup>

REALITY  
Product of the Year



- Lightweight—2.2 oz to reduce hand and arm fatigue<sup>2</sup>
- Ergonomically shaped and low vibration for maximum comfort
- Swivels 360° for easy rotation
- Soft-start motor to minimize splatter
- Maximum speed of 4,000 RPM
- Universal E-type motor for multifunctionality
- Compatible with nearly all disposable prophy angles
- 2-year handpiece warranty

Featuring an ergonomic handpiece, innovative prophy angle designs, and low splatter prophy pastes, our Ultrapro Tx family of products offer a powerful, comfortable, and effective solution to all your polishing needs.

**8502 - Ultrapro Tx Air Kit**

1 x Motor  
3 x Nose cones  
1 x Universal lubricating oil



8503 - Ultrapro Tx Air **Green Nose Cone 1pk**

8504 - Ultrapro Tx Air **Pink Nose Cone 1pk**

8505 - Ultrapro Tx Air **Blue Nose Cone 1pk**

**8506 - Ultrapro Tx Air Motor 1pk****8316 - Universal Lubricating Oil - 0.5 oz Bottle 1pk**

<sup>1</sup> realityesthetics.com. <sup>2</sup> Moravec, L. Habits for a healthy practice. *Dimen Dent Hyg.* 2012;10(11):42–44.



## Ultrapro™ Tx

PROPHY PASTE



COOL MINT



WALTERBERRY™



BUBBLE GUM



ORANGE DREAMSICLE



PURE

- Contains 1.23% fluoride ion
- Low splatter formula
- Rinses easily and completely to eliminate residual grittiness
- Gluten free
- PURE is free of fluoride, flavors, dyes, and oil

### Ultrapro Tx 2 g 200pk

Flavor	Fine	Medium	Coarse
Cool Mint	8309	8310	8311
Walterberry	8320	8312	8313
Bubble Gum dye-free	—	8314	8315
Variety W-100, OD-50, CM-50	—	8327	—
PURE	—	8325	—

1. realityesthetics.com.

## Ultrapro™ Tx

DISPOSABLE PROPHY ANGLES



- Innovative cup design for reduced splatter and efficient cleaning
- Skini and Sweep angles are designed for better access and improved visibility, with 20% shorter head and 25% slimmer neck
- All designs feature optimal flare
- Extra, Skini, and Sweep angles have outer ridges for improved interproximal cleaning
- Extra and Skini angles are available in right- or contra-angle designs
- Comfortable, ergonomic design
- Not made with natural latex rubber
- Skini angle is sterile to minimize risk of infection

Ultrapro Tx disposable prophy angles feature smooth, quiet gears and an ergonomic design so that both you and your patient have a comfortable experience. With an advanced cup design both inside and out, the Extra, Skini, and Sweep angles are built to clean better than ever.

## Ultrapro™ Tx Sweep™

DISPOSABLE PROPHY ANGLES WITH BRUSH GUARD



- Brush helps prevent accumulation of saliva and paste on outside of the cup
- Sweeps paste back toward the tooth, allowing the clinician to continue working and make fewer stops to refill the cup with prophy paste
- Advanced internal blade design
- Outer ridges for interproximal cleaning
- A 20% shorter head and 25% slimmer neck design gives better access and improved visibility
- Optimal flare
- Comfortable, ergonomic shape
- Not made with rubber latex
- Available in soft or firm cup design

The Ultrapro Tx Sweep disposable prophy angle has an innovative brush guard designed to keep the treatment field clean and free of excess saliva and paste. The flexible bristles efficiently keep saliva from collecting and roping around the outside of the cup. The cup also sweeps the prophy paste back toward the tooth, so the paste is not wasted and lost in the saliva.



## 8356 - Ultrapro Tx Tapered Brush 100pk



original	144pk	500pk
Soft	8308	8318
Firm	—	8317



extra	500pk
Soft	8342
Firm	8343



extra CONTRA	500pk
Soft	8346
Firm	8347



STERILE R	skinI	500pk
	Soft	8350
	Firm	8351



STERILE R	skinI CONTRA	500pk
	Soft	8354
	Firm	8355



sweep	144pk	500pk
Soft	8357	8359
Firm	8358	8360

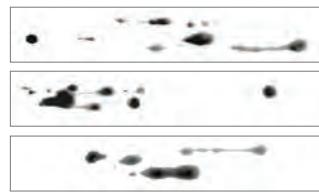
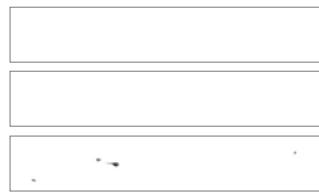


## DPA HEAD COMPARISON



Reduces splatter by up to 95%  
to help prevent cross contamination.<sup>1</sup>

## SWEEP DPA SPLATTER COMPARISON TESTING



Ultrapro Tx Sweep prophy angle

Traditional prophy angle

1. Data on file.



# PREVENT AND HYGIENE

MORE THAN JUST **GREAT TASTE!**



## Enamelast™

FLUORIDE VARNISH



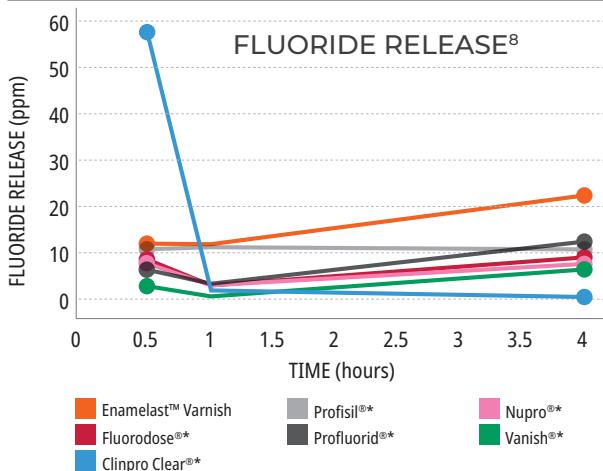
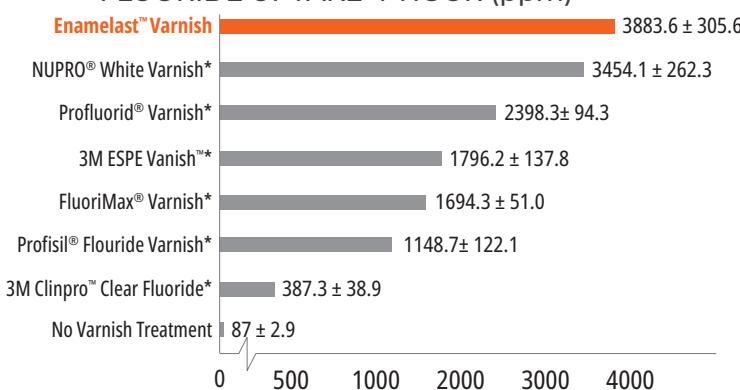
SoftEZ® Tip page 137

- Patented adhesion-promoting system for enhanced retention
- Superior fluoride release and uptake<sup>2</sup>
- Smooth, nongritty texture
- Nearly invisible appearance
- Nut free and gluten free

Enamelast fluoride varnish is a xylitol-sweetened, 5% sodium fluoride in a resin carrier. Its unique formula is made with a patented adhesion-promoting system for enhanced retention, while providing superior fluoride release and uptake.<sup>2</sup> Available in syringe applications in **Walterberry™** flavor and unit-dose applications in **Walterberry, Orange Cream, Cool Mint, Bubble Gum, Caramel** flavors, and **Flavor-Free**.

Enamelast fluoride varnish produces a mechanical occlusion of the dentinal tubules in the treatment of tooth hypersensitivity.<sup>3</sup> The AAPD recommends fluoride varnish for use as a preventative adjunct to reduce the risk of caries.<sup>4</sup> The use of fluoride varnish for caries prevention has also been endorsed by the ADA.<sup>5</sup>

### FLUORIDE UPTAKE 4-HOUR (ppm)<sup>6,7</sup>



## BEFORE AND AFTER



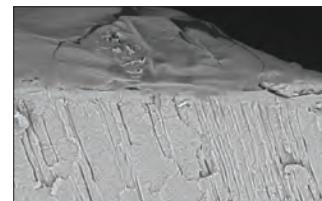
Before Enamelast fluoride varnish.



Immediately after applying Enamelast fluoride varnish.



Enamelast varnish produces a mechanical occlusion of the dentinal tubules in the treatment of tooth hypersensitivity.<sup>3</sup> This makes it ideal to use before or after whitening to help ease patient discomfort in the cervical area.



### 4521 - Enamelast Walterberry Syringe Kit

2 x 1.2 ml (1.23 g) syringes  
4 x SoftEZ tips



### 4523 - Enamelast Walterberry Syringe 20pk

1.2 ml (1.23 g) syringes

### Enamelast Unit-Dose 0.4 ml

Flavor	50pk	200pk
Walterberry	4518	4528
Orange Cream	4344	4343
Cool Mint	4353	4352
Bubble Gum	4363	4362
Caramel	4819	4822
Flavor-Free	5188	5187



### 4529 - Enamelast Application Brushes 200pk



\* Trademark of a company other than Ultrudent. **1.** realityesthetics.com. **2.** Data on file. **3.** Data on file. **4.** American Academy of Pediatric Dentistry. Policy statement on the use of fluoride. Adopted 1967. Reaffirmed 1977. Revised 2018. Available from [http://www.aapd.org/media/Policies\\_Guidelines/P\\_FluorideUse.pdf](http://www.aapd.org/media/Policies_Guidelines/P_FluorideUse.pdf). **5.** American Dental Association Council on Scientific Affairs. Professionally applied topical fluoride: evidence-based clinical recommendations. *J Am Dent Assoc.* 2006;137(8):1151-1159. **6.** McClure H. Fluoride Uptake into Sound Enamel Substrate Provided by Fluoride Varnishes and Resultant Surface Microhardness Effects via a Combination in Vitro Flow Model & PH Cycling Treatment Regimen Study Number 24-562. Therapeutic Technologies, Inc. Dental Product Testing Division; 2025. **7.** McClure H. Fluoride Uptake into Sound Enamel Substrate Provided by Fluoride Varnishes and Resultant Surface Microhardness Effects via a Combination in Vitro Flow Model & PH Cycling Treatment Regimen Study Number 24-522. Therapeutic Technologies, Inc. Dental Product Testing Division; 2024. **8.** Data on file.

**Ultradent™ Universal Dentin Sealant**

FOR TRANSIENT ROOT SENSITIVITY

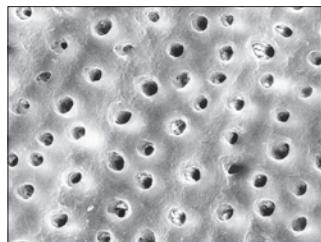


Black Mini™ Brush Tip page 134

- Quick application—paint and dry
- Great for hygienists' "tool box"
- Ideal following scaling and root planing
- Temporary blockage of tubules

Ultradent Universal Dentin Sealant is a biocompatible, nonpolymerizable, high-molecular-weight resin in a volatile organic solvent.

Coat sensitive roots with Ultradent Universal Dentin Sealant to seal tubules and reduce discomfort<sup>1</sup> after scaling and root planing.



Ultradent Universal Dentin Sealant covers dentin with a protective seal. Both surfaces have been conditioned with phosphoric acid for 20 seconds; SEM on the right was sealed first with Ultradent Universal Dentin Sealant.<sup>2</sup>



**266 - Universal Dentin Sealant Syringe 4pk**  
1.2 ml (1.08 g) syringes

Note: Ultradent Universal Dentin Sealant is NOT a bonding agent.  
For unsurpassed bonding products, see pages 68–70.  
If base or liner is needed, use Ultra-Blend™ plus liner, page 73.

**1.** Milia E, Castelli G, Bortone A, et al. Short-term response of three resin-based materials as desensitizing agents under oral environmental exposure. *Acta Odontol Scand*. 2013;71(3-4):599-609. doi:10.3109/00016357.2012.700063. **2.** Data on file.

**Opalpix™**

INTERPROXIMAL CLEANER



Toothpicks vs. Opalpix cleaners.

- Will not splinter or break
- Has a textured surface for better cleaning
- Perfect balance between flexibility and rigidity
- Massages interproximal tissue while removing debris and plaque
- Personalized stickers available with 100pk upon request

**USES**

Use Opalpix interproximal cleaners to clean under and around bonded retainers and brackets.



**5590 - Opalpix 100pk**  
Each pk contains 32 Opalpix cleaners



# PREVENT AND HYGIENE



## BEFORE AND AFTER



Results in as little as one week<sup>1</sup>

### Opalescence™ Whitening Toothpaste

ORIGINAL AND SENSITIVITY RELIEF

- Whitens teeth up to 2 shades in just 2 weeks<sup>2</sup>
- Contains hydrated silica which is proven to remove staining<sup>1</sup>
- Gentle on gums<sup>1</sup>
- Safe for long-term daily use
- Contains sodium fluoride to help prevent cavities and strengthen enamel<sup>3</sup>
- Exceptional fluoride uptake<sup>4</sup>
- 78 RDA<sup>5</sup>
- Triclosan and TiO<sub>2</sub> free
- Vegan - no animal products are used



1.0 oz	24pk
Original	402
Sensitivity	3472



1.0 oz	48pk
Original	6472



4.7 oz	12pk
Original	401
Sensitivity	3470

Opalescence™ whitening is the global leader in professional tooth whitening.<sup>6</sup> Part of that product family is Opalescence™ Whitening Toothpaste, which was developed by a dentist. It actively removes surface stains<sup>2</sup> and is gentle enough to use every day,<sup>6</sup> thanks to its unique silica blend.

- Two kinds of exotic mint are blended into a fresh, clean, cool flavor
- Sweetened with xylitol, which may reduce the risk of tooth decay
- Our Sensitivity Relief formula provides all the whitening benefits of the Original, with the added benefit of maximum strength 5% potassium nitrate

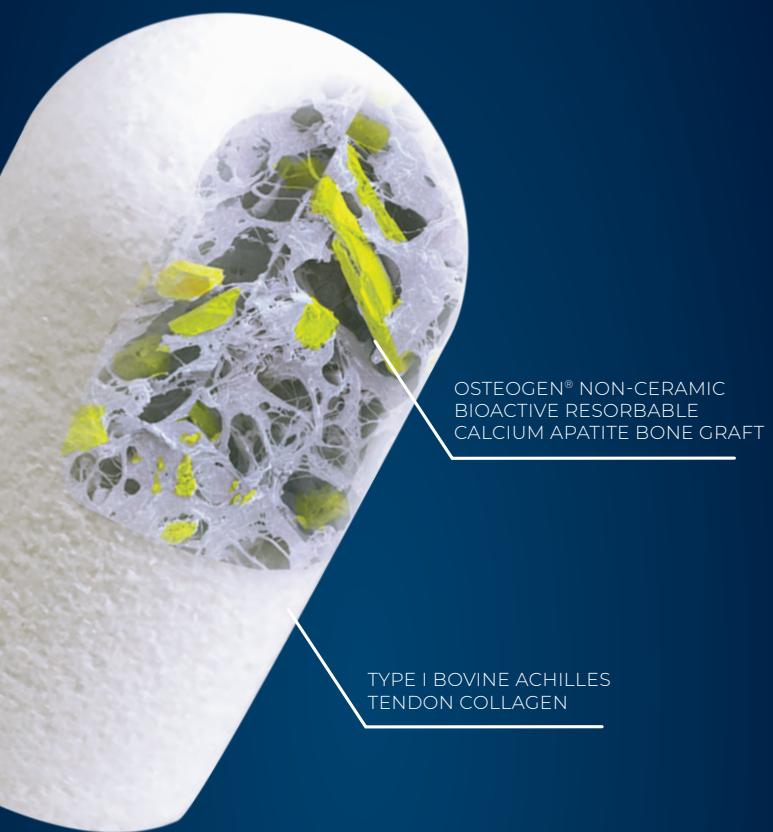
1. Çakmakçıoğlu O, Yılmaz P, Topbaşı BF. Clinical evaluation of whitening effect of whitening toothpastes: A pilot study. *OHDM BMC*. 2009;8(4):6–13. 2. Dursun MN, Ergin E, Tekce AU, Gurgan S. Which whitening toothpaste with different contents is more effective on color and bond strength of enamel?: *J Esthet Restor Dent*. 2023;35(2):397–405. doi:10.1111/jerd.12968 3. Sivapriya E, Sridevi K, Periasamy R, Lakshminarayanan L, Pradeepkumar AR. Remineralization ability of sodium fluoride on the microhardness of enamel, dentin, and dentinoenamel junction: An in vitro study. *J Conserv Dent*. 2017;20(2):100–104. doi:10.4103/JCD.JCD\_353\_16. 4. Data on file. 5. Data on file. 6. Data on file.



MARTIN WEBB - Zion National Park

# SURGICAL

OsteoGen Plug  
OsteoGen Strips  
SST - Surgical Suction Tip  
Ultradent Luer Vacuum Adapter



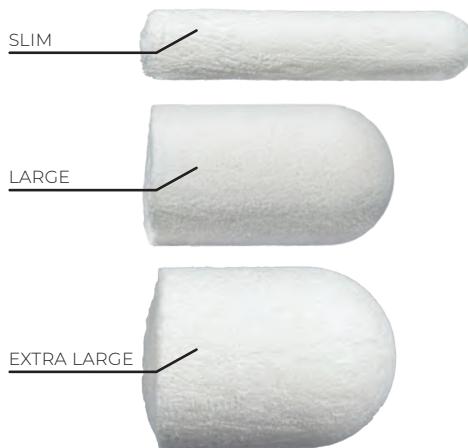
## OSTEOGEN® PLUG

ONE-STEP BONE GRAFTING SOLUTION:

SOCKET PRESERVATION WITHOUT  
THE NEED FOR A MEMBRANE

### OsteoGen® Plug\*

ONE-STEP BONE GRAFTING SOLUTION

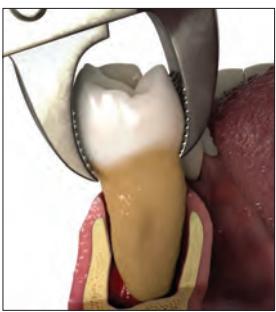


- The OsteoGen® Bone Grafting Plug is an easy and affordable way to clinically deliver bone graft. It's mainly used for ridge maintenance and socket preservation.
- The idea is simple: a collagen plug is filled with OsteoGen® non-ceramic bone graft crystals. This creates the OsteoGen® Bone Grafting Plug.
- The result is a bone graft combined with a collagen plug for ease of clinical delivery, without the need for a membrane.
- The OsteoGen® Bone Grafting Plug combines Bioactive Resorbable Calcium Apatite with a bovine Achilles tendon collagen matrix. This creates a structure that mimics the organic and inorganic components of physiologic bone.
- OsteoGen® is a bioactive and resorbable calcium apatite-based bone graft. It is physiochemically and crystallographically similar to human bone.<sup>1</sup>
- The OsteoGen® non-ceramic production process yields a resorbable bone graft with a unique Ca:P ratio. It is NOT a  $\beta$ -TCP and NOT a non-resorbable dense ceramic HA (nor is it a biphasic mixture of the two).
- The Bovine Achilles Tendon collagen carries the bone graft for easy and efficient delivery to the site. Thus, the hassle and time spent mixing and packing particulate bone grafts is eliminated, and so is the potential for particulate wash out.
- The Type I collagen acts as a wound dressing, not only to stabilize the clot, but also to absorb and deliver blood flow to the slowly resorbing graft (a feature critical for the initiation of bone formation and early angiogenesis).
- The collagen found in the OsteoGen® Plug provides a scaffold for keratinized tissue to develop over the grafted site.
- The OsteoGen® Bone Grafting Plug will show radiolucent on the day of placement. It becomes radiopaque in 3–6 months when it has been replaced with host bone.<sup>2</sup> Implant placement can then be achieved.

\* Manufactured by Implantent Ltd. Jamaica, NY. **1.** Valen M, Ganz SD. A synthetic bioactive resorbable graft for predictable implant reconstruction: part one. *Oral Implantol*. 2002;28(4):167–177. **2.** Data on file.



## STEPS TO SUCCESS\*



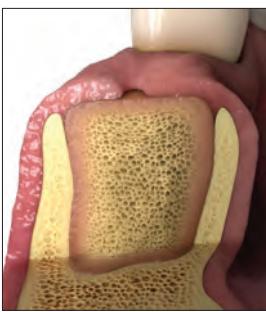
1. Extract tooth and thoroughly debride site in order to increase the healing capacity of the affected tissues.<sup>1</sup>



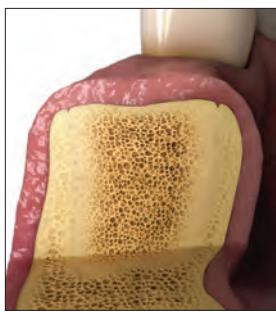
2. Insert OsteoGen® Plug to deliver bone graft and absorb blood flow. This will stabilize the clot and initiate early bone formation and angiogenesis.



3. Approximate tissue and crisscross suture over top to keep OsteoGen Bone Grafting Plug in place. There is no need to use a membrane to cover.



4. While OsteoGen Plug resorbs, the OsteoGen bone graft crystals offer a slowly resorbing bioactive scaffold for bone formation while the collagen provides a scaffold for developing tissue.



5. The OsteoGen® crystals resorb over 3–6 months (patient specific)<sup>2</sup> and will turn from radiolucent to radiopaque, which indicates sufficient bone formation.

## CLINICAL APPLICATION

Clinical images courtesy of Brigham Storer, DDS.



1. Pre-operative X-ray of tooth 12 to be extracted. Tooth 13 was extracted two months prior and was grafted with an OsteoGen® Plug.



2. Tooth 12, set to be extracted.

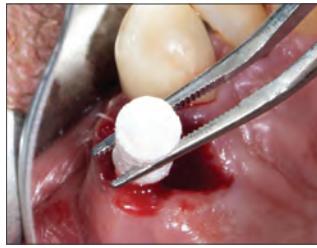
Clinical images courtesy of German Muris, DDS, ABOM/D



1. OsteoGen® is a low density bone graft and the OsteoGen® Plugs will show radiolucent on the day of placement.



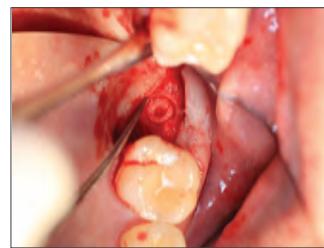
3. The surgical site was initially debrided to induce bleeding and establish the Regional Acceleratory Phenomenon.



4. Appropriately sized OsteoGen® Plugs were inserted, and blood was allowed to absorb.



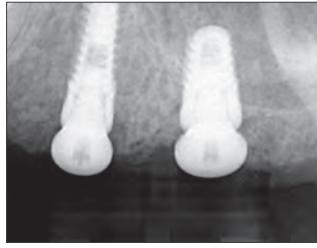
3. The collagen promotes keratinized soft tissue coverage over the graft.



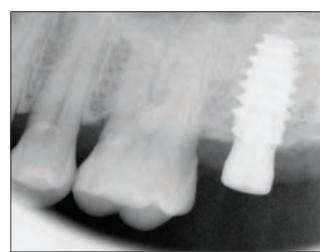
4. Solid bone is seen upon reentry prior to implant placement. In this image, a core sample was retrieved.



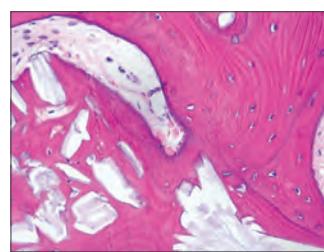
5. After insertion of OsteoGen® Plugs, the socket was sutured over top. No membrane was required.



6. Two implants placed four months later with a sinus bump on the distal implant.



5. Implant is placed. Note the histology below showing mature osteocytes in lamellar bone formation.

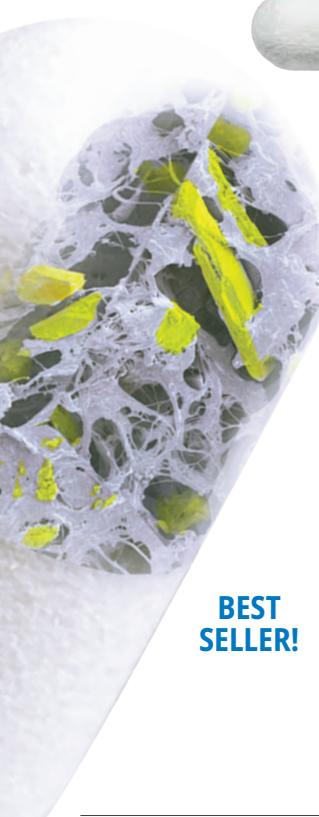


6. Some of the larger OsteoGen crystals and clusters are slowly resorbing. Bioactivity is demonstrated by the high bone to crystal contact absent of any fibrous tissue encapsulation.<sup>3,4</sup>

\* See IFU for complete instructions. 1. Frost HM. The regional acceleratory phenomenon: a review. *Henry Ford Hosp Med J.* 1983;31(1):3-9. 2. Data on file. 3. Ricci JL, Blumenthal NC, Spivak JM, Alexander H. Evaluation of a low-temperature calcium phosphate particulate implant material: physical-chemical properties and in vivo bone response. *J Oral Maxillofac Surg.* 1992;50(9):969-978. 4. Spivak JM, Ricci JL, Blumenthal NC, Alexander H. A new canine model to evaluate the biological response of intramedullary bone to implant materials and surfaces. *J Biomed Mater Res.* 1990;24(9):1121-1149. doi:10.1002/jbm.820240902.



## SURGICAL



**BEST  
SELLER!**

25 mm

SLIM

6 mm

20 mm

LARGE

10 mm

20 mm

EXTRA LARGE

15 mm



**OPS625-5 - OsteoGen Plug Slim 5pk**



**OPS625-10 - OsteoGen Plug Slim 10pk**



**OPL1020-5 - OsteoGen Plug Large 5pk**



**OPL1020-10 - OsteoGen Plug Large 10pk**



**OPXL1520-5 - OsteoGen Plug Extra Large 5pk**



### ULTRADENT'S TOOTH FAIRY PROGRAM

**We will credit your Ultradent account with \$1.00 for each usable tooth you send us.**

In order for Ultradent to develop the quality dental products that we provide, it is necessary that many products be tested on human teeth. With this in mind, and for your convenience, we have set up a simple process whereby you can dispose of extracted teeth and redeem credit.

This credit can be used to purchase Ultradent products. We will supply you with 50 ml bottles of .05% Chlorhexidine Gluconate\* solution for safe storage and shipping. For each usable tooth\*\* you send us, we will credit your Ultradent account with \$1.00 toward future purchases of Ultradent products.

To order your bottles for the program, please contact us at **801.552.5512 ext. 4180** or [anita.raisch@ultradent.com](mailto:anita.raisch@ultradent.com). We appreciate your contribution.

\*Chlorhexidine Gluconate is a decontaminant that conforms to OSHA standards and state laws for shipping teeth. Specific bio-hazard or color-coded labeling is not required under OSHA requirements.

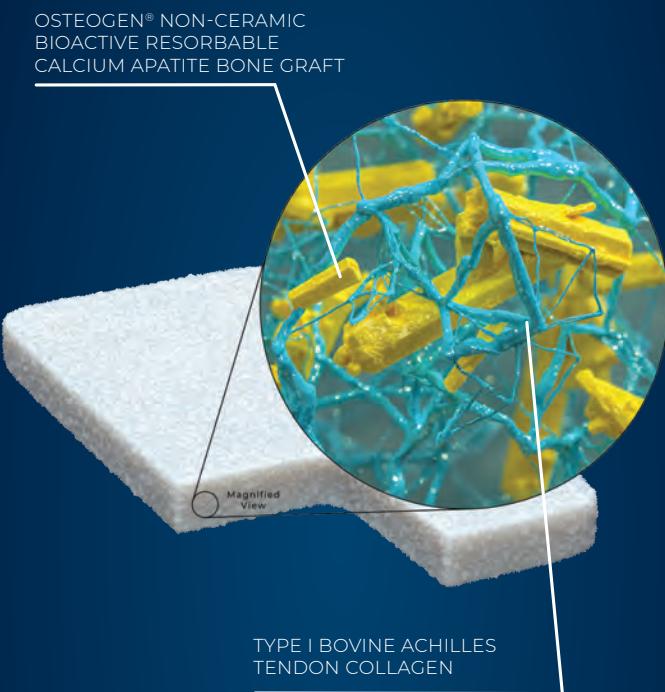
\*\*Usable teeth include whole adult teeth without root canals or major decay. Teeth should be unbroken with the coronal portion significantly intact. Teeth with small fillings or small- to medium-sized decay are acceptable.

**Redeem extracted teeth for credit towards Ultradent's high-quality products!**



## OsteoGen® Strips\*

ONE-STEP BONE GRAFTING SOLUTION



OsteoGen® Strips infuse OsteoGen® bone graft crystals into a collagen strip to eliminate problems with particulate migration. They are a predictable and simple solution for sinus lifts and grafting gaps between the implant and extraction socket wall.

# OSTEOGEN® STRIP

RESORBABLE MINERALIZED  
COLLAGEN BONE GRAFTING STRIP

- Flexible strips easily conform to the grafting site, eliminating gaps in bony walls
- Eliminates chance of particulate wash out; crystals are contained in the collagen
- Use as a mineralized collagen cover to contain particulates in extraction sites
- Easy and effective ridge expansion, can be curved over a narrow ridge for added width
- Can be folded or layered to create added volume then packed into defect space
- Extremely porous and hydrophilic
- Can be used as a mineralized scaffold for added growth factors or autologous serum
- Four-year shelf life

\* Manufactured by Implantent Ltd. Jamaica, NY.



# SURGICAL

Clinical images courtesy of  
Robert Miller, DDS, ABOMD.

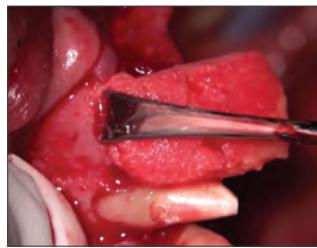
## CLINICAL APPLICATION\*



1. Implant is placed lingually following extraction. OsteoGen® Strip will be used to fill gaps and reinforce the buccal wall.



2. OsteoGen® Strip is hydrated with patient's blood from the surgical site and, if desired, autologous serum or other growth factors prior to delivery.



3. Buccal plate is reinforced by feeding the OsteoGen® Strip downwards in between the implant and the buccal wall.



4. The OsteoGen® Strip is a hydrophilic material that can be hydrated with the patient's blood and substantially compressed to fill a variety of defects.



5. The OsteoGen® Strip can be folded after hydration and prior to or during placement with a blunt instrument for additional bone width and stability.



6. After placement, the OsteoGen® Strip reinforces the buccal wall while grafting the gaps between the buccal plate and the implant.

40 mm



LARGE

20 mm



OSL20403-2 - OsteoGen Strip Large 2pk

20 mm



SMALL

12 mm



OSS12203-2 - OsteoGen Strip Small 2pk

## SST™ - Surgical Suction Tip

- Ideal for delicate surgeries
- Large-diameter tip opening

Designed for: Ultradent™ Luer Vacuum Adapter for small periodontic or endodontic procedures and controlled suction of Opalescence™ Pro whitening gel. Potential considerations: Always verify flow and functionality prior to intraoral use.

LOK-TITE™	20pk
SST	1248



\* See IFU for complete instructions.

## Ultradent™ Luer Vacuum Adapter

- A great time saver for any practice
- Dries canals quickly and efficiently
- Minimizes paper point use



Luer Vacuum Adapter	10pk
	230



ANGELA WELLS - Fire Lake

# TIPS AND SYRINGES

## RESTORATIVE

Black Micro FX  
Black Mini  
Black Mini Brush  
Black Micro  
Blue Micro  
Blue Mini Dento-Infusor  
ExperTemp Mixing  
Inspirail Brush  
Metal Dento-Infusor  
Micro Capillary  
Micro 20 ga  
SoftEZ  
SST  
White Mac

## ENDODONTICS

Capillary  
Micro Capillary  
Endo-Eze Irrigator  
Endo-Eze  
NaviTip with Single Sideport  
NaviTip  
NaviTip with  
Double Sideport Irrigator  
NaviTip FX

## IMPRESSIONS

Mixing  
IntraOral Impression  
Thermo Clone Mixing

## SYRINGES

Skini Delivery  
Delivery Syringes  
Empty Delivery  
Syringes  
Syringe Cover

## ACCESSORIES

Luer Lock Cap  
Luer Vacuum Adapter  
TriAway Adapter  
Syringe Organizer  
STARbrush  
Micro Applicators



# RESTORATIVE TIPS

## ULTRADENT™ TIPS DESIGNED TO DELIVER

Check out our tips with **LOK-TITE™** and **COMFORT HUB™**

Luer Lock tips with Lok-Tite feature double threads that lock the tip into place for increased security and wings for easy attachment and removal.

Tips with the Comfort Hub feature include larger ergonomic wings that provide a secure, comfortable grasp of the tip.

► B

The chemistries you use are different. Some are chemically activated, needing to be mixed immediately before delivery. Others have varying viscosities. Some work in pits and fissures, some inside canals, and some on smooth surfaces. Each chemistry you use is designed for a specific purpose. Shouldn't the same be true for your tips?

Ultrudent makes tips designed to deliver each chemistry we create. Whether you're delivering a solution, a flowable composite, a viscous gel, or thick impression material, we make the perfect tip for the job. And since our tips are engineered on-site, we test each design to ensure it performs to the highest standards.

### Restorative



#### Black Micro™ FX™ Tip

- Accommodates various viscosities
- Flocked tip fans out to spread materials in a thin, uniform layer

Designed for: Composite Wetting Resin, Consepsis™ V, PrimaDry™, and PermaSeal™.

LOK-TITE™	100pk
22 ga Black Micro FX	1357



#### Black Mini™ Tip

- Dispenses large volumes
- Opaque plastic preserves flow of light-cured materials

Designed for: J-Temp™, Ultra-Blend™ plus, Ultrudent™ LC Block-Out Resin, PermaFlo™, OpalDam™ Green, DeOx™, TriAway™ Adapter, Opalescence™ Pro, Ultrudent™ Diamond Polish Mint, OpalDam™, Opalescence™ Endo, and OraSeal™ Caulking.

LOK-TITE™	100pk	500pk
Black Mini	514	1433



#### Black Mini™ Brush Tip

- Precise, controlled delivery of aqueous materials
- Tight, adjustable brush fibers minimize bubbles
- Unique to Ultrudent

Designed for: Consepsis™, Peak™ SE, Peak™-ZM, Sable™ Seek™, Ultrudent™ Silane, and Ultrudent™ Universal Dentin Sealant.

LOK-TITE™	100pk	500pk
Black Mini Brush	1169	1432

**Black Micro™ Tip**

- Provides pinpoint precision
- Narrow cannula accurately delivers materials

Designed for: Ultra-Blend™ plus.

	100pk	500pk
22 ga Black Micro	1085	1435

**Blue Micro™ Tip**

- Provides pinpoint precision
- Narrow cannula accurately delivers materials

Designed for: Ultra-Etch™.

	100pk	500pk
25 ga Blue Micro	127	1436

**Blue Mini™ Dento-Infusor™ Tip**

- Offers the same tissue management benefits as the Metal Dento-Infusor™ tip
- Allows controlled flow of drop-sized quantities
- Outer diameter 1.2 mm

Designed for: Consepsis™, Astringedent™, and Astringedent™ X.

LOK-TITE®	mm	100pk	500pk
Blue Mini Dento-Infusor	1.20	1086	1440

**ExperTemp™ Mixing Tip**

- Mixes and delivers in one action

Designed for: ExperTemp™.

	45pk
ExperTemp Mixing	6346

**Inspiral™ Brush Tip**

- Delivers viscous or filled materials smoothly via an internal helical channel and ridge
- Tight, adjustable brush fibers minimize bubbles

Designed for: Composite Wetting Resin, Peak™ Universal Bond, PQ1™, Ultradent™ Porcelain Etch, Ultra-Etch™, UltraSeal XI™ plus, and UltraSeal XT™ hydro.

LOK-TITE®	100pk	500pk
Inspiral Brush	123	1033-I



# RESTORATIVE TIPS



## Metal Dento-Infusor™ Tip with Comfort Hub™

- Comfort Hub™ design allows for secure, comfortable control while attaching or removing tip
- Places hemostatic agents precisely and effectively removes superficial coagulum
- Blunt, bent cannula with padded brush enables gentle pressure in the sulcus
- Ultradent's first tip, the "MDI" remains paramount for successful tissue management

Designed for: Astringedent™, Astringedent™ X, ViscoStat™, ViscoStat™ Clear, PQ1™, and Peak™ Universal Bond.

### COMFORT HUB™

LOK-TITE™	100pk	500pk
19 ga Metal Dento-Infusor	4955	4956



## Micro Capillary™ Tips

- Bright color is easily identified against soft tissues
- The world's smallest molded tips

Attach to the Ultradent Luer Vacuum Adapter for moisture removal of small prep areas and small periodontal pockets.

LOK-TITE™	mm	20pk	100pk
0.008" Micro Capillary	5	1120	1802
0.008" Micro Capillary	10	1121	—



## Micro 20 ga Tip

- Large-gauge cannula enables consistent flow
- Standard flowable composite delivery tip

Designed for: MTAFlow™, MTAFlow™ White, PermaFlo™, PermaFlo™ Purple, PermaFlo™ Pink, UltraCal™ XS, J-Temp™, OpalDam™, and OpalDam™ Green.

LOK-TITE™	100pk	500pk
20 ga Micro	1252	1437



### SoftEZ™ Tip

- Tip fibers provide visible, controlled delivery
- Brush fibers facilitate smooth application

Designed for: Enamelast™.

<b>LOK-TITE®</b>	<b>50pk</b>
SoftEZ	4712



### SST™ - Surgical Suction Tip

- Ideal for delicate surgeries
- Large-diameter tip opening

Designed for: Ultradent™ Luer Vacuum Adapter for small periodontic or endodontic procedures and controlled suction of Opalescence™ Pro whitening gel.

<b>LOK-TITE®</b>	<b>20pk</b>
SST	1248



### White Mac™ Tip

- Dispenses thick and large volumes
- All-plastic delivery tip
- Greater angle for easy intraoral delivery

Designed for: OraSeal™ Caulking, OraSeal™ Putty, Consepsis™ Scrub, Opalustre™, and thicker paste chemistries.

<b>White Mac</b>	<b>100pk</b>	<b>500pk</b>
White Mac	1361	1480



# ENDODONTIC TIPS

Potential Considerations: Always verify flow and functionality prior to intraoral use.

**WARNING:**

- Use recommended endodontic tip • Make sure rubber stopper is in position
- Take extra precaution when not using sideport tips • Make sure tip is not wedged in the canal



## Capillary Tips

- Evacuates canals and substantially minimizes use of paper points
- Narrow, flexible taper accesses curved canals
- Great for dental abscess procedures

Never use to deliver irrigating materials or endodontic chemistries.

Attach to the Ultradent™ Luer Vacuum Adapter for moisture removal from endodontic canals.

LOK-TITE™	Internal diameter	20pk	50pk
0.014" Capillary	0.36 mm	341	3099
0.019" Capillary	0.48 mm	186	1425



## Micro Capillary™ Tips

- Bright color is easily identified against soft tissues
- The world's smallest molded tips

Attach to the Ultradent Luer Vacuum Adapter for moisture removal of small prep areas and small periodontal pockets.

LOK-TITE™	Tip length	20pk	100pk
0.008" Micro Capillary	5 mm	1120	1802
0.008" Micro Capillary	10 mm	1121	—



## Endo-Eze™ Irrigator Tip

- Provides ideal reach while expressing chemicals towards the canal wall, reducing pressure directly towards the apex
- Comes with a flexible, blunt cannula with a unique, anti-obturating end
- Non-sterile

Designed for: Ultradent™ 5 ml syringe.

	Tip length	20pk
27 ga (0.40 mm) Endo-Eze Irrigator	25 mm	207



## Endo-Eze™ Tips

- Great for endodontic procedures such as post cementation and core buildups
- Flexible, strong cannulae
- Bend easily
- Length 19 mm

Designed for: Air/water delivery.  
Use with: TriAway™ Adapter and other Ultradent syringes.

	Bendable tip	20pk	100pk
22 ga - 0.028" Endo-Eze	0.70 mm	348	1431
20 ga - 0.035" Endo-Eze	0.90 mm	347	1430
19 ga - 0.042" Endo-Eze	1.06 mm	346	1429
18 ga - 0.049" Endo-Eze	1.25 mm	345	1428



## WARNING:

- Use recommended endodontic tip • Make sure rubber stopper is in position
- Take extra precaution when not using sideport tips • Make sure tip is not wedged in the canal

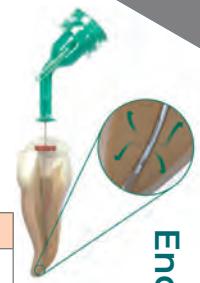
**NaviTip™ 29 ga Tips**

with Single Sideport

- Designed to direct the flow of chemistry through the sideport of the tip before flowing down into the area of the apex, thus reducing the risk of product extrusion
- Flexible, stainless steel cannula easily navigates curved canals
- Bendable tip

**29 ga** delivers paste materials: MTAFlow™, EndoREZ™, Ultradent EDTA 18% Solution, File-Eze™, ChlorCid™, ChlorCid™ Surf, and UltraCal™ XS.

NOTE: UltraCal™ XS calcium hydroxide paste should only be used with NaviTip 29 ga Single Sideport tips.



Endodontics

LOK-TITE™	Tip length	20pk
29 ga - 0.0129" NaviTip	27 mm	4989
29 ga - 0.0129" NaviTip	25 mm	4990
29 ga - 0.0129" NaviTip	21 mm	4991
29 ga - 0.0129" NaviTip	17 mm	4992
<b>29 ga-29 ga NaviTips</b>	<b>27-17 mm</b>	<b>5143</b>

**NaviTip™ 29 ga Tips**

- Provide controlled delivery to the apex
- Flexible, stainless steel cannulae easily navigate curved canals
- Bendable tip

**29 ga** delivers paste materials: MTAFlow™, File-Eze™, Ultradent EDTA 18% Solution, Consepsis™, Consepsis™ V, ChlorCid™, and ChlorCid™ Surf.

LOK-TITE™	Tip length	20pk	50pk
29 ga - 0.0129" NaviTip	27 mm	5115	1377
29 ga - 0.0129" NaviTip	25 mm	5114	1376
29 ga - 0.0129" NaviTip	21 mm	5113	1374
29 ga - 0.0129" NaviTip	17 mm	5112	1378
<b>29 ga-29 ga NaviTips</b>	<b>27-17 mm</b>	<b>5116</b>	<b>1379</b>

**NaviTip™ 30 ga Tips**

- Provide controlled delivery to the apex
- Flexible, stainless steel cannulae easily navigate curved canals
- Bendable tip

**30 ga** delivers solutions: ChlorCid™, Consepsis™, Ultradent™ Citric Acid 20% Solution, File-Eze™, and Ultradent™ EDTA 18% Solution.

LOK-TITE™	Tip length	20pk	50pk
30 ga - 0.0118" NaviTip	27 mm	1354	1424
30 ga - 0.0118" NaviTip	25 mm	1250	1423
30 ga - 0.0118" NaviTip	21 mm	1349	1422
30 ga - 0.0118" NaviTip	17 mm	1249	1421
<b>30 ga-30 ga NaviTips</b>	<b>27-17 mm</b>	<b>1351</b>	<b>3319</b>

**NaviTip™ 31 ga Tips**  
with Double Sideport Irrigator

- Double sideports deliver irrigants safely, minimizing the possibility of chemicals being expressed past the apex
- One of the world's smallest cannula navigate the most intricate canal spaces

Designed for: Consepsis, ChlorCid™, ChlorCid™ Surf, Ultradent™ Citric Acid 20% Solution, and Ultradent™ EDTA 18% Solution.

LOK-TITE™	Tip length	20pk	50pk
31 ga - 0.0098" NaviTip	21 mm	5121	5122
31 ga - 0.0098" NaviTip	27 mm	5123	5124

**NaviTip™ FX™ 30 ga Tips**

- One-of-a-kind brush cleans, scrubs, and irrigates simultaneously
- Rigid cannula

Designed for: Ultradent™ Citric Acid 20% Solution, Consepsis™, and Ultradent™ EDTA 18% Solution.

Listed as an "EXCELLENT" product by a prominent independent research institute.<sup>1</sup>

LOK-TITE™	Tip length	20pk
30 ga - 0.0118" NaviTip FX	17 mm	1452
30 ga - 0.0118" NaviTip FX	25 mm	1454

<sup>1</sup> Clinical Research Associates Newsletter, Volume 29, Issue 1, January 2005.



# IMPRESSION TIPS

## Impressions



### Impression Mixing Tips

- Enable direct delivery of impression materials
- Automixing, disposable, and color coded

Designed for: Thermo Clone™ VPS and Chromaclone™ PVS.

	<b>50pk</b>
Yellow	<b>2902</b>
Pink	<b>2903</b>
Teal	<b>2904</b>



### IntraOral Impression Tip

- Allows precise placement
- Attaches to impression mixing tips

Designed for: Thermo Clone™ VPS and Chromaclone™ PVS.

	<b>50pk</b>
IntraOral Impression	<b>2906</b>



### Thermo Clone™ 380 ml Mixing Tip

- Easily and securely locks with bayonet ring on cartridge
- Provides consistent mixing of base and catalyst

Designed for: Thermo Clone™ VPS 380 ml cartridges.

<b>380 ml</b>	<b>50pk</b>
Thermo Clone Mixing	<b>6065</b>

1 x Bayonet ring



## Skini Delivery Syringe

- Generates pressure in the syringe with low force to the plunger, resulting in more precise apical delivery

Designed for: EndoREZ™ and MTAFlow™.



0.5 ml Skini Delivery Syringe

20pk

1680

## Ultradent™ Hemostatic Delivery Syringe

- Snug Luer Lock threads prevent tips from popping off
- Colored plastic is light sensitive to preserve chemistry

Designed for: 30 ml IndiSpense™ syringes of ViscoStat™, ViscoStat™ Clear, Astringedent™, and Astringedent™ X.



1.2 ml Hemostatic Delivery Syringe

20pk

1278

## Ultra-Etch™ Delivery Syringe

- Snug Luer Lock threads prevent tips from popping off
- Blue color makes identification easy

Designed for: 30 ml IndiSpense syringes of Ultra-Etch™.



1.2 ml Ultra-Etch Delivery Syringe

20pk

129

## 1.2 ml Delivery Syringe

- Snug Luer Lock threads prevent tips from popping off

Designed for: All 30 ml IndiSpense™ syringes.



1.2 ml Delivery Syringe

20pk

100pk

124

157

## 5 ml Delivery Syringe

- Syringe barrel flange is positioned for optimum control/leverage
- Capillary tip not to be used for delivery

Designed for: Irrigants for in-office or dentist-supervised procedures, as well as Capillary tip, ChlorCid™, and Ultradent™ EDTA 18% Solution.



5 ml Delivery Syringe

10pk

201

## Ultradent™ Syringe Cover

- Provides an easy, reliable barrier
- Ensures asepsis of syringe during cleanup

Designed for: All 1.2 ml syringes.



1.2 ml Syringe Cover

300pk

5993

**Luer Lock Cap**

- Winged, polypropylene, plastic luer lock cap
- Use to seal syringes loaded in the office

Designed for: All Ultradent™ plastic syringes.

Luer Lock Cap

20pk

205

**Ultradent™ Luer Vacuum Adapter**

- A great time saver for any practice
- Dries canals quickly and efficiently
- Minimizes paper point use



Luer Vacuum Adapter

10pk

230

**TriAway™ Adapter**

Use for controlled administration of water and/or air to depths of tiny cavity preparations, such as minimally invasive operative-type preparations or endodontic preparations. **Note:** Do NOT use in open canals.



TriAway Adapter Irrigator

20pk

1375

**Syringe Organizer**

- Holds 14 syringes
- Made of clear acrylic

Syringe Organizer

1pk

382

**STARbrush™ Coronal Brush**

- Effectively cleans in hard-to-reach areas
- Tight fibers help to prevent messes and apply appropriate pressure
- Great for cleaning pits and fissures with Consepsis™ Scrub antibacterial slurry prior to sealants



1. [realityesthetics.com](http://realityesthetics.com).

STARbrush	50pk	100pk
	1092	1093

**Ultradent™ Micro Applicators**

- Bend easily
- Apply small amounts accurately
- Standard size

The Micro Applicator is composed of small nonlinting, nonabsorbent fibers that suspend solutions, creating a nondripping sphere.

Micro Applicator Brush Variety	400pk
	4548





GRANT BAUMAN - Great Salt Lake

# TISSUE MANAGEMENT

ViscoStat  
ViscoStat Clear  
Astringedent  
Astringedent X  
Ultrapak  
Ultrapak E  
Fischer's Ultrapak Packers



## FOR PROFOUND HEMOSTASIS



### Tissue Management

Unparalleled tissue management starts with rapid, profound hemostasis. For more than 40 years, dentists have trusted the immediate hemostatic power, detailed margins, and elimination of surface bleeding and sulcular fluid provided by Ultradent's tissue management products.

#### FOR HEMOSTASIS AND FLUID CONTROL

Our complete line of solutions continuously sets the standard for superior control and predictability while offering dentists fast, reliable, and affordable products.

For continuous control of bleeding and sulcular fluid, no one offers a more complete line of solutions.



Reduce cross-contamination and need for sterilizing by loading a unit-dose syringe directly from the IndiSperse™ syringe.

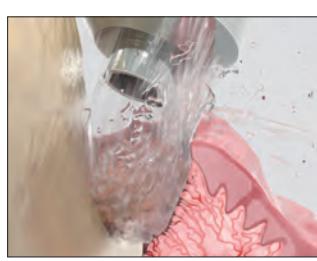
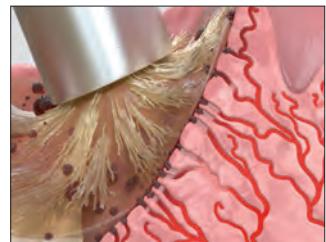


Firmly rub ViscoStat™, Astringedent™, or Astringedent™ X hemostatic against the cut bleeding tissue to obtain hemostasis.

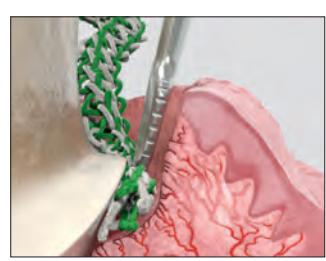
#### FERRIC SULFATE - ACTIVE HEMOSTASIS\*



1. With the Dento-Infusor™ tip, rub hemostatic firmly against cut bleeding tissues until bleeding stops.



2. Give firm air/water spray to remove residual coagulum and to test for profound hemostasis. If bleeding continues, repeat.



3. After complete hemostasis has been attained, excellent retraction is achieved using Ultrapak™ knitted cord placed with the Ultrapak™ packer.

\* See IFU for complete instructions.



**FOR INDIRECT BONDING (LUTING)\***  
**PROVISIONAL REMOVED**      **CONTAMINATION**



1. Well-healed tissue 2 weeks post-op.



2. Sulcular fluids and blood are a contaminant to bonding.

**FOR DIRECT BONDING\***  
**MICROLEAKAGE**      **STAINING**

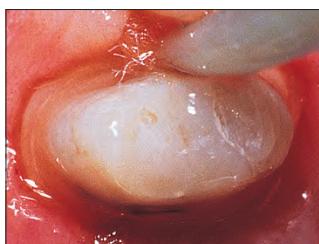


1. Leakage under recently bonded composite.



2. Upon removing some of the composite, the extent of leakage is more evident. Contamination has occurred, therefore compromising the seal. Hemostatic, blood, sulcular fluid, saliva, and byproducts from anaerobic bacteria can be sources of contamination. Retreatment is necessary.

**SEAL/DRY**



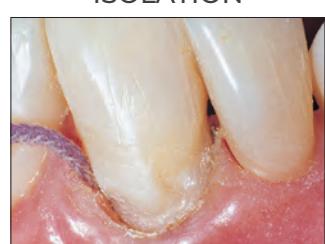
3. Hemostatics such as iron sulfates and aluminum chloride will reduce or help seal epithelium, rendering it impermeable to sulcular fluid.

**WASH/DRY**



4. Etch for 2–3 seconds then wash/dry and proceed with bonding/luting procedure.

**ISOLATION**



3. Isolate tissues with Ultrapak™ cord soaked in hemostatic. Proceed with bonding procedure.

**RESTORATION**



4. Repaired restoration.

**SEAT RESTORATION**



5. Bond/lute definitive crown.

**CONTROL**



1. For restorations, Astingedent™ X hemostatic and Ultrapak cord are ideal for controlling blood and sulcular fluids and can also protect tissue from burs. Use a firm air/water spray to remove excess hemostatic solution.

**BOND**



2. Successful bonded restoration.

**Note: Perfect sulcular fluid control is mandatory if bonding and luting is adjacent to gingival sulcus.<sup>1</sup>**

\* See IFU for complete instructions. 1. Bailey JH, Fischer DE. Procedural hemostasis and sulcular fluid control: a prerequisite in modern dentistry. *Pract Periodontics Aesthet Dent.* 1995;7(4):65-75; quiz 76.

**INDIRECT VENEER RETRACTION**



1. Packing Ultrapak cord quickly displaces tissues and improves access for indirect veneer luting.



# TISSUE MANAGEMENT

## FOR IMPRESSION TAKING\*

An astringent is a substance that eliminates permeability of epithelium to tissue fluid flow. The result is a dry field, an important tissue management solution. An ideal impression for successful crowns, veneers, and bridges must accurately capture the preparation margins. This can be ensured only through reliable hemostasis and gingival displacement.

Courtesy of Dr. Jaleena Fischer-Jessop

### BLEEDING



1. Subgingival preparation with bleeding.

### HEMOSTASIS



2. Rub Astringedent™ X hemostatic firmly against bleeding tissues with Metal Dento-Infusor™ tip.

### CLEANING/TESTING



3. Firm air/water spray removes residual coagulum and tests tissue for quality, profound hemostasis.

### DRYING/TESTING



5. Remove Ultrapak knitted cord, follow with a firm air/water spray and dry.

### DISPLACEMENT



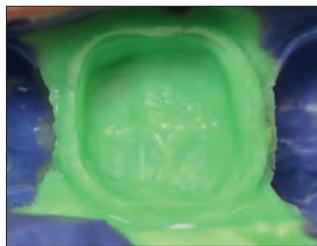
4. Soak Ultrapak™ knitted cord in Astringedent™ X hemostatic, pack, and leave for 5 minutes.

### TAKE IMPRESSION



6. Express Thermo Clone™ VPS impression material.

### RESULT



7. Predictable quality impressions.

*"We have many products and procedures in dentistry that are technique sensitive, tissue management is especially so. Done right, it's gorgeous! You see results almost immediately. Done wrong, the bleeding doesn't stop, and you end up with that awful coagulum everywhere."*

—DR. DAN FISCHER, DDS, SALT LAKE CITY

## FOR VITAL PULPOTOMY IN PRIMARY TEETH - EXPANDED APPLICATION\*

### PULP DEBRIDEMENT



1. Mechanically remove pulp tissue.

### HEMOSTASIS



2. Control bleeding. Use Metal Dento-Infusor tip with ViscoStat or Astringedent™ hemostatics.<sup>1</sup> Use sterile water for this procedure.

### PROTECTION



3. Place a thin layer of MTAFlow™ White repair cement over the root canal orifice.

### BARRIER



4. Apply a thin layer of Ultra-Blend™ plus liner.

### ETCH



5. Apply Ultra-Etch™ phosphoric acid or Peak™ SE Primer.

### BOND



6. Apply Peak™ Universal Bond bonding agent. Use your preferred restorative material for definitive restoration.

\* See IFU for complete instructions. 1. Fuks AB, Eidelman E, Cleaton-Jones P, Michaeli Y. Pulp response to ferric sulfate, diluted formocresol and IRM in pulpotomized primary baboon teeth. *ASDC Dent Child*. 1997;64(4):254-259.



## FOR CHALLENGING CASES\*



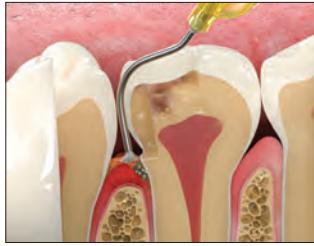
1. Fractured amalgam filling with secondary caries has caused gingival inflammation.



2. Remove failed amalgam restoration and begin initial caries removal. It is important to not complete caries removal at this step to avoid pulp exposure.



3. Expose gingival margin of restoration before placing rubber dam. Get control with complete hemostasis by using ViscoStat™, Astringedent™ X, or Astringedent™ hemostatic with a brush end of the Metal Dento-Infusor™ tip. Place Ultrapak™ retraction cord if needed.



4. Profound hemostasis and tissue control have been achieved.



5. Place dental dam, then remove residual caries. Treat exposed pulp using preferred technique for pulp capping.



6. Place sectional matrix and wedge with separating ring (not pictured). Check to ensure proper proximal contact, burnishing the band against the adjacent tooth if needed. Etch and then bond with Peak™ Universal Bond adhesive.



7. Use one of Ultradent's quality composites to place restoration in a controlled environment.



8. Completed restoration with proper contours, proximal contacts, and sealed margins which will allow gingival tissues to become healthy again.



\* See IFU for complete instructions.



## Dento-Infusor™ Tips



Using the correct tip is essential to achieving profound, dependable hemostasis and sulcular fluid control.

Hemostatic agents are only as good as their delivery systems. Dento-Infusor tips infuse hemostatic agents into bleeding capillaries. The padded brush end rubs the agent into capillaries and wipes coagulum away. The result is a clean, dry preparation ready for impressions.



Courtesy of Dr. Jaleena Fischer-Jessop



Bleeding must be controlled before starting any direct bonding procedure.

Profound hemostasis achieved, preparation is ready to restore.

As a rule, the Metal Dento-Infusor is the tip of choice for use with ViscoStat™, ViscoStat™ Clear, Astringedent™, and Astringedent™ X hemostatic agents. It can be used with enough pressure to infuse the capillaries with the hemostatic agent. If control of only sulcular fluid is required, using select hemostatics with the softer tip end of the plastic Blue Mini™ Dento-Infusor™ tip may be gentler on the newly healed epithelium at the time of bonding subgingival definitive restorations.

Both infusors allow hemostatic agents to be scrubbed into the tissue in a targeted and sparing way, which is not possible with other means such as cotton pellets, micro brushes, and special brushes.



Tip infuses ferric sulfate hemostatic agent into capillaries, forming a cork-like "plug," then cleans coagulum away.



If using ViscoStat Clear hemostatic, the flared brush padded end on the Metal Dento-Infusor™ tip enables hemostatic to temporarily close off capillary ends by causing collagen in them to swell.

Dento-Infusor Tips, see pages 135–136.



# TISSUE MANAGEMENT

## ViscoStat™

VISCOUS COAGULATIVE HEMOSTATIC  
20% FERRIC SULFATE



2024<sup>1</sup>  
REALITY  
Dental Product  
Dental Star Award  
5 stars



Metal Dento-Infusor™ Tip  
with Comfort Hub™ page 136

- Provides profound hemostasis
- Stops moderate bleeding
- Saves chair time
- Does not impede hard or soft tissue healing
- Eliminates sulcular fluid contamination for optimal bonding
- Decreases costly impression remakes

ViscoStat hemostatic is a 20% ferric sulfate equivalent hemostatic agent with inert binding agents in a viscous, aqueous solution. It contains fumed silica to limit the acidic activity, making it kind to hard and soft tissue.

ViscoStat hemostatic solution is suited for a variety of dental and oral surgery procedures to arrest surface capillary bleeding. Such procedures include fixed prosthodontics, restorative-operative, periodontal treatment, etc. ViscoStat hemostatic is also recommended for retrofillings, canine impactions, gingivectomies, and as a "fixative" for pulpotomies.

**Tip:** Prevent leakage caused by sulcular fluid contamination during direct bonding procedures. Soak an Ultrapak™ knitted cord in a hemostatic and isolate the tissues. Follow with a firm air/water spray.

*"ViscoStat hemostatic has allowed me to take clean, dry, accurate impressions even in some of the most hemorrhagic situations. Thank you! I appreciate it, my lab man appreciates it, and my patients appreciate it."*

—DR. MONTE PERSON – FRESNO, CA

*"ViscoStat hemostatic can stop bleeding in the cervical area of a crown prep like nothing else I have ever seen! It is a miracle solution! I wish I knew how many thousands of hours it has saved me over the years. Thank you, Ultradent!"*

—DR. SCOTT J. HADLEY – HAXTUN, CO

*"Without a doubt I would be lost without ViscoStat hemostatic! It quickly stops sulcular bleeding, allowing me to place the Ultrapak #000 cord and get an excellent impression on the first try. It is also great to use when bonding composites near gingival tissues. ViscoStat hemostatic is a vital part of my crown prep and composite armamentarium."*

—DR. JULIE ANN ROUTHIER – SAVANNAH, GA



### 3093 - ViscoStat Dento-Infusor Syringe Kit

4 x 1.2 ml (1.47 g) syringes  
20 x Metal Dento-Infusor tips



### 647 - ViscoStat Dento-Infusor IndiSpense™ Syringe Kit

1 x 30 ml (36.69 g) IndiSpense syringe  
20 x Metal Dento-Infusor tips  
20 x 1.2 ml empty syringes



### 3070 - ViscoStat Syringe 20pk

1.2 ml (1.47 g) syringes



### 645 - ViscoStat IndiSpense Syringe 1pk

30 ml (36.69 g) syringe



### 1278 - Hemostatic Delivery Syringe 20pk

1.2 ml empty syringes

**! Note: Do not use epinephrine preparations with ferric sulfate products (ViscoStat, Astringedent, Astringedent X hemostatics), as blue/black precipitate will occur.**

1. realityesthetics.com.

**ViscoStat™ Clear**VISCOUS HEMOSTATIC GEL  
25% ALUMINUM CHLORIDEMetal Dento-Infusor™ Tip  
with Comfort Hub™ page 136

- Does not discolor the gingiva
- Stops minor bleeding<sup>2</sup>
- Rinses easily<sup>2</sup>
- Viscous gel
- Does not interfere with bonding<sup>3</sup>

ViscoStat Clear hemostatic is a 25% aluminum chloride gel in a viscous, aqueous solution. Its tissue-kind silica formula temporarily eliminates minor bleeding. No coagulum is formed, nor does residue adhere to the preparation, which is especially critical in the esthetic zone. ViscoStat Clear hemostatic will not stain the hard or soft tissues.

ViscoStat Clear hemostatic is intended for sulcus retraction prior to impression making and to control bleeding and gingival fluid in restorative and operative dentistry. It is designed to be used with Ultrapak retraction cord and the Dento-Infusor tip. The gel facilitates the insertion of the cord into the sulcus.

1. realityesthetics.com. 2. Data on file. 3. Data on file.

## PROCEDURE\*



1. Subgingival preparation and bleeding sulcus.



2. Rub hemostatic firmly against bleeding tissues with the Metal Dento-Infusor tip. The clear gel allows easy visibility and rinses away quickly.



3. Place soaked Ultrapak™ cord into the sulcus. Leave for 5 minutes.



4. Remove cord. Cleanse with 35% phosphoric acid. Firm air/water spray. Facilitates great control in esthetic zone with no gingival stain.



5. Finished restoration 2 weeks post-op.



## 6409 - ViscoStat Clear Dento-Infusor Syringe Kit

4 x 1.2 ml (1.54 g) syringes  
20 x Metal Dento-Infusor tips

## 6407 - ViscoStat Clear Dento-Infusor IndiSpense™ Syringe Kit

1 x 30 ml (38.52 g) IndiSpense syringe  
20 x Metal Dento-Infusor tips  
20 x 1.2 ml empty syringes

## 6410 - ViscoStat Clear Syringe 20pk

1.2 ml (1.54 g) syringes



## 6408 - ViscoStat Clear IndiSpense Syringe 1pk

30 ml (38.52 g) syringe



## Astringedent™

COAGULATIVE HEMOSTATIC  
15.5% FERRIC SULFATE SOLUTION



- The “Classic” hemostatic agent for profound hemostasis
- Stops moderate bleeding
- Eliminates sulcular fluid contamination for optimal bonding
- Decreases costly impression remakes

Astringedent hemostatic is an aqueous 15.5% ferric sulfate hemostatic solution with a pH of ~1.0.

Astringedent hemostatic solution is well suited for a variety of dental and oral surgery procedures to arrest bleeding. Astringedent hemostatic can be used to prevent leakage caused by sulcular fluid contamination during direct bonding procedures.

**Listed as a “CAN’T LIVE WITHOUT” product by a prominent independent research institute.<sup>2</sup>**

ViscoStat™ and Astringedent hemostatic agents should be used with a Metal Dento-Infusor™ tip. The plastic Blue Mini™ Dento-Infusor™ tip should be used with select hemostatic agents when you are dealing with newly healed epithelium, as the softer tip is slightly less aggressive.



**111 - Astringedent Bottle 1pk**  
**686 - Astringedent IndiSense™ Syringe 1pk**  
30 ml (34.41 g)

## Astringedent™ X

COAGULATIVE HEMOSTATIC  
12.7% IRON SOLUTION



- Clinicians “go-to” hemostatic for all case situations
- Ultradent’s fastest and most powerful hemostatic<sup>3</sup>
- Stops minor to severe bleeding

Astringedent X hemostatic is an aqueous 12.7% iron solution that works quickly to stop bleeding in seconds.<sup>4,5</sup> It contains equivalent ferric sulfate and ferric subsulfate. **Note: Diluted Astringedent X hemostatic does not equal ViscoStat or Astringedent hemostatics.**

Recommended for all case situations, including when a stronger, more potent hemostatic is required and when the attainment of quality hemostasis may be more challenging (e.g., in cases of difficult-to-stop, problem bleeding).

Courtesy of Dr. Bruce LeBlanc.



Astringedent X hemostatic and Metal Dento-Infusor tip facilitate profound hemostasis, even with challenging cases.



**5881 - Astringedent X Syringe 20pk**  
1.2 ml (1.63 g) syringes



**112 - Astringedent X Bottle 1pk**  
**690 - Astringedent X IndiSense Syringe 1pk**  
30 ml (40.71 g)

**1.** realityesthetics.com. **2.** “Can’t Live Without” Clinical Research Associates Newsletter, Volume 21, Issue 7, July 1997.

**3.** Data on file. **4.** Bandi M, Mallineni SK, Nuvvula S. Clinical applications of ferric sulfate in dentistry: A narrative review. *J Cons Dent.* 2017 Jul-Aug;20(4):278-281. DOI: 10.4103/jcd.jcd\_259\_16. **5.** Spera S. Keeping blood under control in restorative procedures. *Dent Prod Rep.* 2023;57(10):32-33.

**Ultrapak™ and Ultrapak™ E**

KNITTED AND EPINEPHRINE KNITTED CORD



- The original knitted cord
- Provides optimal tissue displacement and detailed margins for quality impressions
- Facilitates easy packing and stays in place better than twisted or braided cord
- Compresses upon packing then expands for optimal retraction
- Available with or without epinephrine

Ultrapak cord is made of 100% cotton which has been knitted into thousands of tiny loops to form long, interlocking chains. After hemostasis is achieved, this unique knitted design exerts a gentle, continuous outward force following placement as the knitted loops seek to open. Optimal tissue displacement occurs in 5 minutes. Ultrapak E knitted cord is impregnated with racemic epinephrine hydrochloride.

Ultrapak cord can also be used to deliver ferric sulfate solutions subgingivally for sulcular fluid control. Ultrapak cord is designed to enhance tissue management techniques that use ViscoStat™ and Astringedent™ hemostatics. Conventional techniques using alum, aluminum chloride, etc. are also enhanced when using Ultrapak plain knitted cords, which carry significantly greater quantities of hemostatic solution than conventional cords.

**Note:** Do not use Ultrapak E knitted cord or other epinephrine preparations with ferric sulfate solutions, including ViscoStat, Astringedent, and Astringedent X hemostatics, as blue/black precipitate will occur.

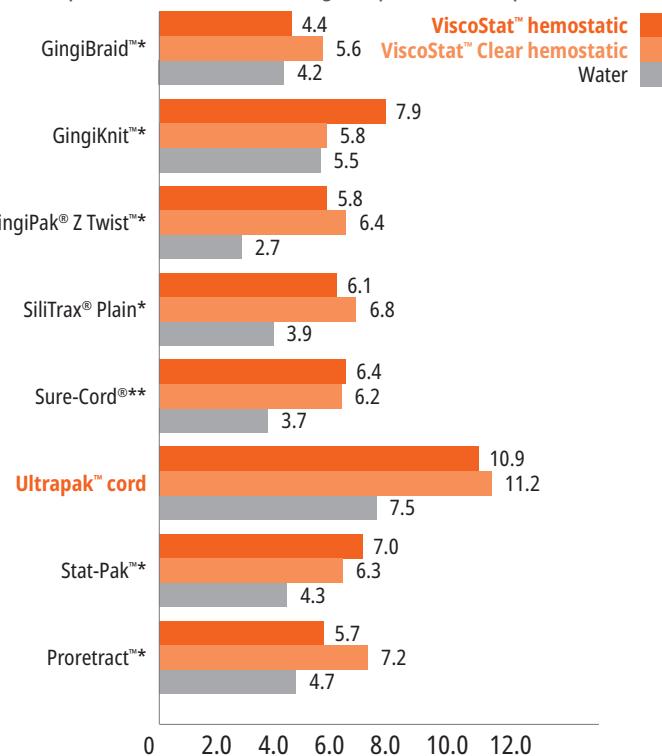
**THE ONE WITH THE STRIPE!™**

With easy packing, excellent absorption, and exceptional retention, the proprietary knitted design of the Ultrapak cord has been the preferred choice for years.

Listed as a "CAN'T LIVE WITHOUT" product by a prominent independent research institute.<sup>2</sup>

### ULTRAPAK CORD COMPETITOR ABSORPTION COMPARISON ( $\mu\text{l}/\text{cm}^2$ )

Ultrapak™ knitted cord vs. leading competitors' absorption abilities.<sup>3</sup>



\* Trademark of a company other than Ultradent. **1.** realityesthetics.com. **2.** "Can't Live Without" Clinical Research Associates Newsletter, Volume 21, Issue 7, July 1997. **3.** Data on file.



# TISSUE MANAGEMENT

## PRE-PREPARATION PACKING TECHNIQUE

To ensure cord retention during preparation, use a cord large enough to firmly compress into sulcus.

### PREPACK



1. Place Ultrapak™ knitted cord soaked in hemostatic solution using a cord size that appears slightly too large to ensure cord retention. The thin Ultrapak™ Packer quickly slips cord into position. The knitted cord's unique design (interlocking loops) facilitates easy packing and locks it into place.

### PREPARATION



2. Extend margin subgingivally by cutting partway into knitted cord, which won't entangle in diamond bur. Remove remnant of cord with an explorer or other instrument. Bleeding is minimal if at all. A small portion of uncut tooth above gingival attachment is preserved to record in impression. If additional retraction is required, repack with appropriately sized cord. Rinse, air dry, and make impression.

## FOR DIGITAL IMPRESSIONS - COMPLETE HEMOSTASIS

### HEMOSTASIS



1. Complete hemostasis is essential, especially when taking digital impressions, for the most accurate marginal fit of any restoration.

### CLEAR FIELD



2. After hemostasis is achieved and tissue is retracted, preparation is ready for digital impression.

*"Ultrapak cord is excellent at displacing the gingival tissue and allowing proper hemostasis, and is easy to place and remove. It works very well for all retraction purposes. The different sizes are good for all situations."*

—DR. Y CLEMENT SHEK – SAN FRANCISCO, CA

*"In dentistry, time is money. Ultrapak cord's woven design makes packing the cord quick and easy, plus the tooth can be prepped or touched up without snagging the cord. This increases patient comfort in shortening the appointment with far less repeat impressions."*

—DR. THOMAS J. FRANKFURTH – TAMPA, FL

*"Ultrapak cord has taken the stress out of cord packing. This was the most frustrating part of my day when I was using other products. Add the amazing Astringedent hemostatic and... LIFE IS GOOD!"*

—DR. LISA MARSHALL – XENIA, OH

## DOUBLE-CORD TECHNIQUE

The most common challenges in getting a quality impression are adequate tissue retraction and sufficient moisture control. Try a double retraction cord technique combined with effective hemostatic agents to alleviate both.

### FIRST CORD



1. Once hemostasis is achieved, carefully place a single cord, such as Ultrapak™ knitted cord #0, #00, or #000, to the bottom of the sulcus. Use Fischer's Ultrapak Packers to place cords properly and efficiently.

### SECOND CORD



2. Place a second, thicker cord soaked in a hemostatic agent to expand the tissue laterally.

### RINSE/DRY

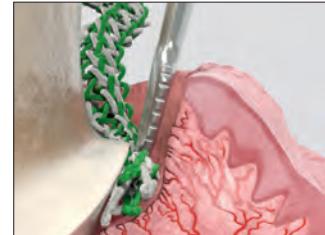


3. Rinse the area well, lightly dry, and make impression.

### BRAIDED



Knitted Ultrapak cord is composed of thousands of tiny, interlocking loops so it compresses and expands easier than other cords. 100% cotton fibers provide high absorption<sup>1</sup> of hemostatic agents and sulcular fluids.



Ultrapak cord compresses upon packing and then expands for optimal tissue displacement.



Ultrapak cord, saturated with hemostatic solution, controls bleeding and sulcular fluid near gingival and subgingival preparations.



Ultrapak CleanCut design features a blade in the cap for efficient cutting. A special dispensing orifice prevents cord from falling into the bottle.

1. Data on file.



Each bottle contains  
8 ft/244 cm of cord.

## CORD COMPARISON CHART

	#000 - .035" (0,889 mm)
	#00 - .041" (1,041 mm)
	#0 - .045" (1,143 mm)
	#1 - .049" (1,245 mm)
	#2 - .056" (1,422 mm)
	#3 - .063" (1,6 mm)

**130 - Ultrapak Kit**  
1 x Each #00, 0, 1, and 2 cord  
1 x Ultrapak organizer



## #000 - .035" (0,889 mm)

- Lower cord in the double-cord technique
- Anterior teeth

## 137 - Ultrapak Cord #000 Regular 1pk

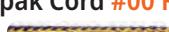


## #00 - .041" (1,041 mm)

- Preparing and cementing veneers
- Restorative procedures dealing with thin, friable tissues



## 136 - Ultrapak Cord #00 Regular 1pk



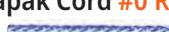
## 197 - Ultrapak Cord #00 Epinephrine 1pk



## #0 - .045" (1,143 mm)

- Lower anterior
- When luting near gingival and subgingival veneers
- Class III, IV, and V restorations
- Upper cord for use with the double-cord technique

## 131 - Ultrapak Cord #0 Regular 1pk



## 198 - Ultrapak Cord #0 Epinephrine 1pk

## #1 - .049" (1,245 mm)

- Non-impregnated #1 and #2 sizes are particularly effective for tissue control and/or displacement when soaked in coagulative hemostatic solution prior to and/or after crown preparations
- Protective pre-preparation cord on anteriors



## 132 - Ultrapak Cord #1 Regular 1pk



## 199 - Ultrapak Cord #1 Epinephrine 1pk

## #2 - .056" (1,422 mm)

- Upper cord for double-cord technique
- Protective pre-preparation cord



## 133 - Ultrapak Cord #2 Regular 1pk



## 200 - Ultrapak Cord #2 Epinephrine 1pk

## #3 - .063" (1,6 mm)

- Areas that have fairly thick gingival tissues where a significant amount of force is required
- Upper cord for use with the double-cord technique



## 134 - Ultrapak Cord #3 Regular 1pk



Note: Do not use Ultrapak E knitted cord or other epinephrine preparations with ferric sulfate solutions, including ViscoStat, Astringedent, and Astringedent X hemostatics, as blue/black precipitate will occur.



## TISSUE MANAGEMENT

### Fischer's Ultrapak™ Packers

THIN SERRATED PACKING INSTRUMENTS



#170 and #171 (45° to handle)

FISCHER'S ULTRAPAK® Packer  
ULTRADENT PRODUCTS INC.

#172 and #174 (90° and parallel to handle)

FISCHER'S ULTRAPAK® Packer  
ULTRADENT PRODUCTS INC.

These specially designed packers ease the packing of Ultrapak™ knitted cord. Their thin edges and fine serrations press into the cord, preventing it from slipping off and reducing the risk of cutting the gingival attachment.

**45° TO HANDLE:** Our most popular packers, with heads at 45° to the handle and three packing sides. Circular packing of the prep can be completed without the need to flip the instrument end to end. Use the small packer on lower anteriors and upper lateral incisors.

**90° AND PARALLEL TO HANDLE:** Same size design as the 45° to handle packer, except one of the heads is in line with the shank and the other is at a right angle to the shank.

"Ultrapak Packers help place the cords properly in a quick and efficient manner. Thanks to the inventors!" —DR. JOHN LUI – BELLEVUE, WA

171 - Small Packer - 45° to handle 1pk  
170 - Regular Packer - 45° to handle 1pk  
174 - Small Packer - 90° to handle 1pk  
172 - Regular Packer - 90° to handle 1pk



## RESTORATIVE SOLUTION

Your complete system for  
**QUALITY RESTORATIONS**

LEARN MORE AT [ULTRADENT.COM](http://ULTRADENT.COM)





DEREK HATCH - Bell Canyon Reservoir

# WHITEN

Questions Behind Tooth Whitening  
Whitening Treatment Protocol  
Opalescence Tooth Whitening Reference Guide  
**NEW** Opalescence Home Advanced  
**NEW** Opalescence Custom  
**NEW** Opalescence Pro  
Tips on Growing your Tooth Whitening Business  
Opalescence Go  
Opalescence Endo  
OpalDam and OpalDam Green  
Opalustre and OpalCups

Opalescence Whitening Toothpaste  
UltraEZ  
IsoBlock  
Ultradent LC Block-Out Resin  
Sof-Tray Classic Sheets  
Ultra-Trim Scalloping Scissors  
Opalescence Shade Guide Card  
Opalescence Pocket Tray Cases  
Custom Tray Patient Instructions  
Opalescence Whitening Menu  
Opalescence Gift Bags



new



## WHITEN YOUR SMILE - Questions Behind Tooth Whitening

There are many causes of tooth staining. Certain medicines, tooth trauma, fillings, and foods and beverages can cause tooth discoloration over time.

Some discolorations are superficial, while others are internal. Both can be effectively treated by a dentist.

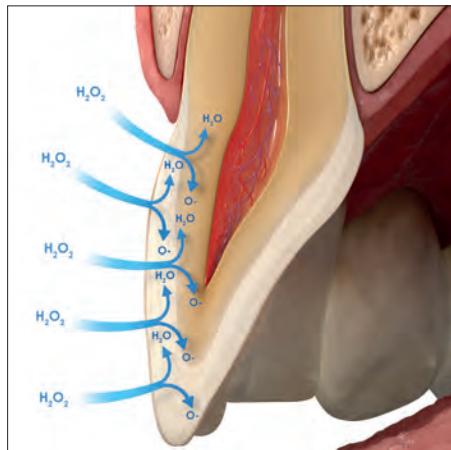
Professional whitening is the best option to safely lighten discolored teeth.

### HOW DOES WHITENING WORK?

Opalescence whitening gels contain a powerful whitening ingredient, either carbamide peroxide or hydrogen peroxide. Peroxide gels break down into water, oxygen, and reactive oxygen molecules.

These reactive oxygen molecules oxidize the bonds of discolored stain molecules. By changing the stained molecules, the tooth appearance becomes lighter.<sup>1</sup>

Reactive oxygen molecules permeate the entire tooth, so there is no need for the whitening agent to be in contact with every surface of the tooth for the entire tooth to be whitened.<sup>1</sup>



### WILL WHITENING AFFECT BOND STRENGTH?

Even though whitening agents release oxygen into the tooth, existing bonds are not weakened.

**Note: Wait 7-10 days before any bonding procedure<sup>2-4</sup> or placing any resin. The high concentration of oxygen in the tooth could have a significant adverse effect on polymerization of the resins.**

### HOW LONG DO WHITENING RESULTS LAST?

Whitening results are very stable. However, depending on the patient's diet and lifestyle habits, whitening may need to be redone periodically.

Due to the safety of the whitening agents, this should not cause any concerns.

### WILL WHITENING CAUSE TOOTH SENSITIVITY?

Tooth sensitivity can occur during whitening treatment. If it does occur, it is transient and disappears after the completion of whitening treatments. If desensitizing treatments are desired, we recommend the use of UltraEZ™ desensitizing gel or Enamelast™ fluoride varnish. Opalescence™ Whitening Toothpaste Sensitivity Relief can also be used to help to prevent or lessen sensitivity if it occurs.

### WILL WHITENING WITH OPALESCENCE WHITENING PRODUCTS WEAKEN THE TOOTH'S ENAMEL?

No. Opalescence whitening has not been shown to weaken tooth enamel.<sup>5-7</sup>

### IMPORTANT: DENTIST SUPERVISION IS THE BEST WAY TO WHITEN!

Opalescence tooth whitening treatments are effective and safe if they are used appropriately and with the correct materials. This includes a comprehensive exam, briefing on the chosen whitening process, and monitoring of the patient during the treatment phase. Self-treatment by the patient with store-bought products often does not provide the results desired, and leaves the patient without options for managing potential sensitivity or other concerns.

- Kwon SR, Wertz PM. Review of the Mechanism of Tooth Whitening. *J Esthet Restor Dent*. 2015 Sep-Oct;240-257.
- Da Silva Machado J, Cândido MS, Sundfeld RH, et al. The influence of time interval between bleaching and enamel bonding. *J Esthet Restor Dent*. 2007;19(2):111-118; discussion 19.
- Spyrides GM, Perdigão J, Paganí C, Araújo MA, Spyrides SM. Effect of whitening agents on dentin bonding. *J Esthet Restor Dent*. 2000;12(5):264-270.
- Unlu N, Cobanikara FK, Ozer F. Effect of elapsed time following bleaching on the shear bond strength of composite resin to enamel. *J Biomed Mater Res B Appl Biomater*. 2008 Feb;84(2):363-368.
- Metz MJ, Cochran MA, Matis BA, et al. Clinical evaluation of 15% carbamide peroxide on the surface microhardness and shear bond strength of human enamel. *Oper Dent*. 2007;32(5):427-436. doi:10.2341/06-142
- Cadenaro M, Navarra CO, Mazzoni A, et al. An in vivo study of the effect of a 38 percent hydrogen peroxide in-office whitening agent on enamel. *J Am Dent Assoc*. 2010;141(4):449-454. doi:10.14219/jada.archive.2010.0198
- Cadenaro M, Breschi L, Nucci C, et al. Effect of two in-office whitening agents on the enamel surface in vivo: a morphological and non-contact profilometric study. *Oper Dent*. 2008;33(2):127-134. doi:10.2341/07-89.



## Whitening Treatment Protocol

We recommend the following steps for professional whitening evaluation and treatment.

### 1. TAKE PATIENT'S MEDICAL HISTORY

Discuss health conditions with your patient. If they have serious health concerns, direct them to consult with the primary care provider prior to treatment. Pregnant or breastfeeding women should not whiten.

### 2. PERFORM DENTAL EXAM

Determine origin of staining, evaluate gingival and dental health. Check for restorations in the esthetic zone that may not match after whitening. Discuss changing them out or resurfacing after whitening.

### 3. MANAGE PATIENT'S EXPECTATIONS

Discuss the possibilities and limitations of whitening for their specific circumstance and help them to establish realistic expectations.

### 4. PERFORM HYGIENE TREATMENT

Use polishing paste to gently clean the enamel surface. Then, apply Enamelast™ fluoride varnish at the end of the appointment.

### 5. DETERMINE THE INITIAL TOOTH COLOR

Identify the initial tooth color with a shade guide and document the shade for future reference. Take a photograph with the shade tab.

### 6. CREATE WHITENING TREATMENT PLAN

Develop a whitening plan that meets your patient's goals and budget. You can combine multiple Opalescence™ whitening products to create a personalized plan for each patient. You should also consider the patient's history with tooth sensitivity. For patients with sensitivity concerns, use a lower concentration of gel or a reduced wear time and have them use UltraEZ™ desensitizing gel or Opalescence™ Whitening Toothpaste Sensitivity Relief before and after whitening. If sensitivity isn't a concern, consider providing a higher concentration gel for more rapid results.

### 7. EDUCATE PATIENT

Instruct patients on how to use the chosen whitening products and answer any questions or concerns. Inform them that tooth whitening results can last a year or more,<sup>1,2</sup> and whitening may need to be repeated periodically to maintain their results.

### 8. OBTAIN PATIENT'S CONSENT

Have the patient sign a whitening consent form that outlines the whitening treatment and cost involved.

### 9. DETERMINE THE FINAL TOOTH COLOR

Identify the final tooth color using a shade guide and document in the patient chart. Take a photograph with initial and final shade tab. A definitive color change should only be recorded a few days after the end of the treatment, as the teeth may continue to whiten after the final whitening treatment.

### 10. PROVIDE SENSITIVITY MANAGEMENT IF NECESSARY

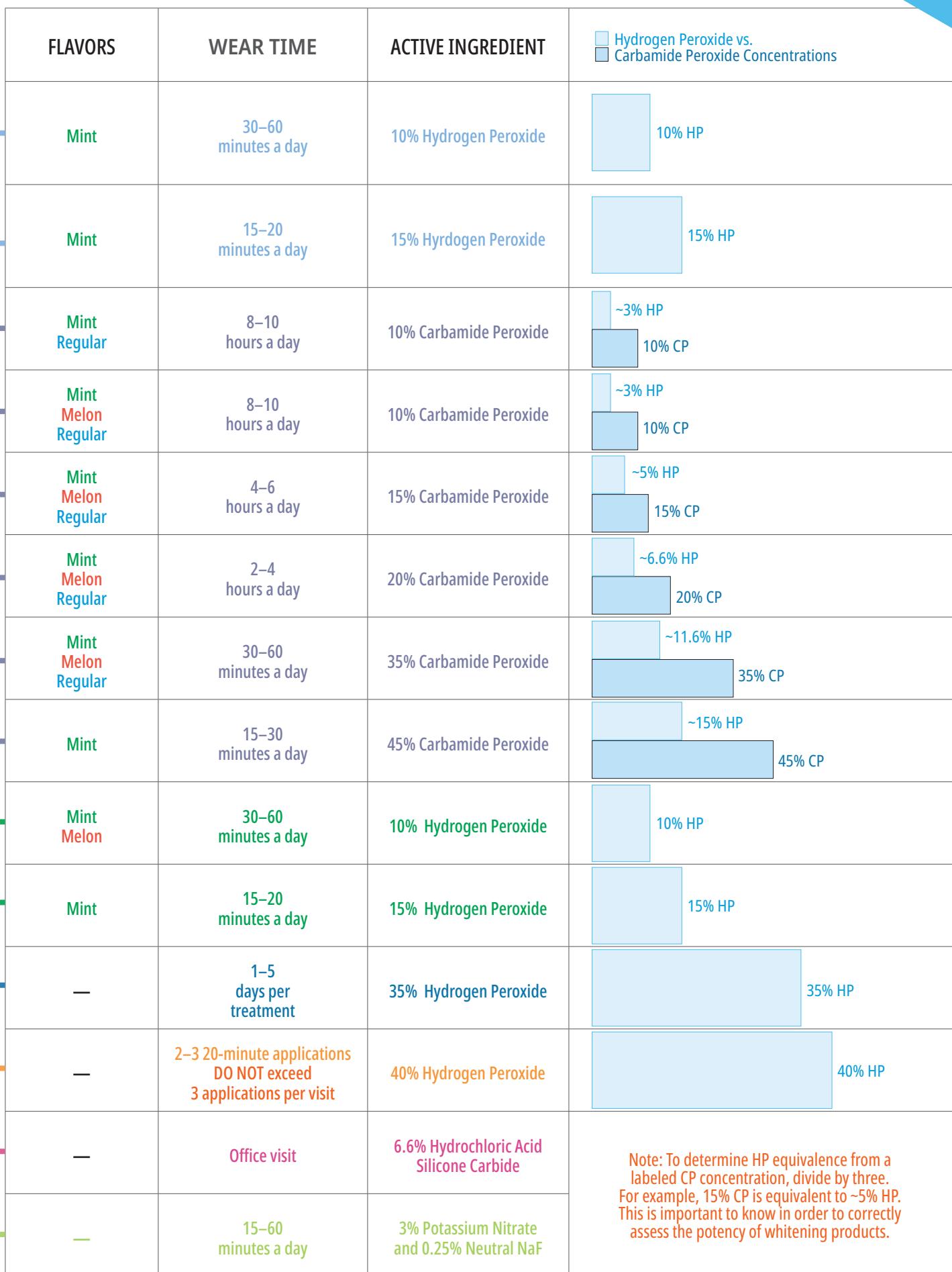
Offer patients with tooth sensitivity UltraEZ™ desensitizing gel or Opalescence™ Whitening Toothpaste Sensitivity relief to help minimize discomfort.



1. de Geus JL, de Lara MB, Hanzen TA, et al. One-year follow-up of at-home bleaching in smokers before and after dental prophylaxis. *J Dent.* 2015;43(11):1346-1351. 2. Wiegand A, Drebendstedt S, Roos M, Magalhães AC, Attin T. 12-month color stability of enamel, dentine, and enamel-dentine samples after bleaching. *Clin Oral Investig.* 2008;12(4):303-310.

**WHITEN****new****Opalescence™ Tooth Whitening Reference Guide**

PRODUCT NAME	CONTENTS	INDICATIONS FOR USE
Opalescence™ 10% Home Advanced Prefilled Whitening Trays	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Premium prefilled trays with one-step placement
Opalescence™ 15% Home Advanced Prefilled Whitening Trays	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Premium prefilled trays with one-step placement
Opalescence™ Custom Non-PF 10% Whitening Gel	—	TAKE-HOME Patients with sensitivity concerns; can be worn day or night
Opalescence™ Custom 10% Whitening Gel	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Patients with sensitivity concerns; can be worn day or night
Opalescence™ Custom 15% Whitening Gel	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Faster whitening, recommended to wear during the day
Opalescence™ Custom 20% Whitening Gel	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Faster whitening, recommended to wear during the day
Opalescence™ Custom 35% Whitening Gel	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Shorter wear time and touch-ups
Opalescence™ Quick 45% Whitening Gel	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Shorter wear time and touch-ups
Opalescence Go™ 10% Prefilled Whitening Trays	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Ready-to-go, an alternative to store-bought products
Opalescence Go™ 15% Prefilled Whitening Trays	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Ready-to-go, an alternative to store-bought products
Opalescence™ Endo Whitening Gel	—	DENTIST-ADMINISTERED Internal whitening of non-vital endodontically treated teeth
Opalescence™ Pro 40% Whitening Gel	Potassium Nitrate and Fluoride	PROFESSIONALLY APPLIED Fast chairside treatment
Opalustre™ Microabrasion Slurry	—	DENTIST-ADMINISTERED Chairside treatment to remove superficial enamel imperfections
UltraEZ™ Desensitizing Gel	—	TAKE-HOME Sensitivity treatment





WHITEN

# Dentist-designed at-Home whitening

new



Our cutting-edge technology lines the tray with whitening gel for precise placement, so patients just need to position the trays on their teeth and wear for the recommended time.

## Opalescence<sup>TM</sup> Home Advanced

Your patients want a simple way to get a brighter smile they are confident in. Now, you can offer them professional, mess-free whitening in one easy step with our new Opalescence Home Advanced prefilled trays.



# Brighter Smiles. Better Days.

Opalescence™



- Professional results in a one-step treatment
- Prefilled Ultrafit™ tray is ready to use right out of the box, conforming to any patient's smile
- Whitening gel is distributed evenly on the tray, delivering it exactly where needed
- Whitens teeth up to 4–5 shades for quick, visible results<sup>1</sup>

## Procedure\*



Scan to see the how-to video



1. Remove product from packaging.  
'U' – Upper whitening tray  
'L' – Lower whitening tray



2. Position upper tray on teeth.



3. Bite firmly, then suck on tray for 2 seconds. Do not press tray against teeth as it pushes the whitening gel against the gums, causing tissue irritation.



4. Repeat the process for the lower tray.



5. After indicated wear time, remove whitening trays and brush teeth.

- 10%: 30–60 min.
- 15%: 15–20 min.

\*See IFU for complete instructions and precautions



Opalescence Home Advanced Patient Kits Case of 6

Flavor	10%	15%
Mint	5821-US	5822-US

10 x Each upper/lower trays in each kit



Opalescence Home Advanced Mini Kits Case of 12

Flavor	10%	15%
Mint	6005-US	6006-US

4 x Each upper/lower trays in each kit



Opalescence Home Advanced Sample Tower

Flavor	10%	15%
Mint	6003-US	6004-US

20 x Each upper/lower trays with instructions in each sample

<sup>1</sup> Cordeiro D, Toda C, Hanan S, et al. Clinical evaluation of different delivery methods of at-home bleaching gels composed of 10% hydrogen peroxide. *Oper Dent*. 2019;44(1):13–23. doi:10.2341/17-174-C.



WHITEN



Powerful,  
professional  
whitening  
**to go!**

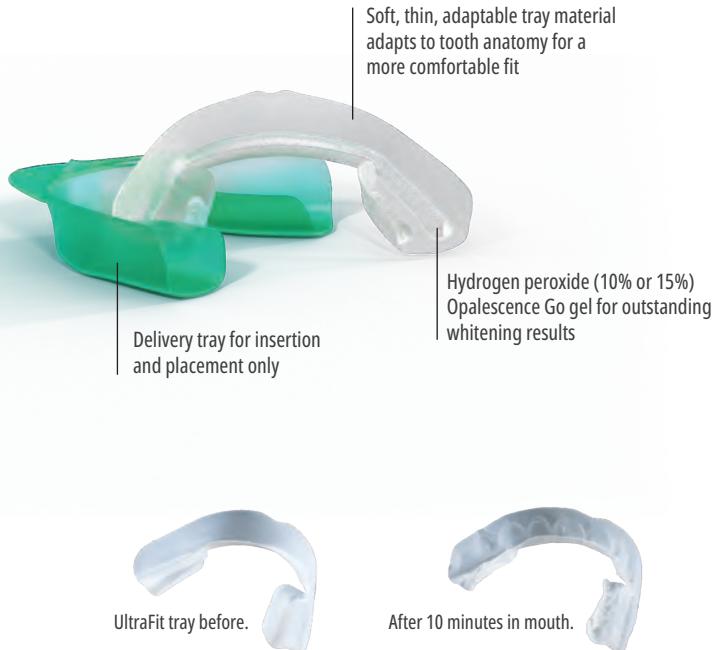
### Opalescence Go™ 10% and 15%

PREFILLED WHITENING TRAYS  
- HYDROGEN PEROXIDE



- Whitens up to 4–5 shades for quick, visible results<sup>2</sup>
- Unique UltraFit™ tray material offers a remarkably comfortable fit and easily conforms to any patient's smile
- Molar-to-molar coverage ensures the gel comes in contact with more posterior teeth
- Opalescence Go whitening gel is designed to maximize patient comfort
- Convenient prefilled trays can be worn right out of the package
- Optimal gel quantity allows easy cleanup after whitening
- 10% - wear 30–60 minutes per tray;
- 15% - wear 15–20 minutes per tray
- Opalescence Go tooth whitening gel contains PF (potassium nitrate and fluoride)
- Delicious **Mint** and **Melon** flavors

Opalescence Go take-home whitening system is recommended for patients looking for professional whitening to go or as an alternative to store-bought whitening products. With no impressions, models, or lab time required, Opalescence Go whitening trays are also a perfect follow-up to in-office whitening.



1. realityesthetics.com. 2. Cordeiro D, Toda C, Hanan S, et al. Clinical evaluation of different delivery methods of at-home bleaching gels composed of 10% hydrogen peroxide. *Oper Dent.* 2019;44(1):13–23. doi:10.2341/17-174-C



Courtesy of Shannon Pace Brinker, CDA

## BEFORE AND AFTER



Before.



Female patient, results with Opalescence Go 10% whitening after ten trays.

Courtesy of Shannon Pace Brinker, CDA



Before.



Male patient, results with Opalescence Go 15% whitening after ten trays.

Courtesy of Carol Jent, RDH.



Before.



Male patient, results with Opalescence Go 10% whitening after ten trays.

## PROCEDURE\*

1. Remove product from packaging.  
"U" – Upper tray "L" – Lower tray

2. Position upper tray on teeth.



3. Bite firmly, then suck on tray for 2 seconds.



4. Remove colored outer tray, leaving white inner tray on teeth. Repeat process for the lower tray.



5. After indicated wear time, remove whitening trays and brush teeth.

\* See IFU for complete instructions.

## Opalescence Go Patient Kits Case of 6



Flavor	10%	15%
Mint	4635-US	4638-US
Melon	4636-US	—

10 x Each upper/lower trays in each kit

## Opalescence Go Mini Kits Case of 12



Flavor	10%	15%
Mint	4645-US	4648-US
Melon	4646-US	—

4 x Each upper/lower trays in each kit

## Opalescence Go Sample Dispenser Kits



Flavor	10%	15%
Mint	4893-US	4894-US
Melon	4890-US	—

20 x Each upper/lower trays in each kit

20 x Patient instructions



WHITEN

# Professional, Custom at-home whitening

new



Opalescence Custom tooth whitening gel is designed for comfort and performance. Paired with a custom tray, its sticky, viscous formula stays put with no mess and no slipping,<sup>1</sup> delivering a more comfortable whitening experience for your patients.

## Opalescence<sup>™</sup> Custom

Every smile is unique, so give your patients the customized whitening they deserve. With Opalescence Custom at-home whitening, you and your patients can personalize a treatment that fits their individual needs.



# Provide a custom whitening solution! **Opalescence™**

## Deliver excellent results:

- Safely whitens teeth up to five shades<sup>2</sup>
- Formulated to prevent tooth dehydration and shade relapse
- Contains potassium nitrate and fluoride for patient comfort



## Customize your treatments:

- Night wear: 10% concentration
- Day wear: 15%, 20%, 35%, and 45% concentrations
- Three flavors (Regular, Mint, Melon)

Photos courtesy of Carol Jent, RDH.



Before



After

Patient used Opalescence Custom 20% whitening for 16 days.<sup>3</sup>



Scan to see the how-to video.



x 8



### Opalescence Custom Patient Kits

Flavor	10% non-PF	10%	15%	20%	35%	45%
Mint	6250-US	6252-US	6255-US	6258-US	6261-US	6264-US
Melon	—	6253-US	6256-US	6259-US	6262-US	—
Regular	6251-US	6254-US	6257-US	6260-US	6263-US	—

8 x 1.2 ml Opalescence syringes  
1 x 1 oz Whitening Toothpaste  
1 x Tray case  
1 x Shade guide card

### Opalescence Custom Syringe Refill Kits

Flavor	10% non-PF	10%	15%	20%	35%	45%
Mint	6265-US	6267-US	6270-US	6273-US	6276-US	6279-US
Melon	—	6268-US	6271-US	6274-US	6277-US	—
Regular	6266-US	6269-US	6272-US	6275-US	6278-US	—

20 x 2-packs of 1.2 ml syringes

**1.** Caughman WF, Frazier KB, Haywood VB. Carbamide peroxide whitening of nonvital single discolored teeth: case reports. *Quintessence Int.* 1999;30(3):155–161. **2.** Cordeiro D, Toda C, Hanan S, et al. Clinical evaluation of different delivery methods of at-home bleaching gels composed of 10% hydrogen peroxide. *Oper Dent.* 2019;44(1):13–23. doi:10.2341/17-174-C.

**3.** See IFU for complete instructions.



WHITEN

## Opalescence™ Custom 10%, 15%, 20%, 35%, and 45%

CARBAMIDE PEROXIDE WITH  
POTASSIUM NITRATE AND FLUORIDE

## Opalescence™ Custom 10% Non-PF

CARBAMIDE PEROXIDE



Best Take-Home Cosmetic  
Bleaching System



- Uniquely formulated to brighten your teeth up to 5 shades<sup>2</sup>
- Opalescence Custom tooth whitening gels contain potassium nitrate and fluoride
- Opalescence Custom whitening gel is designed to maximize patient comfort
- Sticky, viscous gel won't migrate to soft tissues and ensures tray stays securely in place<sup>3</sup>
- Formulated to prevent dehydration and shade relapse
- Five concentrations for treatment flexibility
- Opalescence Custom whitening available in **Mint**, **Melon**, and **Regular** flavors
- Opalescence Custom 10% Non-PF whitening available in **Mint** and **Regular** flavors
- Day or night wear

The sticky, viscous formula of Opalescence whitening gel does not leach from the tray like other whitening agents.<sup>3</sup> The sticky gel holds the tray securely and comfortably in place. Opalescence Custom gel contains potassium nitrate and fluoride. Opalescence gel is effective in helping reduce shade relapse as compared to competitor tooth whitening products.<sup>4</sup> Opalescence whitening gel is made up of at least 20% water to help prevent dehydration.<sup>5,6,7</sup> A university study proves that the gel stays active for 8–10 hours during overnight whitening,<sup>8</sup> which means patients experience results quickly, increasing compliance. Opalescence gel is available in a variety of concentrations, formulations, flavors, and kit configurations to meet all your patients' whitening needs.

Opalescence whitening gel is recommended for whitening discolored teeth prior to placement of composite, veneers, and/or crowns. It is effective in breaking down some or all internal tooth discolorations due to factors such as congenital, systemic, pharmacologic, traumatic, etc., as well as aging. It is successful with staining from fluorosis and tetracycline.<sup>3,9</sup>

**1.** realityesthetics.com. **2.** Cordeiro D, Toda C, Hanan S, et al. Clinical evaluation of different delivery methods of at-home bleaching gels composed of 10% hydrogen peroxide. *Oper Dent.* 2019;44(1):13–23. doi:10.2341/17-174-C  
**3.** Caughman WF, DMD, Frazier KB, Haywood, VB. Carbamide peroxide whitening of non-vital single discolored teeth: Case reports. *Quintessence Int.* 1999;30(3):155–161. **4.** Grobler SR, Majeed A, Hayward R, et al. A clinical study of the effectiveness of two different 10% carbamide peroxide bleaching products: a 6-month followup. *Int J Dent.* 2011;2011:167525. doi:10.1155/2011/167525. **5.** Betke H, Kahler E, Reitz A, Hartmann G, Lennon A, Attin T. Influence of bleaching agents and desensitizing varnishes on the water content of dentin. *Oper Dent.* 2006;31(5):536–542. doi:10.2341/05-89. **6.** Kihn PW. Vital tooth whitening. *Dent Clin North Am.* 2007;51(2):319–viii. doi:10.1016/j.dcn.2006.12.001. **7.** Data on file. **8.** Morgan J, Presley S. In-office "power" bleaching of vital teeth as an adjunct to at-home bleaching. *Pract Perio Aesthet Dent.* 2002;14(2):16–23. **9.** Matis BA, Gaio U, Blackman D, Schultz FA, Eckert GJ. In vivo degradation of bleaching gel used in whitening teeth. *J Am Dent Assoc.* 1999;130(2):227–235.



"I recommend Opalescence PF (Custom) gel to other doctors because the results from patients using it are consistent. The sticky, viscous Opalescence PF (Custom) gel is one of the most effective solutions I've used. My patients feel better knowing that the application of the gel also provides beneficial results such as improving enamel health and increasing enamel microhardness."

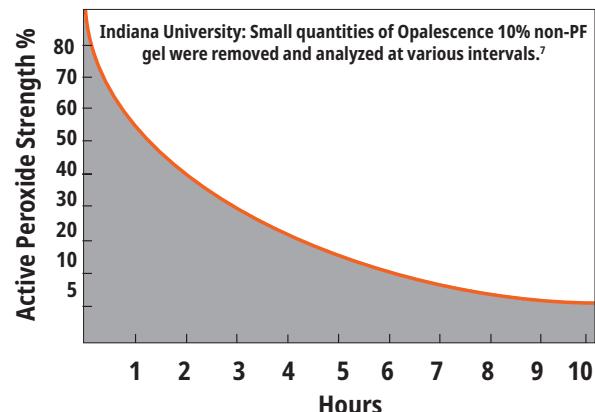
—DR. FRANK SPEAR — SEATTLE INSTITUTE FOR ADVANCED DENTAL EDUCATION

"On behalf of my staff as well as my patients, not one person has made a comment in regards to sensitivity while using this product."

—DR. HEDY ATASHBAR — SILVER SPRING, MD

"Opalescence gel has had 100% patient satisfaction [in our office] for over 10 years. Despite all the changes and competition of OTC products and otherwise, Opalescence gel has been a product that we have been proud to stake our reputation on....The cosmetic aspect of my practice has been dramatically enhanced." —DR. GUY MINOLI — NEW YORK, NY

### STAYS ACTIVE THROUGH THE NIGHT!



FOR YOUR  
CUSTOM TRAY FABRICATION NEEDS



### Ultradent™ LC Block-Out Resin



See page 180 for more information

### Sof-Tray™ Classic Sheets



See page 181 for more information

### Chromaclose™ ALGINATE



See page 93 for more information



## BEFORE AND AFTER



Before whitening.



Upper teeth after 5 nights of treatment, approximately 40 hours.



Before whitening.



After seven Opalescence™ Pro whitening treatments over six months. Patient also whitened at home with Opalescence™ Custom 10%, 15%, 20%, and 35% whitening.



Before whitening.



After one month of whitening.



A 12-year-old before whitening.



After 5 nights of whitening.



Before whitening.



After 16 days of treatment with Opalescence™ Custom 20% whitening gel.



Moderate to advanced tetracycline stains.

Improvement in 2 weeks. With tetracycline stains, treatment can require 2 to 6 months.<sup>1</sup>\* See IFU for complete instructions. 1. Haywood VB, Leonard RH, Dickinson GL. Efficacy of six months of nightguard vital bleaching tetracycline-stained teeth. *J Esthet Dent*. 1997;9(1):13-19

## PROCEDURE\*



1. Take an impression using alginate and create a model that excludes the palate and tongue areas. Alternatively, use digital scans to obtain the impression and then create a 3D printed model.



3. Use vacuum former to heat Sof-Tray™ Classic tray material until it sags approximately 1/4 to 1/2 inch for the 0.035" sheets, and 1" for the 0.060" and 0.080" sheets. Adapt plastic over model. Cool and remove model from vacuum former.



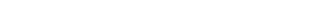
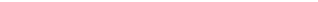
4. With tactile scissors like Ultra-Trim Scalloping Scissors, carefully and precisely trim tray to clear line which is at gingival height. Scallop edges to avoid contact with gingival tissue.



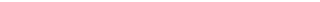
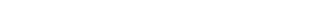
5. Return tray to model and check tray extensions. If necessary, gently flame polish the edges one quadrant at a time with a butane torch. While still warm, hold periphery of each segment firmly against model for three seconds with water-moistened gloved finger. If the tray becomes to thin, fabricate a new tray.



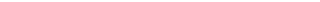
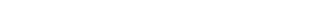
6. Instruct the patient to brush their teeth prior to loading and inserting tray. Go over instructions with the patient that are provided in the whitening kit. Explain the process of loading the tray by expressing one continuous bead of gel approximately halfway up from the incisal edge on the facial side of the tray from molar to molar. Explain that this should use about 1/3 to 1/2 of a syringe.



7. Place tray over teeth. Gently press tray to move gel into place. Pressing too firmly will force gel out of tray.



8. If too much gel has been placed or gel has been forced from tray, gently wipe off with a toothbrush.



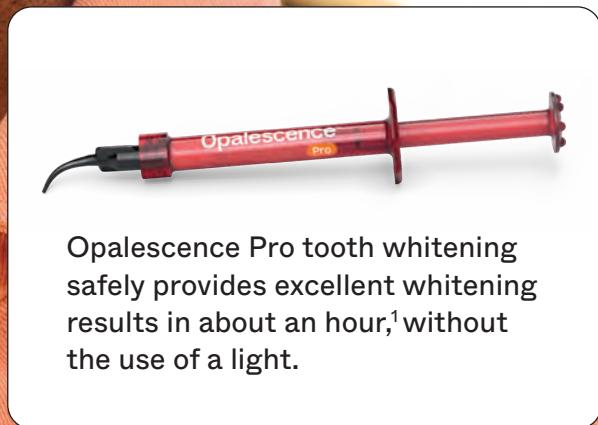
9. Clean tray with toothbrush and water. Store tray in appliance case when not in use. Remind patient to follow the whitening regimen you have established.



WHITEN

# High-impact, in-office **Pro** whitening

new



## Opalescence<sup>™</sup> **Pro**

When your patients are ready for their brightest smile now, there is no time to waste. That's why Opalescence Pro in-office whitening delivers results in one visit.<sup>1</sup>



# Brighten their day in about an hour! Opalescence™



## Results you and your patients can trust:

- Whitens up to 5 shades in about an hour<sup>1</sup>
- Contains potassium nitrate and fluoride for patient comfort
- Effective in helping reduce shade relapse as compared to competitor tooth whitening products<sup>2</sup>



## A whitening treatment designed by dentists:

- No refrigeration required for storage\*
- Syringe-to-syringe mixing ensures maximum strength
- Distinct red color aids proper placement and ensures complete removal

Photos courtesy of Carol Jent, RDH.



Before



After



Scan to see the how-to video

Patient was given three treatments, with two applications per treatment, of Opalescence Pro whitening followed by 2 weeks of Opalescence Custom 10% whitening.<sup>3</sup>



**6248-US - Opalescence Pro 40% Syringe Patient Kit**

2 x 1.2 ml Opalescence Pro/Activator syringes  
1 x 1.2 ml OpalDam Green syringe  
1 x Shade guide card  
1 x IsoBlock  
10 x Black Mini tips



**6247-US - Opalescence Pro 40% Syringe Intro Kit**

4 x 1.2 ml Opalescence Pro/Activator syringes  
2 x 1.2 ml OpalDam Green syringes  
2 x Ultradent Luer Vacuum Adapters  
2 x Shade guide cards  
2 x IsoBlocks  
2 x SST tips  
20 x Black Mini tips



**6249-US - Opalescence Pro 40% Syringe Refill Kit**

20 x 1.2 ml Opalescence Pro/Activator syringes



SCAN  
TO VIEW  
PRICING

\*Mixed whitening gel must be refrigerated.

1. Polydorou O, Wirsching M, Wokewitz M, Hahn P. Three-month evaluation of vital tooth bleaching using light units-a randomized clinical study. *Oper Dent.* 2013;38(1):21-32. doi:10.2341/12-041-C 2. Polydorou O, Hellwig E, Hahn P. The efficacy of three different in-office bleaching systems and their effect on enamel microhardness. *Oper Dent.* 2008 Sep-Oct;33(5):579-586. 3. See IFU for complete instructions.



WHITEN

Brighten your smile  
in about an hour.



# Opalescence™ Pro

## Opalescence™ Pro

IN-OFFICE POWER WHITENER  
- 40% HYDROGEN PEROXIDE



Black Mini™ Tip page 134

- NO LIGHT NEEDED!
- No refrigeration required before mixing
- Powerful 40% hydrogen peroxide gel
- Two to three 20-minute applications for a total of 40–60 minutes of treatment time, not exceeding 3 applications in one visit
- Opalescence Boost whitening gel is designed to maximize patient comfort
- Precise delivery
- Easy to see for placement and removal
- Chairside syringe-to-syringe mixing ensures maximum strength
- Opalescence Boost tooth whitening gel contains PF (potassium nitrate and fluoride)

While there are many other factors to consider, the beginning shade sets the foundation for proper expectations after treatment. This is especially true with in-office whitening. Opalescence Pro whitening is an excellent in-office treatment for less severe, more mild staining as well as tetracycline staining. It safely provides excellent whitening results in about an hour.<sup>4</sup> In most cases, teeth will continue to whiten 24–48 hours after the treatment.

**Important Note:** After mixing, Opalescence™ Pro gel is good for 10 days refrigerated. Before disposing of syringes, aspirate water into the syringe and express liquid down the drain. Repeat a couple of times before disposing of the syringe. Make sure any gauze used is rinsed with water.

**WARNING:** Clinician, assistant, and patient must wear protective eyewear with side shields when mixing and applying Opalescence Pro in-office whitening gel.

*"Opalescence Boost (Pro) whitening gives the patient the results they are looking for: having whiter teeth after one hour of sitting in the dental chair. Instant gratification is very important to people who desire beautiful white teeth. This product achieves the results we're looking for in our practice."* —DR. RONALD FISHER — DELRAY BEACH, FL

\* See IFU for complete instructions. **1.** realityesthetics.com. **2.** Rodrigues JL, Rocha PS, Pardim SLS, Machado ACV, Faria-E-Silva AL, Seraidarian PI. Association Between In-Office And At-Home Tooth Bleaching: A Single Blind Randomized Clinical Trial. *Braz Dent J.* 2018;29(2):133-139. doi:10.1590/0103-6440201801726. **3.** Bruzell EM, Johnsen B, Aalerud, TN, Dahl JE, Christensen T. In vitro efficacy and risk for adverse effects of light-assisted tooth bleaching. *Photochem Photobiol Sci.* 2009;8(3):377-385. **4.** Polydorou O, Wirsching M, Wokowitz M, Hahn P. Three-month evaluation of vital tooth bleaching using light units—a randomized clinical study. *Oper Dent.* 2013;38(1):21-32. doi:10.2341/12-041-C.



Courtesy of CarolJent, RDH.

## BEFORE AND AFTER



Before Opalescence Pro in-office whitener.



After two 20-minute applications of Opalescence Pro whitening treatments.

Courtesy of CarolJent, RDH.



Before Opalescence Pro in-office whitener.



After three 20-minute applications of Opalescence Pro and Opalescence Custom whitening treatments.

## PROCEDURE\* CONTINUED



5. Remove Luer lock cap from OpalDam™ resin barrier and securely attach recommended delivery tip. Verify flow prior to applying intraorally. Rinse and dry teeth and gums thoroughly. Place Ultradent IsoBlock™ bite block and Umbrella™ retractor.



6. Apply OpalDam resin barrier along gingival margin, overlapping approximately 2–3 mm onto enamel. Begin and finish one tooth beyond the most distal tooth being whitened. Express through any open embrasures to completely cover exposed papilla.

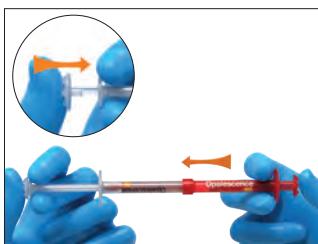


7. Use mouth mirror to ensure there is no exposed gingiva. If so, apply resin. Light cure using a scanning motion. Carefully check cure.

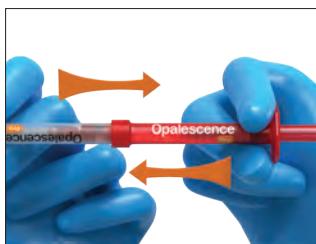


8. Apply a 0.5–1.0 mm layer of gel. Allow gel to remain on the teeth 20 minutes per application, and periodically check on patient comfort and suction saliva.

## PROCEDURE\*



1. Ensure syringes are securely attached. Depress the small clear plunger into the middle small clear syringe to rupture internal membrane and combine whitener and activator. Press the plunger of the red syringe, pushing all contents into the clear syringe.



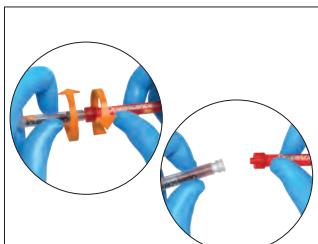
2. Press the contents of the clear plunger completely back into the red syringe. To thoroughly mix activator with whitening gel, push stems back and forth continually and mix 25 times each side.



9. Suction gel from teeth using the Luer Vac and SST™ (Surgical Suction Tip). To avoid gel splatter, do not use water.



10. When no gel is visible, lightly rinse and air dry. Do not dislodge isolation barrier or rubber dam seal. Monitor patient for sensitivity and irritation. If persistent sensitivity occurs, discontinue use.



3. Press all mixed gel into the red syringe. Twist to separate the two syringes and securely attach the Black Mini™ tip onto the red syringe.



4. Verify flow, consistency, and red color before applying intraorally. If resistance is met, replace tip and re-check. If gel is not red, do not use and refer to Step 2 in the Use – Mixing Opalescence Pro In-Office Whitening section of IFU.



11. Evaluate shade change after each application. **Repeat steps 5–7 for no more than 3 applications.** Do not exceed 3 applications per visit. Retreat as necessary using professional judgement.



12. Gently slide the tip of an instrument beneath the resin barrier to remove.

it  
out

**Scan here to order  
marketing materials for  
your office.**

## Tips on Growing your Tooth Whitening Business

Whitening not only creates more profit, it can create better patients, increased interest in cosmetic and restorative services, and positive buzz for your practice.

Here are some simple tips to help grow the tooth whitening business in your practice:

- 1) Designate a Whitening Specialist. This member of your team is responsible for focusing on tooth whitening in your office. They can train the other team members, order supplies, answer any tooth whitening questions, organize internal marketing, and lead the overall effort to increase your whitening business.
- 2) Display a Whitening Album with before and after pictures of the patients who have whitened their teeth. Remove some of the magazines in the reception area and put the album out to showcase the work done in your office.
- 3) Do you have a morning meeting to go over the day's schedule? Review patients' charts to see if tooth whitening has been offered and if so, the last time the patient purchased a touch-up. Discuss tooth whitening with those identified as potential opportunities when they come in that day.
- 4) Put up a display with a pad of paper, a pen, and a fish bowl. Have patients fill out their name and number for a drawing for a FREE whitening procedure.
  - a. This advertises to your patients that you offer tooth whitening in your practice.
  - b. It's a great way to get referrals. The patient who wins will tell friends and family about their FREE whitening.
  - c. Take the names of those who did not win and send a letter or give them a phone call to let them know that although they didn't win, because they expressed an interest in whitening, your office will extend a special discount to them (whatever discount or special you choose). This is a simple way to get in touch with patients who are interested in whitening their teeth, but may not necessarily ask for it.
- 5) Give FREE whitening or touch-ups to patients who schedule and keep their dental hygiene 6-month check-up appointments.
- 6) Offer Tooth Whitening Menus in your reception area and operatories. People love options, and this gives your patients an opportunity to see what is available to them to whiten their teeth.
- 7) Offer tooth whitening gift cards your patients can purchase for family or friends.
- 8) Increase your office's social media presence by entering patients into a drawing for a FREE whitening treatment when they check in at your office on Facebook or Instagram or when they tag your office in a picture of their smile.
- 9) Attend a local bridal show or host a bridal event at your practice. Every bride is looking for ideas for the big day, and what's a better idea than a bright white smile for them and their bridal party?
- 10) Set a goal of providing one whitening treatment a day. "Things that are measured are improved."

**Contact your local Ultrudent Sales Representative for even more tips!**

# Opalescence™





Note: Not intended for use in traumatized teeth, any sign of cervical resorption, or after multiple previous whitening attempts.

## Opalescence™ Endo

NON-VITAL "WALKING BLEACH"  
- 35% HYDROGEN PEROXIDE



2024<sup>1</sup>  
REALITY  
From Start to Finish  
5 stars



Black Mini™ Tip page 134

- 35% hydrogen peroxide
- Easy to place inside pulp chamber
- 1–5 day treatment

Opalescence Endo non-vital whitening gel is formulated specifically to whiten non-vital endodontically treated teeth using the "walking bleach" technique.

### BEFORE AND AFTER

Courtesy of Dr. Rich Tuttle.



Before.



After.



Before.



After.

Courtesy of Dr. Jaleena Fischer-Jessop.



Before.



After.

Courtesy of Dr. Arno Schoeler.



Before.



After.

MUST BE REFRIGERATED



### 1270 - Opalescence Endo Mini Kit

2 x 1.2 ml (1.45 g) syringes  
20 x Black Mini tips

MUST BE REFRIGERATED



### 1323 - Opalescence Endo Mini Refill Kit

2 x 1.2 ml (1.45 g) syringes

1. [realityesthetics.com](http://realityesthetics.com).



## J-Temp™

LIGHT-CURED  
TEMPORARY RESIN



### TEMPORARY RESTORATION: WALKING BLEACH TECHNIQUE\*



1. Evaluate, prepare, and seal the pulp chamber according to the IFU.



2. Place the whitening gel in the pulp chamber leaving 3–5 mm of space for J-Temp temporary resin (no barrier is needed between whitening gel and J-Temp temporary resin).



3. Apply J-Temp temporary resin incrementally in 2–3 mm layers.



4. Light cure between layers.



5. J-Temp temporary resin can be removed and replaced for each additional whitening appointment.



Light-Cured Temporary  
Resin, 4 indications in 1,  
see page 31.

NOTE: Ensure to not displace the whitening gel onto the margins as this may compromise the temporary seal.

\* See IFU for complete instructions. 1. [realityesthetics.com](http://realityesthetics.com).



## BEFORE AND AFTER

Results in as little as one week<sup>1</sup>

## Opalescence™ Whitening Toothpaste

ORIGINAL AND SENSITIVITY RELIEF

- Whitens teeth up to 2 shades in just 2 weeks<sup>2</sup>
- Contains hydrated silica which is proven to remove staining<sup>1</sup>
- Gentle on gums<sup>1</sup>
- Safe for long-term daily use
- Contains sodium fluoride to help prevent cavities and strengthen enamel<sup>3</sup>
- Exceptional fluoride uptake<sup>4</sup>
- 78 RDA<sup>5</sup>
- Triclosan and TiO<sub>2</sub> free
- Vegan - no animal products are used

Opalescence™ whitening is the global leader in professional tooth whitening.<sup>6</sup> Part of that product family is Opalescence™ Whitening Toothpaste, which was developed by a dentist. It actively removes surface stains<sup>2</sup> and is gentle enough to use every day,<sup>5</sup> thanks to its unique silica blend.

- Two kinds of exotic mint are blended into a fresh, clean, cool flavor
- Sweetened with xylitol, which may reduce the risk of tooth decay
- Our Sensitivity Relief formula provides all the whitening benefits of the Original, with the added benefit of maximum strength 5% potassium nitrate



1.0 oz	24pk
Original	402
Sensitivity	3472



1.0 oz	48pk
Original	6472



4.7 oz	12pk
Original	401
Sensitivity	3470

1. Çakmakçıoğlu O, Yılmaz P, Topbaşı BF. Clinical evaluation of whitening effect of whitening toothpastes: A pilot study. *OHDM BMC*. 2009;8(4):6–13. 2. Dursun MN, Ergin E, Tekce AU, Gurgan S. Which whitening toothpaste with different contents is more effective on color and bond strength of enamel?. *J Esthet Restor Dent*. 2023;35(2):397–405. doi:10.1111/jerd.12968 3. Sivapriya E, Sridevi K, Periasamy R, Lakshminarayanan L, Pradeepkumar AR. Remineralization ability of sodium fluoride on the microhardness of enamel, dentin, and dentinoenamel junction: An in vitro study. *J Conserv Dent*. 2017;20(2):100–104. doi:10.4103/JCD.JCD\_353\_16. 4. Data on file. 5. Data on file. 6. Data on file.



# SEE THE COLOR

OpalDam Green resin barrier offers effective coverage of oral tissues, making in-office whitening easier than ever before.

## OpalDam™ and OpalDam™ Green

LIGHT-CURED RESIN BARRIERS



Black Mini™ Tip page 134

- Protects soft tissue with excellent seal
- Removes easily
- Applies directly

OpalDam light-cured resin barrier is a passively adhesive (sealing) methacrylate-based resin barrier used for isolating tissue adjacent to teeth being whitened. For single-tooth whitening, it may be used to protect adjacent teeth. OpalDam resin barrier is light reflecting to minimize heat and tissue sensitivity during curing. OpalDam Green resin barrier ensures a safe, unmistakable barrier every time.

### PROCEDURE\*



1. Apply OpalDam resin barrier approximately 5–10 mm in height. Seal interproximal spaces. Overlap resin approximately 2–3 mm onto dry enamel to seal. Extend resin one tooth beyond last tooth to be whitened. Light cure using a scanning motion for 20 seconds.

2. Remove cured resin quickly and easily in one piece or a few large pieces. Check interproximally for retained resin. Designed to remove easily from embrasures and undercuts.



### 324-U - OpalDam Kit

4 x 1.2 ml (1.34 g) syringes  
10 x Black Mini tips  
10 x Micro 20 ga tips



### 325-U - OpalDam 4pk 326-U - OpalDam 20pk

1.2 ml (1.34 g) syringes



### 1824-U - OpalDam Green Syringe Kit

4 x 1.2 ml (1.34 g) syringes  
10 x Black Mini tips  
10 x Micro 20 ga tips



### 1825-U - OpalDam Green Syringe 4pk 1826-U - OpalDam Green Syringe 20pk

1.2 ml (1.34 g) syringes

\* See IFU for complete instructions. 1. realityesthetics.com.

**Opalustre™ and OpalCups™**

CHEMICAL AND MECHANICAL ABRASION SLURRY



White Mac™ Tip page 137



OpalCups Bristle

OpalCups Finishing

- Removes superficial enamel imperfections
- Provides minimally invasive treatment
- Can help improve the appearance of mild to moderate fluorosis<sup>2</sup>
- Low 6.6% hydrochloric acid concentration aids in removal of surface imperfections
- Silicon carbide microparticles provide gentle mechanical abrasion
- OpalCups cups minimize splatter

Opalustre 6.6% hydrochloric acid slurry contains carbide microparticles to treat surface imperfections through gentle mechanical abrasion and chemical means. OpalCups Bristle cups are latch-type bristle polishing cups that are used with the Opalustre slurry microabrasion technique to facilitate a more aggressive action and minimize splatter. OpalCups Finishing cups are used with Opalustre slurry for micropolishing the newly treated enamel surface.

Use Opalustre slurry and OpalCups cups to quickly remove unsightly enamel decalcification defects that are less than 0.2 mm in depth. Opalustre is effective in treating mild fluorosis and stains in the superficial layer of the enamel.<sup>3</sup> This treatment can be classified under ADA insurance code 9970: enamel microabrasion. We recommend using Opalescence teeth whitening products prior to an Opalustre abrasion slurry treatment, as this procedure can sometimes be avoided. Additionally, please be aware that because the reactive oxygen needs to dissipate from the tooth before bonding, it is necessary to wait 7–10 days before any bonding procedure<sup>4–6</sup> following a teeth whitening treatment.

**BEFORE AND AFTER**

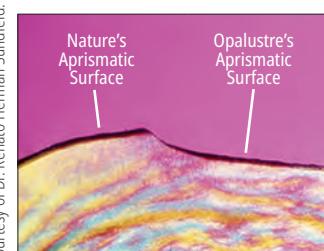
Courtesy of Dr. Bahrat Agrawal.  
Remove or significantly reduce the appearance of mild fluorosis stains with a few applications of Opalustre™ slurry. Apply with stiff-bristle cup and 10:1 gear reduction handpiece with firm pressure.



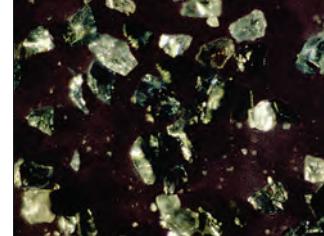
Courtesy of Dr. Rich Tuttle.  
Enamel decalcification corrected after one application of Opalustre™ slurry using OpalCups Bristle cup and 10:1 gear reduction handpiece with firm pressure.



Courtesy of Dr. Jaleena Fischer-Jesop.  
Remove or significantly reduce mild to moderate decalcification with a few applications of Opalustre™ slurry.



Courtesy of Dr. Renato Herman Sundfeld.  
Chemical and mechanical abrasion produce a natural-looking surface.



Silicon carbide microparticles contained in Opalustre slurry.

\* See IFU for complete instructions. **1.** realityesthetics.com. **2.** da Cunha Coelho ASE, Mata PCM, Lino CA, et al. Dental hypomineralization treatment: A systematic review. *J Esthet Restor Dent.* 2019;31(1):26–39. doi:10.1111/jerd.12420. **3.** Celik EU, Yazkan B, Yildiz G, Tunac AT. Clinical performance of a combined approach for the esthetic management of fluorosed teeth: three-year results. *Niger J Clin Pract.* 2017;20(8):943–951. **4.** Da Silva Machado J, Cândido MS, Sundfeld RH, et al. The influence of time interval between bleaching and enamel bonding. *J Esthet Restor Dent.* 2007;19(2):111–119. doi:10.1111/j.1708-8240.2007.00077.x. **5.** Spyrides GM, Perdigão J, Pagani C, Araújo MA, Spyrides SM. Effect of whitening agents on dentin bonding. *J Esthet Dent.* 2000;12(5):264–270. doi:10.1111/j.1708-8240.2000.tb00233. **6.** Unlu N, Cobankara FK, Ozer F. Effect of elapsed time following bleaching on the shear bond strength of composite resin to enamel. *J Biomed Mater Res B Appl Biomater.* 2008 Feb;84(2):363–368.

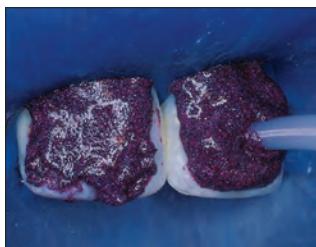


Courtesy of Dr. Rich Tuttle.

## PROCEDURE\* - RUBBER DAM



1. Before.



2. After rubber dam placement, apply Opalustre slurry to discolored enamel using the syringe.



3. Use OpalCups™ Bristle cup to compress Opalustre slurry on tooth surfaces using medium to heavy pressure. Suction the paste from the teeth then rinse, evaluate, and repeat as necessary. Finish treatment by polishing with OpalCups™ Finishing cup.



4. After enamel microabrasion and 21 days of using Opalescence™ whitening gel.



## 554 - Opalustre Kit

4 x 1.2 ml (1.87 g) syringes  
10 x Each OpalCups Bristle and Finishing  
20 x White Mac tips



## 554 - Opalustre Mini Kit

2 x 1.2 ml (1.87 g) syringes  
5 x Each OpalCups Bristle and Finishing  
10 x White Mac tips



## 555 - Opalustre Refill

4 x 1.2 ml (1.87 g) syringes



## 5800 - OpalCups Bristle 20pk



## 5799 - OpalCups Finishing 20pk

Courtesy of Dr. Ted Croll.

## PROCEDURE\* - OPALDAM BARRIER



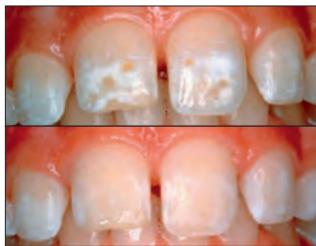
1. Isolate mottled teeth with OpalDam resin barrier. Apply Opalustre slurry directly out of the syringe with a White Mac™ tip.



2. Press the cup against the surface at a slow speed.



3. Remove Opalustre slurry with an air/water spray. Please pay attention to careful vacuuming. Check to see if repeating the treatment is appropriate. Follow with OpalCups Finishing cup.



4. Result of the Opalustre slurry treatment. Upper: before. Lower: after.



# opalpix™



Toothpicks vs. Opalpix cleaners.

- Will not splinter or break
- Has a textured surface for better cleaning
- Perfect balance between flexibility and rigidity
- Massages interproximal tissue while removing debris and plaque
- Personalized stickers available with 100pk upon request

Interproximal Cleaner, page 125.

**UltraEZ™**DESENSITIZING GEL WITH  
POTASSIUM NITRATE AND FLUORIDE

- Designed to quickly and effectively reduce teeth sensitivity<sup>2,3,4</sup>
- Treats dentin sensitivity
- Non-flavored gel available in syringes or disposable trays

UltraEZ gel is a sustained-release 3% potassium nitrate desensitizing gel with fluoride (0.25% neutral NaF). This sustained-release formula starts working quickly to treat sensitivity caused by tooth whitening, root exposure, and thermal or chemical changes.<sup>2,3,4</sup>



**1008 - UltraEZ Single Syringe 4pk**  
**1007 - UltraEZ Econo Single Syringe 20pk**  
1.2 ml (1.48 g) syringes



Featuring the UltraFit™ tray

**5743 - UltraEZ Mini Tray Combo**  
4 x Each upper/lower trays



Featuring the UltraFit™ tray

**5721 - UltraEZ Tray Combo**  
10 x Each upper/lower trays



**1.** realityesthetics.com. **2.** Ozen T, Orhan K, Avsever H, et al. Dentin hypersensitivity: a randomized clinical comparison of three different agents in a short-term treatment period. *Oper Dent*. 2009;34(4):392–398. **3.** Leonard RH Jr, Smith LR, Garland GE, Caplan DJ. Desensitizing agent efficacy during whitening in an atrisk population. *J Esthet Restor Dent*. 2004;16(1):49–56. **4.** Ibrahim PE, Ezzat MA, Ibrahim AH, Shaalan OO. Efficacy of fluoride varnish containing xylitol coated calcium phosphate or potassium nitrate gel versus conventional fluoride varnish in management of hypersensitivity of exposed root surfaces in adult patients: A randomized clinical trial. *Int J Health Sci*. 2022;2760-2776.

**IsoBlock™**

BITE BLOCK



- Designed to be comfortable for patients
- Provides bilateral support with tongue restraint

These disposable IsoBlock bite blocks relax the lips and cheeks, allowing full access to facial and buccal surfaces for in-office whitening, Class V restorations, veneers, cementation, etc.

**331 - IsoBlock 10pk**

**1.** realityesthetics.com.



Tongue, lip, and cheek retractor, page 100.

**Umbrella™**

TONGUE, LIP, AND CHEEK RETRACTOR

- Naturally and gently helps the patient hold their mouth open without pulling or stretching their lips
- A new, innovative tongue-retraction design allows the tongue to comfortably rest behind the tongue guard, keeping it back and away from the working area
- Designed with anatomically placed/shaped bumpers, so clinicians can rest a hand on the patient's mouth without causing discomfort



	<h3>Opalescence™ Shade Guide Card</h3>	<table border="1"> <tr> <td></td><td style="background-color: #ff9999;">50pk</td></tr> <tr> <td>Shade Guide Card</td><td>6494</td></tr> </table>		50pk	Shade Guide Card	6494
	50pk					
Shade Guide Card	6494					
	<h3>Opalescence™ Pocket Tray Cases</h3>	<table border="1"> <tr> <td></td><td style="background-color: #ff9999;">20pk</td></tr> <tr> <td>Variety Pocket Tray Cases</td><td>707</td></tr> </table>		20pk	Variety Pocket Tray Cases	707
	20pk					
Variety Pocket Tray Cases	707					
	<h3>Opalescence™ Custom Tray Patient Instructions</h3> <p>Use these instructions to quickly and easily explain the take-home whitening process and procedure to your patients.</p>	<table border="1"> <tr> <td></td><td style="background-color: #ff9999;">50pk</td></tr> <tr> <td>Patient Instructions</td><td>1012961</td></tr> </table>		50pk	Patient Instructions	1012961
	50pk					
Patient Instructions	1012961					
	<h3>Opalescence™ Family Patient Brochure</h3> <p>Educate patients on the many whitening options available in your office and set your offerings apart from the many store-bought whiteners available.</p>	<table border="1"> <tr> <td></td><td style="background-color: #ff9999;">50pk</td></tr> <tr> <td>Whitening Menu</td><td>1013682-PK</td></tr> </table>		50pk	Whitening Menu	1013682-PK
	50pk					
Whitening Menu	1013682-PK					
	<h3>Opalescence™ Plastic Bag</h3>	<table border="1"> <tr> <td style="background-color: #ff9999;">9" x 14"</td><td style="background-color: #ff9999;">10pk</td></tr> <tr> <td>Plastic Bag</td><td>1013860</td></tr> </table>	9" x 14"	10pk	Plastic Bag	1013860
9" x 14"	10pk					
Plastic Bag	1013860					
	<h3>Opalescence™ Small Organza Bag</h3>	<table border="1"> <tr> <td style="background-color: #ff9999;">4.5" x 12"</td><td style="background-color: #ff9999;">10pk</td></tr> <tr> <td>Small Organza Bag</td><td>8751</td></tr> </table>	4.5" x 12"	10pk	Small Organza Bag	8751
4.5" x 12"	10pk					
Small Organza Bag	8751					
	<h3>Opalescence™ Large Organza Bag</h3>	<table border="1"> <tr> <td style="background-color: #ff9999;">9" x 14"</td><td style="background-color: #ff9999;">10pk</td></tr> <tr> <td>Large Organza Bag</td><td>8750</td></tr> </table>	9" x 14"	10pk	Large Organza Bag	8750
9" x 14"	10pk					
Large Organza Bag	8750					

Note: Gift bags only. Product not included.



## Ultradent™ LC Block-Out Resin



Black Mini™ Tip page 134

- Optimal viscosity for proper application
- Blue pigment for visibility during application
- Great utility resin with multiple uses

Ultradent LC Block-Out Resin provides reservoir space for whitening trays and is useful for other laboratory procedures such as model and die repairs. Ultradent LC Block-Out Resin can be rapidly and efficiently delivered with the Black Mini tip. It must be light cured and is not intended for intraoral use.

### USES\*



For reservoir spaces, apply Ultradent LC Block-Out Resin approximately 0.5 mm thick onto the labial surfaces, staying about 1.5 mm from gingival line, and light cure. Do not extend onto incisal edges and occlusal surfaces.



Ultradent LC Block-Out Resin is a hard, strong, no-mix material for blocking out undercuts on dies and filling in voids.

*"Ultradent LC Block-Out Resin is the original resin block-out product for extraoral use and it's still the best."* —REALITY RATINGS



Also use for periodontal trays.



**240 - Ultradent LC Block-Out Resin Kit**  
4 x 1.2 ml (1.38 g) syringes  
20 x Black Mini tips

### 242 - Ultradent LC Block-Out Resin Econo Kit

20 x 1.2 ml (1.38 g) syringes  
20 x Black Mini tips



**241 - Ultradent LC Block-Out Resin Refill Kit**  
4 x 1.2 ml (1.38 g) syringes

\* See IFU for complete instructions. 1. realityesthetics.com.



## Sof-Tray™ Classic Sheets



Select the 0.035" for most whitening trays, and the 0.060" or the 0.080" for whitening patients who are bruxers.



Use the vacuum former to heat Sof-Tray™ Classic tray material until it sags approximately 1/4 to 1/2 inch for the 0.035" sheets, and 1" for the 0.060" and 0.080" sheets. Adapt plastic over model. Cool and remove model from vacuum former.

### 226 - Sof-Tray Sheets Regular 0.035" 5" x 5" 25pk

0.9 mm - 127 x 127 mm

0.035" thickness

### 227 - Sof-Tray Sheets Medium 0.060" 5" x 5" 20pk

1.5 mm - 127 x 127 mm

0.060" thickness

### 284 - Sof-Tray Sheets Heavy 0.080" 5" x 5" 20pk

2.0 mm - 127 x 127 mm

0.080" thickness

## Ultradent™ Ultra-Trim Scalloping Scissors

- Use for precise trimming of border around interdental papilla
- Spring loaded to minimize finger fatigue
- Grips tray material easily
- Made of durable stainless steel



605 - Ultrudent Ultra-Trim Scalloping Scissors 1pk

## Custom Tray Fabrication

### Whitening Trays



### Periodontal Trays



Ultradent's dental lab is available to professionally fabricate trays. If you would like our lab to fabricate your trays, please follow these steps:

1. Disinfect, wrap, and pad models to prevent breakage.
2. Identify model with patient and doctor name. Make sure Rx contains office address, phone number, and description of the desired tray.
3. Allow 5 working days after models are received and 2 to 3 days for return shipping. Shipping labels and Rx pads are available upon request. Standard shipping is FedEx Third Day. Call 800.552.5512 X 4180.

### 941 - Opalescence™ Custom Whitening Tray

### 1031 - UltraEZ™ Fluoride Tray

## BECOMING AN ULTRADENT ELITE IS EASY.

When you spend \$2,000 on Ultradent products within a calendar year, you are immediately a Bronze member and eligible for the Bronze level benefits. Silver level is available to those who spend \$3,000, Gold level is available to those who spend \$6,000, and Platinum level is reserved for those who spend \$12,000 in one calendar year. Once you are eligible for Ultradent Elite benefits, you will enjoy those benefits for the rest of that calendar year and the following year.

ultradentelite	bronze member	silver member	gold member	platinum member
Enjoy exclusive rewards and savings on the following products and services	\$2,000 – \$2,999 level	\$3,000 – \$5,999 level	\$6,000 – \$11,999 level	\$12,000+ level
<b>Delivery tips</b>	20% OFF	20% OFF	20% OFF	20% OFF
<b>Tissue management (excludes packers)</b>		15% OFF	20% OFF	20% OFF
<b>Enamelast™ fluoride varnish</b>		15% OFF	20% OFF	20% OFF
<b>Ultra-Etch™ etchant</b>		15% OFF	20% OFF	20% OFF
<b>Halo™ and Triudent® matrix systems</b>		10% OFF	15% OFF	20% OFF
<b>VALO™ curing lights</b>	15% OFF ONE-TIME DISCOUNT	20% OFF ONE-TIME DISCOUNT		20% OFF
<b>Gemini EVO™ laser</b>				20% OFF
<b>Gemini™ laser tips</b>			15% OFF	15% OFF
<b>Equipment (curing lights, lasers, handpieces)</b>				20% OFF
<b>Trade show discounts of 20% OFF select consumables and 15% OFF VALO curing lights</b>	✓	✓	✓	✓
<b>Insider emails on overstocks, eligible promotions, and seminars</b>	✓	✓	✓	✓
<b>New product discounts in calendar year launched</b>		10% OFF	15% OFF	20% OFF
<b>Exclusive sale days</b>			✓	✓
<b>Gift during customer appreciation month</b>			✓	✓
<b>Three-month return policy (excluding equipment)</b>			✓	✓
<b>Shipping charge discounts</b>	50% OFF standard shipping on orders under \$285, FREE shipping on standard orders over \$285	FREE standard shipping	FREE standard shipping and 50% OFF 2-day shipping	FREE standard shipping, FREE 2-day shipping upon request

Standard Ground shipping charge is \$14.95.

Ultradent Elite discounts available only on select products.

Discounts are off regular retail price and cannot be combined with any other offer. No quantity price breaks.

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## NOTES



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