# **HAVE YOU HEARD** ABOUT ultradentelite?

### What is the Ultradent Elite program?

The Ultradent Elite program is an exclusive rewards program for our best customers. From shipping and product discounts to insider emails, there are many reasons to become an Ultradent Elite!

ultradentelite	bronze member \$2,000 level	\$3,000 level	\$6,000 level	(plalinum member) \$12,000 level
Standard shipping	50% OFF	FREE	FREE	FREE
Two-day shipping			50% OFF	FREE
10% OFF all Triodent® products		•	•	•
25% OFF the regular price of delivery tips*		•	•	
15% OFF all tissue management products**		•	•	•
15% OFF the regular price of any Enamelast® fluoride varnish kit				
20% OFF consumables and 15% OFF VALO® curing light at trade shows	•	•	•	•
Insider emails on overstocks, eligible promotions, and seminars		•	•	
Exclusive Ultradent calendar		•	•	•
Exclusive sale days				
Gift during customer appreciation month			•	•
Paid registration for doctor and one staff member to a one-day CE seminar (excludes destination seminars)				
Customer holiday gift				•

### How do I become an Ultradent Elite?

Becoming an Ultradent Elite is easy—all you have to do is spend at least \$2,000 within a calendar year, and you're automatically enrolled as a Bronze member. Silver level access is granted to customers who spend \$3,000, Gold level is granted to customers who spend \$6,000, and Platinum level is granted to customers who spend \$12,000 in one calendar year.

As soon as you have spent the allotted amount, you will immediately begin to receive the benefits of the Ultradent Elite program for that tier. You will continue to receive the benefits for the remainder of that current year and the entire following calendar year.

### How do I find out my Ultradent Elite status?

Log in to ultradent.com/elite at any time to view your Ultradent Elite status. You can also see how much you have spent that year and how close you are to

Excludes all NaviTip® tips. No quantity price breaks. Discount is off regular retail price.
 \*\* No quantity price breaks. Discount is off regular retail price. Offers cannot be combined with any other offer.







800.552.5512 — ultradent.com

505 West Ultradent Drive — South Jordan, UT 84095 © 2019 Ultradent Products, Inc. All Rights Reserved. 03.33 010219











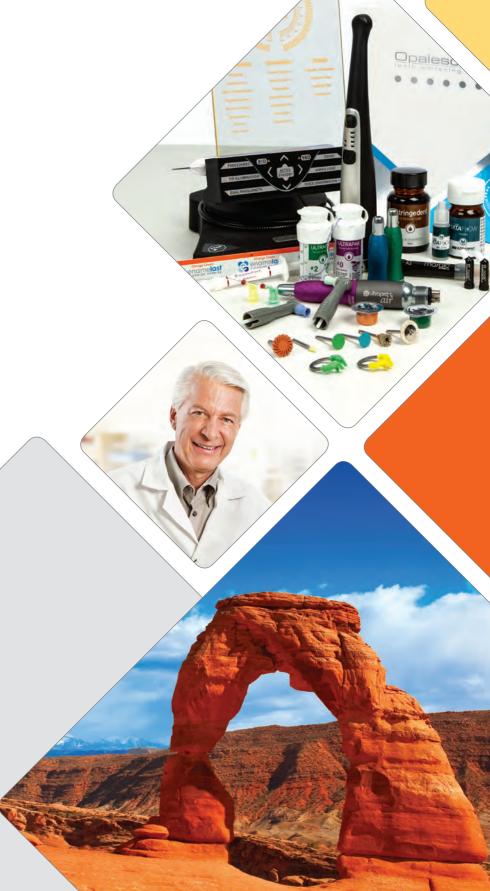


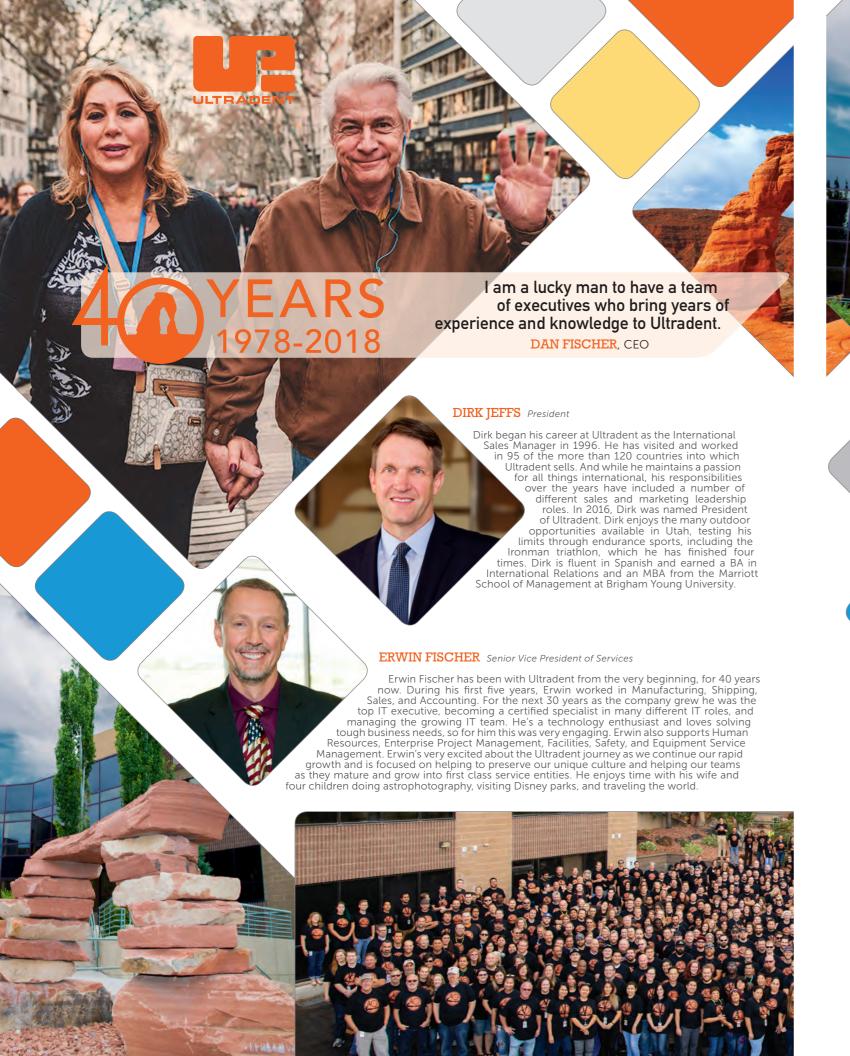


**ULTRADENT** 

PRODUCTS AND PROCEDURES MANUAL 2019









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

**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** 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, with the exception of machines under warranty. 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.

dentistry,' but we don't teach and provide

'preventive dentistry' solutions, we are

hypocrites." - Dan Fischer

Ultradent is certified to MDSAP by a 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 Community laws (directives).



|10-2020| = Lot number110-2020 = Month, October

110-2020 =Year, 2020



0100 = Lot number0100 = Month, October0100 =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.



MARK BRINKERHOFF Vice President - Finance

Mark brings 29 years of experience to his profession, 18 of which he has spent at Ultradent. At Ultradent, Mark has established many major economic objectives and policies for the company. He has led the development, direction, and preparation of financial analyses for the company's operations, planned and implemented new operational procedures to obtain optimum efficiency and reduce controls, and helped to establish extensive lines of credit. Mark also determines and analyzes all corporate budgets, directs all activities concerned with safekeeping, control, and accounting for worldwide assets, and oversees all aspects of the company's accounting, finance, tax, and treasury. A graduate of the University of Utah's David Eccles School of Business, Mark holds a master's degree in Professional Accountancy and is a Certified Public Accountant and Certified Treasury Professional.

### CHUCK ANGER Vice President - Operations

Chuck comes to Ultradent with over 20 years of experience in executive management, specializing in operations, quality, and continuous improvement in multiple industries. After graduating from Weber State University with a degree in chemistry, Chuck began his career in biomedical research, later moving to the nuclear industry. He later went on to work as a senior level Lean Six Sigma Master Black Belt in manufacturing, sales and marketing, human resources, legal, finance, banking, insurance, hospitals and clinical labs, facilities, distribution and supply chain, among many other areas. Chuck has trained and coached over 5,000 project managers, Green Belts, Black Belts, Master Black Belts, and executive leaders that have changed the culture and performance of 40 different companies around the world. In his free time, Chuck enjoys spending time with his wife, children, and grandchildren.

RYAN MACKERELL Vice President - Information Technologies

Ryan has over 25 years of IT experience in a variety of industries. After studying Information Systems at Utah Valley University, he began his career supporting the information systems for a research and development firm focused on material science applications for defense and aerospace. Ryan then spent several years managing IT organizations in the ecommerce, social media, and internet service provider sectors. Over his career he has built, managed, and consolidated data centers, built global networks, and supported sales and marketing operations. He has earned multiple technical certifications in network engineering, information security, and IT operations over his career and continually seeks best practices. Ryan has been with Ultradent for over 15 years and currently manages our dynamic team of technology professionals who support all aspects of Ultradent's global operations. While raising three sons with his wife, he spends a lot of time exploring the outdoors and traveling to new destinations.

Great companies are made of great people!

**DIRK JEFFS**, President























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.











**QR CODES** The QR code on each product page will take you directly to the website. There you will find ordering information, pricing, IFUs, and more.

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nt F

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### ABOUT ULTRADENT

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. The success of Astringedent hemostatic fueled Dr. Fischer's desire to continue developing innovative and more advanced dental solutions—leading to the founding of Ultradent Products, Inc.

Now, marking its 41st 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 and regularly lectures and writes articles about state-of-the-art dentistry. He also works part-time in his daughter's dental practice, which enables him to connect with patients and practice minimally invasive dentistry—a philosophy around which Ultradent develops its products and procedures.

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. Recent innovations include the Uveneer® composite veneer template system, which creates natural-looking, high-quality direct composite veneers quickly and easily. Ultradent also now offers the Endo-Eze™ Genius® endodontic system, which consists of an electric motor and NiTi engine-driven files designed to be used with both reciprocation and rotary movement for endodontic procedures.

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. When he isn't working, he enjoys tending to his garden and spending time with his wife, children, and 34 grandchildren.

# **CEMENTS**

UltraTemp
UltraTemp REZ
ClearTemp LC
PermaShade LC
PermaFlo DC
UltraCem
ExperTemp







# QUALITY SEAL. SUPERIOR HOLD. ULTRADENT CEMENTS

	4		1	*		
	UltraTemp®	UltraTemp® REZ	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	Composite resin	Highly filled small-particle composite resin	Liquid-powder RRGI (RMGI)	Composite resin
Indications for Use	Temporary cementation of provisional crowns, bridges, inlays, and onlays	Temporary cementation of provisional crowns, bridges, inlays, and onlays	Temporary cementation of provisional veneers	Permanent cementation of crowns, inlays, onlays, 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.	0.3 g unit-dose SpeedMix™ syringe or 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	Regular Set 2 minutes	Regular Set: 2–3 minutes Fast Set: 1–2 minutes	Light cure with VALO® curing light for 10 seconds	2.5 minutes working time, full set in 5–8 minutes. Light cure with VALO® curing light according to instructions.	1–3 minutes 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, A3.5, Translucent, Opaque White	Approximately A2	A2, B1, Translucent, Opaque White
Differentiation	Mixes and delivers in one action. Hydrophilic polycarboxylate 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 Regular and Fast set times. Designed to remove in large flakes.	Provides the additional strength necessary to keep provisional veneers in place. Fluoresces under a UV light for easy detection. Adheres more to the provisional than the tooth.	Lowest film thickness (9 µm) known for a luting cement. Higher compressive bond strength than other quality luting cements. Economically priced.	Unique SpeedMix™ syringe delivery is the most efficient way to deliver a liquid-powder formula. Features highest bond strengths to metal or dentin compared to other cements in its category.	Low shade shift for a lasting esthetic result. Unique contra-angle delivery for added precision and convenience. Low shrinkage stress reduces strain on veneers at polymerization.
		TEMPORARY			PERMANENT	
Indications for Use	Self Cure	Self Cure	Light Cure	Dual Cure	Self Cure	Light Cure
Crown	Χ	Х		Χ	Χ	
Bridge	Χ	Х		Х	Χ	
Veneer			Χ			Χ
Post Cementation				Х		
Core Buildup				Х		
Walking Bleach	Х					
Crown and Bridge for Implants		Х		Х		
Endo Access Opening	Х	Х				
Orthodontic Bands					Х	
Pedodontics					Х	
Inlays/Onlays	Χ	Х		Х	Х	





### **UltraTemp®**

POLYCARBOXYLATE, NON-EUGENOL TEMPORARY LUTING/FILLING MATERIAL













Ultradent® Mixing Tip page 130

- Non-eugenol formula won't interfere with resin bonding
- 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
- Water soluble for easy removal at the right time
- Hydrophilic, polycarboxylate chemistry ensures low irritation to pulp and a quality seal
- Use to cover access for intercoronal whitening

UltraTemp luting material is suggested for routine 1- to 2-week temporization of custom-fabricated provisionals or standard preformed provisionals where adequate retention exists.

### **PROCEDURE**



1. Prior to complete set, remove excess UltraTemp luting material easily with a moist cotton swab or gauze. Following subgingival set of 1–2 minutes, remove quickly with explorer.



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



3. Quickly remove bulk of residual cement. Note well-healed tissues; UltraTemp filling material is kind to tissue.



4. Use Consepsis® Scrub abrasive slurry with a rubber cup or STARbrush® brush to remove residual cement.

### **REFRIGERATE**

5916 UltraTemp Regular 2- to 3-Minute Set Time

1 x 5 ml UltraTemp syringe
20 x Mixing tips

1. realityesthetics.com.

### UltraTemp® REZ

RESIN-BASED, NON-EUGENOL TEMPORARY LUTING/FILLING MATERIAL











- Non-eugenol formula won't interfere with resin bonding
- 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
- Water soluble for easy removal at the right time
- Hydrophilic resin-based formula

UltraTemp REZ luting material is recommended for the retention of interim restorations on implants and provisional restorations when longer retention is required and there is insufficient preparation retention. Fast Set (1 to 2 minutes) and Regular Set (2 to 3 minutes).

### Note: Do not use for internal whitening.

### **PROCEDURE**



Mix and deliver simultaneously.
 No mess, little waste.



2. Provisional removal, 2 weeks post-op. UltraTemp REZ luting material provides slightly higher retention due to its resin-based chemistry.



3. Material is designed to flake off easily from preparation.



4. After

### REFRIGERATE

6040 UltraTemp REZ Regular 2- to 3-Minute Set Time 6041 UltraTemp REZ Fast 1- to 2-Minute Set Time

1 x 5 ml UltraTemp REZ syringe 20 x Mixing tips



# **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. ClearTemp LC cement will also adhere more to the provisional than to the tooth, minimizing the time and effort required to remove it from the preparation. For luting temporary veneers, nothing will hold as strong or look as natural as ClearTemp LC temporary veneer cement.

**COMPARE** 

### **ESTHETIC**



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

# will be proud to reveal. FLUORESCING PROPERTIES





A traditional temporary cement shows

through the provisional crown on #8.

ClearTemp LC cement does not show

through the provisional veneer on #9.

ClearTemp LC cement fluoresces under black light for easy detection. It is also designed to adhere more to provisional than to preparation. Use black light to ensure complete removal of ClearTemp LC cement. This is an important step that minimizes potential to damage final restoration. Use the VALO® black light lens attachment or UltraSeal® XT hydro black light keychain for high visibility.

### **PROCEDURE**



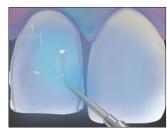
1. Remove product from refrigerator and bring to room temperature. Clean, rinse, and lightly dry preparation. Express enough ClearTemp LC cement to coat inside surface of provisional.



2. Seat temporary veneer on preparation and remove flash. Light cure for 10 seconds on Standard Power mode with VALO curing light. For curing lights with output <600 mW/cm2, cure 20 seconds.



3. 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.



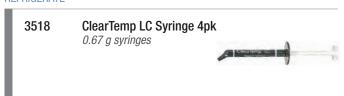
4. Illuminate surface with UV light to reveal remaining ClearTemp LC cement. Remove any remaining cement and recheck. Scour prep with pumice-type slurry and cup or brush. Rinse thoroughly and prepare for final cementation.

Note: Due to its high bond strength compared to other temporary cements, ClearTemp LC temporary veneer cement should be used for temporary veneers ONLY.



We recommend PermaShade  $^{\rm @}$  LC veneer cement for luting permanent veneers. See the next page.

### REFRIGERATE



1. realityesthetics.com.



### PermaShade® LC

LIGHT-CURE VENEER LUTING RESIN







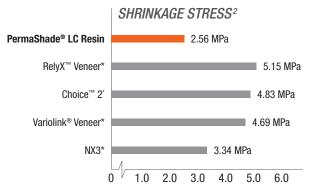


- Unsurpassed low shade shift<sup>1</sup>
- Medium viscosity keeps veneer from drifting once seated
- Use for porcelain, zirconia, composite, and other indirect veneers

PermaShade LC luting resin is a light-cured luting resin used exclusively for cementing veneers. Its ergonomic contra-angle syringe makes luting delicate veneers 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 veneer smile.

### INDEPENDENT STUDY

Independent university tests confirm PermaShade LC luting resin showed no perceptible shade shift after an accelerated aging process.1 Light-cured resins tend to be more color stable due to the addition of non-aromatic aliphatic amines, which are resistant to oxidation.  $\Delta E$ shade shift is less than 3. (3 or higher is visible to the human eye.)



Low shrinkage stress reduces strain on veneer, minimizing risk of post-cure breakage.2

### BEFORE AND AFTER







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. For optimal handling, bring PermaShade LC resin to room temperature before use.

#### REFRIGERATE

#### 3517 PermaShade LC Veneer Cement Kit

4 x 0.95 g PermaShade LC Trans syringes

3 x Each 0.95 g PermaShade LC A2, B1, and Opaque White syringes

2 x 1.2 ml Peak Univ Bond syringes

1 x 1.2 ml Ultra-Etch syringe

1 x 1.2 ml Porcelain Etch syringe

1 x 1.2 ml Silane syringe

20 x Blue Micro tips

20 x Black Mini Brush tips

60 x Inspiral Brush tips



5227 PermaShade LC Translucent Syringe 4pk 5228 PermaShade LC Opaque White Syringe 4pk 5229 PermaShade LC A2 Syringe 4pk 5230

PermaShade LC B1 Syringe 4pk

0.95 g syringes



<sup>\*</sup> Trademark of a company other than Ultradent. 1. Barghi N, Gureckis KM, McAlister T. Color stability of two luting resins, J Dent Res. 90(Spec Iss A):1685, 2011 (www.dentalresearch.org), 2. Data on file



### 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
- Redesigned syringe for easy dispensing
- 2.5 minutes working time, 5–8 minutes set time

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 the lowest film thickness of only  $9\,\mu m$ .

PermaFlo DC luting resin is recommended for permanent cementation of opaques, total ceramic 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 is compatible with Peak® Universal Bond adhesive for light-cured bonding and luting.







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



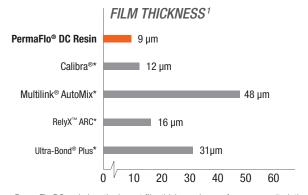
Adhesive luting for crowns, bridges, inlays, and onlays. With syringe/tip delivery, a crown is loaded from depth of crown to ensure no air entrapment.



The Intraoral tip snaps onto PermaFlo DC's dual-barrel mixing tip for precise placement of luting material.

### TECHNICAL DATA<sup>1</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 MPa
Compressive Strength	355.91 MPa
Compressive Modulus	4.22 MPa

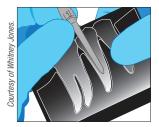


PermaFlo DC resin has the lowest film thickness known for a composite luting resin.

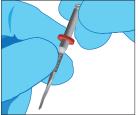
### **REFRIGERATE**

 $<sup>\</sup>mbox{\ensuremath{\star}}$  Trademark of a company other than Ultradent.  $\mbox{\ensuremath{\mathtt{1.}}}$  Data on file.

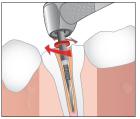
### SAMPLE BONDED POST PROCEDURE



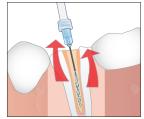
1. Determine post size and length using a try-in post or X-ray and clinical judgment.



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

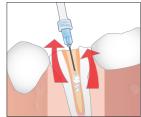


3. Position UniCore tip in pilot hole. Using light pressure, follow obturation material to length indicated by rubber stop. Keeping drill at full speed, withdraw from canal.



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

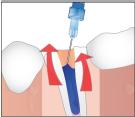
OR



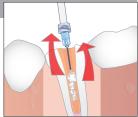
5. Blow out excess water with TriAway Adapter and Endo-Eze 22 ga tip to dry canal.

6. Verify post size by placing corresponding UniCore Post and seat to length. Then trim post to appropriate length using a diamond disc.

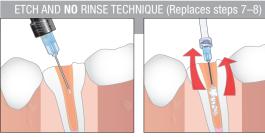




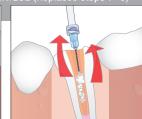
7. Etch space for 20 seconds with Ultra-Etch® etchant using Endo-Eze 22 ga tip. Start apically and fill coronally.



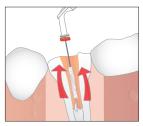
8. Use TriAway Adapter and Endo-Eze 22 ga tip to rinse thoroughly with water and lightly air dry, leaving the post space slightly damp.



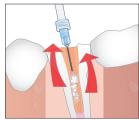
7a. Attach 22 ga Endo-Eze Tip to Peak SE primer syringe. Apply to post space and coronal preparation for 20 seconds using agitating action.



8a. Blow out excess from bottom up using TriAway Adapter with 22 ga Endo-Eze tip and suction. Do not over-dry.



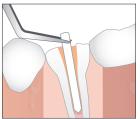
9. Use 30 ga NaviTip® FX® tip or Micro Applicator to place Peak® Universal Bond adhesive. Scrub full length of post space and entire tooth prep for 10 seconds.



10. Remove excess Peak Universal Bond adhesive using the TriAway Adapter with Endo-Eze 22 ga tip and suction. Continue for 10 seconds at ½ air pressure.



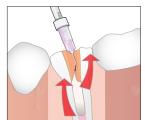
11. Light cure adhesive in post space for 20 seconds. If close to gingiva, use two 10-second intervals or 6 seconds using Xtra Power mode on VALO® curing light.



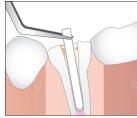
12. Verify UniCore Post will seat prior to placing luting cement.



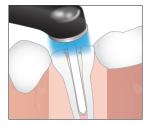
13. Load PermaFlo DC cement into the Skini syringe with the pink 20 ga Endo-Eze tip. Verify mix and flow.



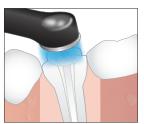
14. Use the pink Endo-Eze 20 ga tip to deliver mixed PermaFlo DC cement into post space beginning apically and moving coronally.



15. Insert post slowly and seat to predetermined depth.



16. Light cure PermaFlo DC cement in canal through post with VALO curing light for 20 seconds. If close to gingiva use two 10-second intervals or Xtra Power mode on VALO curing light.



16. Express PermaFlo DC cement around post for core buildup. If cement starts to slump, light cure for 5 seconds between layers. Incrementally build up core.





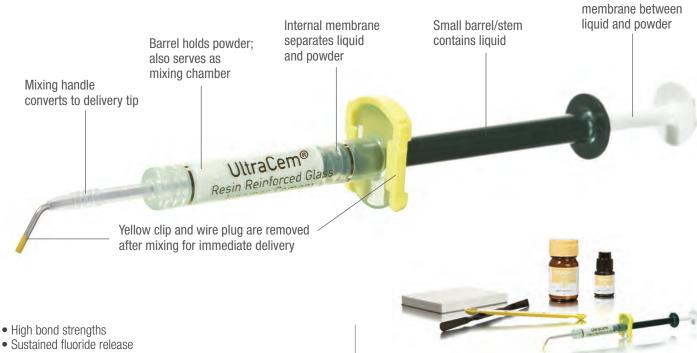
### FIRST OF ITS KIND! Liquid and Powder Cement Mixed and Delivered from a Syringe! Strongest RRGI/RMGI tested.1

Outer stem bursts









- Flexible structure is similar to the tooth's natural makeup to reduce the risk of breakage
- Flowable viscosity and low film thickness won't compromise fit or occlusion
- 1- to 3-minute working time, 5-minute set time
- Radiopacity >1 mm aluminum

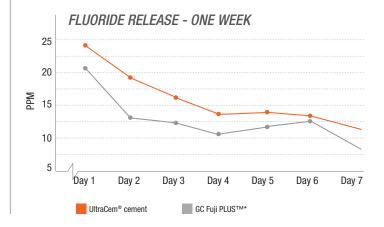
UltraCem resin-reinforced glass ionomer cement offers the best of both worlds in a luting cement: efficient delivery and unsurpassed performance. Its advanced chemistry boasts the highest bond strengths in its category, while its unique SpeedMix™ syringe ensures the ultimate luting convenience. UltraCem cement is also 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 to enamel.

For zirconia restorations only, apply Peak® Universal Bond adhesive to the preparation using a scrubbing motion for 10 seconds. (No etchant required.) Aggressively air thin until surface appears dull and light cure for 10 seconds with VALO® curing light. For best results, sandblast the inside of the zirconia prosthesis; clean with an air/water spray, and dry.

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 UltraCem® cement 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



### UltraCem® SpeedMix™ Syringe

- Faster than hand mixing
- No need for trituration
- No additional tips or parts required
- Consistent mixing ratios every time
- Unit-dose delivery for low risk of contamination
- Effectively mixes and delivers a superior liquid-powder formula in seconds with no mess



1. Flick/tap barrel 4 times to fluff powder.



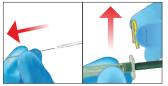
2. Press white stem firmly into green stem to push liquid into powder chamber.



3. Leave metal rod in place; grasp plastic delivery/mixing tip and mix chemical 10 to 15 times vigorously back and forth.



4. Fully extend delivery/mixing tip.



5. Discard metal rod and yellow clip.



7. Express material into prosthesis.



<sup>\*</sup> Trademark of a company other than Ultradent, 1. Data on file.

### Light-Cured Adhesive, see page 54.

### Peak® Universal Bond

LIGHT-CURED ADHESIVE



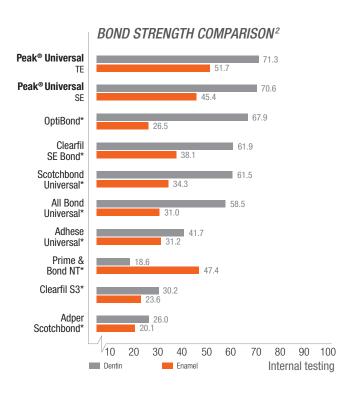








- Features Ultradent's Dyme Tech<sup>™</sup> phosphate monomer blend for enhanced strength and greater versatility
- Bonds to dentin, enamel, porcelain, metal, composite, acrylic, and zirconia
- Ideal for direct and indirect bonding, as well as post and core procedures
- Works with self-etch and total-etch techniques
- · Available in syringe or bottle delivery



<sup>\*</sup> Trademark of a company other than Ultradent. 1. realityratings.com 2. Vargas M. Ultramorphological evaluation of the resin-dentin-enamel interface produced by three proprietary self-etching adhesive systems. 2007. Data on file.



# ExperTemp°

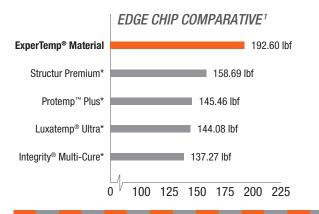
TEMPORĀRY CROWN AND BRIDGE MATERIAL



- Trims easily and polishes beautifully (polishing optional)
- Low oxygen inhibition at polymerization
- 10:1 self-cured chemistry provides exceptional strength, flexibility, and high abrasion resistance
- Can be repaired with a packable composite, a flowable composite, or additional ExperTemp material
- Fluoresces similarly to enamel
- Available in A1, A2, A3, A3.5, B1, and Bleach White shades

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 material of choice for temporization.

# FLEXURAL MODULUS COMPARATIVE¹ ExperTemp® Material Luxatemp® Ultra\* Structur Premium\* Integrity® Multi-Cure\* Protemp™ Plus\* 2.31 GPa 1 2 3 4 5 6



### **PROCEDURE**



1. ExperTemp temporary crown and bridge with esthetic translucency.



2. Prep teeth. Scour with Consepsis® Scrub and STARbrush intercoronal brush.



3. Apply ClearTemp® LC temporary veneer cement.



4. Use blade to trim temporary crown and bridge without altering margins.

Adjust provisional

4:00



5. ExperTemp material achieves esthetic blend with natural teeth.

6341 6340 6347 6342 6343 6344	ExperTemp A1 Kit ExperTemp A2 Kit ExperTemp A3 Kit ExperTemp B1 Kit ExperTemp BW Kit 1 x 50 ml cartridge 15 x Mixing tips
6345	ExperTemp Dispensing Gun 1pk 10:1/4:1 gun
6346	ExperTemp Mixing Tips 45pk

Complete cure

Allow to cure

in mouth

1:30

0.00

Working time and

insert in mouth

0:40

2:30

Remove from mouth

# **COMPOSITES**

Mosaic
Vit-l-escence
Amelogen Plus
Ultradent Composite Gun
Composite Wetting Resin
PermaFlo Pink
PermaFlo
Uveneer

















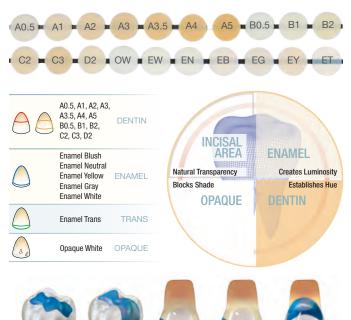


- Smooth, pliable consistency
- Cuts easily and doesn't stick to instruments
- Won't flow or slump out of place after being shaped
- Allows ample working time under ambient light

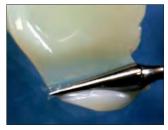
Mosaic universal composite balances beauty and performance for lasting, lifelike results. Mosaic composite can be used for all restorative purposes: basic or complex. Its nanohybrid formula is composed of zirconia-silica glass ceramic and 20 nanometer silica. Filler load is 68% by volume for dentin shades and 56% for enamel shades. 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 shade.



4. A5 dentin shade used for initial layer.



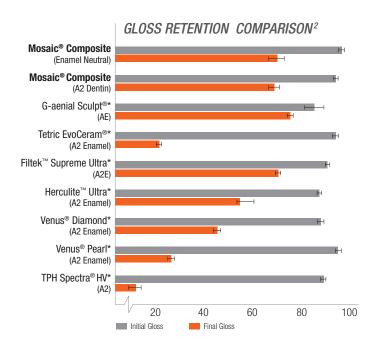
5. Enamel Neutral shade used for final layer.

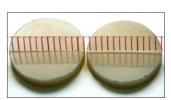
Class II restoration using Peak® Universal Bond adhesive system with Mosaic composite shades A5 and Enamel Neutral.

### 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	≤40 μg/mm³	≤40 µg/mm³
Water Solubility	≤7.5 µg/mm³	≤7.5 µg/mm³
Radiopacity	≥2 mm AI (200%)	≥2 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%

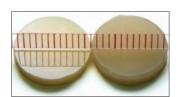
Balanced performance ensures both functional durability as well as esthetic longevity.







Mosaic composite after 10,000 brush cycles



Competitor composite polished before brushing Competitor composite after 10,000 brush cycles

4803 Mosaic Shade Guide—20 shades
A0.5, A1, A2, A3, A3.5, A4, A5, B0.5, B1, C2, C3, D2,
EY, EB, EG, EN, EW, OW, ET

### 4801

### Mosaic Syringe Intro Kit

1 x Each 4 g Mosaic A1, A2, A3, EN, and ET syringe 1 x Mosaic Shade Guide



4802

### Mosaic Single Compules Intro Kit

10 x Each 2.5 g Mosaic A1, A2, A3, EN, and ET compules 1 x Mosaic Shade Guide



### 4 g Mosaic Syringes 1pk

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	1pk
B0.5	4767	Opaque White	4778
B1	4768		
B2	4769		
C2	4770		
C3	4771		
D2	4772		



x 1

### 0.2 g Mosaic Single Compules 10pk

Dentin	10pk	Enamel	10pk
A0.5	4799	Enamel Yellow	4792
A1	4780	Enamel Blush	4793
A2	4781	Enamel Gray	4794
А3	4782	Enamel Neutral	4795
A3.5	4783	Enamel White	4796
A4	4784	Enamel Trans	4798
A5	4785	Opaque	10pk
B0.5	4786	Opaque White	4797
B1	4787		
B2	4788		
C2	4789		
C3	4790		
D2	4791		



x 10

<sup>\*</sup>Trademark of a company other than Ultradent. 1. Data on file. 2. Data on file. Final gloss measured after 10,000 brush cycles in gloss units (GU).

# Vīt-l-escence<sup>®</sup>













- Effortlessly blends with natural dentin and enamel
- Intended for anterior and posterior restorations
- Is both creamy and sculptable
- Polishes beautifully
- Matches shade guide perfectly

Vit-I-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 µm.\* The all-composite shade guide contains uniquely shaped tabs to assist in the most refined lavering 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-I-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-I-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-I-escence products, these shades are truly 'pearl' precious and beautiful." —DR. MARYANN PITTMAN – SAINT PETERSBURG, FL

"With Vit-I-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.





Before.

After.





Before.

After.





Before.

After.





Before.

After.





Before.

After.

<sup>\*</sup> Dependent on modality for particle size measurement, 1, realityesthetics.com.

### VIT-L-ESCENCE LAYERING TECHNIQUE



 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.

5. Cover body and extend enamel edge

with appropriate translucent shade. To

edge), place thin roll of Pearl Frost or

Opaque Snow.

achieve a "halo" (white line at the incisal



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

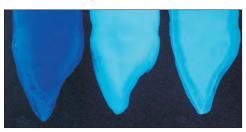


6. Make final adjustments with multifluted finishing burs. Use Jiffy® cups, points, and disks for smoothing. Polish with Jiffy® HiShine.

### NATURAL ENAMEL OPALESCENCE AND DENTIN FLUORESCENCE



Vit-I-escence Enamel



Traditional Composite

Natural Tooth

Vit-I-escence Dentin Shade

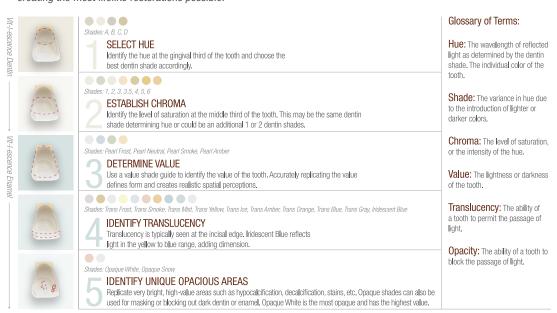


Vit-I-escence

Porcelain

Vit-I-escence can be even more translucent than porcelain.

In a simple technique, Vit-I-escence® esthetic restorative material allows you to layer enamel shades over dentin shades, creating the most lifelike restorations possible.



# © COMPOSITES

### 5016 Vit-I-escence Essentials Kit—9 Shades

- 1 x Each 2.5 g Vit-I-escence dentin shade A1, A2, A3, and B1 syringe
- 1 x Each 2.5 g Vit-I-escence enamel shade Opaque Snow, Pearl Frost, Pearl Neutral, Trans Mist, and Iridescent Blue syringe
- 1 x Each 1.2 ml Permaflo A4 and Translucent syringe
- 1 x Essentials shade guide
- 1 x Half-size syringe organizer
- 1 x Quad key
- 20 x Micro 20 ga tips



### 2.5 g Vit-I-escence Syringes 1pk

Dentin	1pk	Enamel	1pk
A1	358	Opaque White™	1182
A2	343	Opaque Snow™	1183
A3	344	Pearl Frost <sup>™</sup>	443
A3.5	356	Pearl Neutral™	1184
A4	360	Pearl Amber <sup>™</sup>	1185
A5	362	Pearl Smoke <sup>™</sup>	1186
A6	408	Trans Frost™	1187
B1	409	Trans Mist™	482
B2	418	Trans Smoke™	485
В3	421	Trans Blue™	1188
B4	422	Trans Orange™	1189
B5	423	Trans Gray™	478
C1	426	Trans Ice™	479
C2	435	Trans Yellow™	486
C3	439	Trans Amber™	499
C4	440	Iridescent Blue™	1317
C5	441		
D3	442		

3080 Composite Quad Key 1pk



### 1195 Vit-I-escence Single Compules Kit—10 Shades

10 x Each 0.3 g Vit-I-escence dentin shade A1, A2, A3, A3.5, and B1 compules 10 x Each 0.3 g Vit-I-escence enamel shade Pearl Frost, Pearl Neutral, Pearl Amber, Pearl Smoke, and Opaque Snow compules 1 x Shade guide



### 0.3 g Vit-I-escence Single Compules 10pk

Dentin         10pk         Enamel         10pk           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 Frost™         2239           B1         1205         Trans Mist™         2240           B2         1223         Trans Smoke™         2241           B3         2232         Trans Blue™         2242           B4         2233         Trans Orange™         2243           B5         2234         Trans Gray™         2244           C1         1227         Trans Ice™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236         Iridescent Blue™         2248	J	J		
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 Frost™       2239         B1       1205       Trans Mist™       2240         B2       1223       Trans Smoke™       2241         B3       2232       Trans Blue™       2242         B4       2233       Trans Orange™       2243         B5       2234       Trans Gray™       2244         C1       1227       Trans Ice™       2245         C2       1228       Trans Yellow™       2246         C3       1229       Trans Amber™       2247         C4       2235       Iridescent Blue™       2248         C5       2236	Dentin	10pk	Enamel	10pk
A3         1203         Pearl Frost™         1196           A3.5         1204         Pearl Neutral™         1197           A4         1220         Pearl Amber™         1210           A5         2230         Pearl Smoke™         1198           A6         2231         Trans Frost™         2239           B1         1205         Trans Mist™         2240           B2         1223         Trans Smoke™         2241           B3         2232         Trans Blue™         2242           B4         2233         Trans Orange™         2243           B5         2234         Trans Gray™         2244           C1         1227         Trans lce™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	A1	1219	Opaque White™	2238
A3.5         1204         Pearl Neutral™         1197           A4         1220         Pearl Amber™         1210           A5         2230         Pearl Smoke™         1198           A6         2231         Trans Frost™         2239           B1         1205         Trans Mist™         2240           B2         1223         Trans Smoke™         2241           B3         2232         Trans Blue™         2242           B4         2233         Trans Orange™         2243           B5         2234         Trans Gray™         2244           C1         1227         Trans Ice™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	A2	1202	Opaque Snow™	1212
A4         1220         Pearl Amber™         1210           A5         2230         Pearl Smoke™         1198           A6         2231         Trans Frost™         2239           B1         1205         Trans Mist™         2240           B2         1223         Trans Smoke™         2241           B3         2232         Trans Blue™         2242           B4         2233         Trans Orange™         2243           B5         2234         Trans Gray™         2244           C1         1227         Trans Ice™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	A3	1203	Pearl Frost™	1196
A5 2230 Pearl Smoke™ 1198  A6 2231 Trans Frost™ 2239  B1 1205 Trans Mist™ 2240  B2 1223 Trans Smoke™ 2241  B3 2232 Trans Blue™ 2242  B4 2233 Trans Orange™ 2243  B5 2234 Trans Gray™ 2244  C1 1227 Trans Ice™ 2245  C2 1228 Trans Yellow™ 2246  C3 1229 Trans Amber™ 2247  C4 2235 Iridescent Blue™ 2248	A3.5	1204	Pearl Neutral™	1197
A6         2231         Trans Frost™         2239           B1         1205         Trans Mist™         2240           B2         1223         Trans Smoke™         2241           B3         2232         Trans Blue™         2242           B4         2233         Trans Orange™         2243           B5         2234         Trans Gray™         2244           C1         1227         Trans Ice™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	A4	1220	Pearl Amber <sup>™</sup>	1210
B1         1205         Trans Mist™         2240           B2         1223         Trans Smoke™         2241           B3         2232         Trans Blue™         2242           B4         2233         Trans Orange™         2243           B5         2234         Trans Gray™         2244           C1         1227         Trans Ice™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	A5	2230	Pearl Smoke™	1198
B2       1223       Trans Smoke™       2241         B3       2232       Trans Blue™       2242         B4       2233       Trans Orange™       2243         B5       2234       Trans Gray™       2244         C1       1227       Trans lce™       2245         C2       1228       Trans Yellow™       2246         C3       1229       Trans Amber™       2247         C4       2235       Iridescent Blue™       2248         C5       2236	A6	2231	Trans Frost™	2239
B3       2232       Trans Blue™       2242         B4       2233       Trans Orange™       2243         B5       2234       Trans Gray™       2244         C1       1227       Trans Ice™       2245         C2       1228       Trans Yellow™       2246         C3       1229       Trans Amber™       2247         C4       2235       Iridescent Blue™       2248         C5       2236	B1	1205	Trans Mist™	2240
B4         2233         Trans Orange™         2243           B5         2234         Trans Gray™         2244           C1         1227         Trans Ice™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	B2	1223	Trans Smoke™	2241
B5         2234         Trans Gray™         2244           C1         1227         Trans Ice™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	В3	2232	Trans Blue™	2242
C1         1227         Trans Ice™         2245           C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	B4	2233	Trans Orange™	2243
C2         1228         Trans Yellow™         2246           C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	B5	2234	Trans Gray™	2244
C3         1229         Trans Amber™         2247           C4         2235         Iridescent Blue™         2248           C5         2236	C1	1227	Trans Ice™	2245
C4         2235         Iridescent Blue™         2248           C5         2236	C2	1228	Trans Yellow™	2246
C5 2236	C3	1229	Trans Amber™	2247
	C4	2235	Iridescent Blue™	2248
N2 2227	C5	2236		
טט בבטו	D3	2237		



(10

822 Master's Shade Guide—24 Shades

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



### Optional KleenSleeve™ QuadraSpense™



### **Quad Key**

Use to remove the white quad flanges on the Vit-I-escence syringe to create an open-bore delivery barrel if desired.



Vit-I-escence shades are identified on both the barrel and the stem.





# amelogen plus

COMPOSITE RESTORATIVE MATERIAL













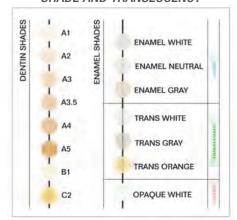
- Simple, affordable system
- Excellent, nonslumping consistency
- Brilliant polishing capability

Amelogen Plus composite restorative material is a state-of-the-art, radiopaque, Bis-GMA material that is 76% filled by weight with a 0.7  $\mu$ m average particle size. It displays exceptional handling, optical, and polishing characteristics. Amelogen Plus composite will not slump or stick to instruments, providing extra control in handling.

Amelogen Plus composite is an excellent choice for designing Class I, II, III, IV, V, and VI restorations, as well as direct veneers. It is perfect for both posterior and anterior restorations because of its wear resistance, strength, simplicity, and polishability.

The simple and intuitive shade system of Amelogen Plus composite allows dentists to achieve beautiful and natural-looking restorations without the complication of most esthetic composite systems.

### SHADE AND TRANSLUCENCY



"I am pleased with Amelogen composite's ease of placement, its adaptability to tooth color, and its predictability to last as a posterior restoration."

—DR. MARK H. WEBB — BRISTOL. TN

### **BEFORE AND AFTER**





Before.

ore.

After.





Before.

After.





Before.

After: Posterior composite is bonded, reinforcing both tooth and restoration, and delivering high wear resistance and quality esthetics.

### ESTHETIC RESTORATION PROCEDURE

Courtesy of Dr. Pablio Sene and Dr. Paulette Spencer.



1. Fracture on maxillary left central incisor.

2. Beveled preparation along surface margin.





3. Palatal enamel layer Trans Orange.

4. Recreation of dentin mamelons A3.5.





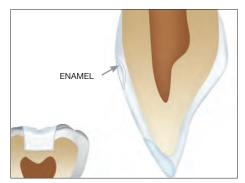
5. Incisal characterization and buccal enamel layer Enamel Neutral.

6. Final result.

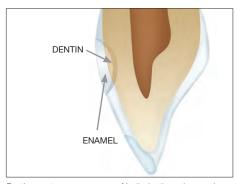




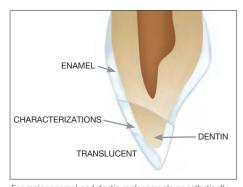
### DIRECT COMPOSITE LAYERING TECHNIQUE



For enamel-only restorations use a single shade of Amelogen® Plus composite, usually enamel.



For the most common cases of both dentin and enamel restorations in intermediate-size cavities, use both a dentin and an enamel shade. Make sure that composite enamel layer is thinner than natural enamel layer.



For major enamel and dentin replacements or esthetically challenging restorations, use multiple dentin shades (darkest at the lowest point) and characterize with translucent shades if needed.

### 3098

### Amelogen Plus Basic Kit-7 Shades

1 x Each 2.5 g Amelogen Plus dentin shade A1, A2, A3, A4, A5, B1, and C2 syringe

1 x 1.2 ml PermaSeal syringe

1 x Shade guide

1 x Half-size syringe organizer

1 x Quad key

10 x Black Micro FX tips



### 315

### Amelogen Plus Cosmetic Kit—7 Shades

1 x Each 2.5 g Amelogen Plus dentin shade A1, A2, and A3 syringe

1 x Each 2.5 g Amelogen enamel shade Opaque White, Enamel White, Enamel Neutral, and Translucent White syringe

1 x 1.2 ml PermaSeal syringe

1 x Shade guide

1 x Half-size syringe organizer

1 x Quad key

10 x Black Micro FX tips



### 2.5 g Amelogen Plus Syringes 1pk

Dentin	1 pk	Enamel	1pk
A1	9030	Opaque White™	9037
A2	9031	Enamel White™	9038
A3	9032	Enamel Neutral™	9039
A3.5	9028	Enamel Gray™	9040
A4	9033	Trans White™	9041
A5	9034	Trans Gray™	9042
B1	9035	Trans Orange™	9043
C2	9036		



### 0.3 g Amelogen Plus Single Compules 10pk

10pk	Shade	10pk
8010	Opaque White™	8021
8011	Enamel White™	8022
8013	Enamel Neutral™	8023
8024	Enamel Gray™	8012
8014	Trans White™	8016
8015	Trans Gray™	8018
8017	Trans Orange™	8019
8020	Super Light <sup>™</sup>	8026
	8010 8011 8013 8024 8014 8015 8017	8010 Opaque White™ 8011 Enamel White™ 8013 Enamel Neutral™ 8024 Enamel Gray™ 8014 Trans White™ 8015 Trans Gray™ 8017 Trans Orange™



4424 Complete Shade Guide—15 shades

A1, A2, A3, A3.5, A4, A5, B1, C2,

OW, EW, EN, EG, TW, TG, TO





### Ultradent® Composite Gun





- Ergonomic
- Autoclavable
- Drop 'n' lock feature makes it easy to load
- Use with all prefilled and empty compules on the market

7800 Ultradent Composite Gun 1pk



### Composite Wetting Resin











Brush Tip

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

Composite Wetting Resin is a 45%-filled, 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. We recommend it be used when the oxygen-inhibited layer has been removed or disturbed (e.g., washing the composite surface following contamination). Composite Wetting Resin may be placed on the composite surface if it has become dry during contouring. Use Composite Wetting Resin on an instrument or brush to enhance glide. Composite Wetting Resin greatly facilitates adaptation of the composite restoration and preparation.

"I use Composite Wetting Resin instead of a bonding agent to facilitate adaptation of composite. Bonding agents often contain acetone or alcohol that can cause the resins and fillers in the composite to separate, which weakens the surface of the restoration. They also may change the composites shade after curing."

—DR. JAIMEÉ MORGAN — SALT LAKE CITY, UT

3059 Composite Wetting Resin Syringe 2pk
1.2 ml syringes

### 1. realityesthetics.com.

### PermaFlo® Pink









Micro 20 ga Tip

• 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.



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.

963

PermaFlo Pink Syringe Kit

2 x 1.2 ml syringes 4 x Micro 20 ga tips



# **COMPOSITES**

# PermaFlo













page 128

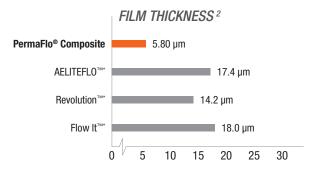
20 ga Tip page 129

• High-fill, high-flow formula

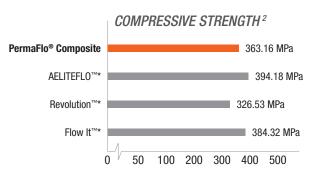
- Highly radiopaque
- Fluoride-releasing formulation
- Superior polishability
- Strong and wear resistant
- Available in 8 shades

PermaFlo flowable composite is light-cured, radiopaque, methacrylatebased, and available in 8 shades. Its thixotropic properties impart ideal flowability for improved adaptation. PermaFlo composite is 68% filled by weight, with an average particle size of 0.7 µm and a low film thickness.

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").



PermaFlo composite exhibits very low film thickness.



PermaFlo composite performs favorably with other flowable composites. Being 68% filled, it provides very high compressive strength.

### 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. Ultimate restorative seal!

### **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. For curing lights with output <600 mW/cm2, cure 20 seconds.

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



### SUPERADAPTIVE INITIAL LAYER



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. For curing lights with output <600 mW/cm2, cure 20 seconds. Apply a thin first layer of PermaFlo composite to the adhesive layer with Micro 20 ga tip. Light cure.



5. One year later.



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



"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. IAN E. MODESTOW – FLORENCE, MA

### 1273 PermaFlo Universal Kit

1 x Each 1.2 ml PermaFlo A1, A2, A3, A3.5, A4, B1, Dentin Opaquer, and Translucent syringe

1 x 1.2 ml Peak Universal Bond syringe

1 x 1.2 ml Ultra-Etch syringe

1 x Half-size syringe organizer

1 x Shade guide

6 x Inspiral Brush tips

20 x Black Mini tips

20 x Micro 20 ga tips



947	PermaFlo A1 Kit
948	PermaFlo A2 Kit
949	PermaFlo A3 Kit
952	PermaFlo A3.5 Kit
954	PermaFlo A4 Kit
956	PermaFlo B1 Kit
612	PermaFlo Translucent Kit
1005	PermaFlo Dentin Opaquer Kit

2 x 1.2 ml syringes 4 x Micro 20 ga tips

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ultradent.com 25





DIRECT COMPOSITE TEMPLATE SYSTEM





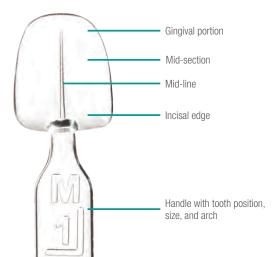






- Allows for predictable, high-quality, natural-looking composite restorations
- Prevents the oxygen inhibition layer during curing, resulting in a hard, glossy surface
- Allows light to pass through the template to the composite for effective curing
- Works with any preferred composite
- Releases easily from cured composite resin
- Requires minimal adjusting or polishing, saving time
- Facilitates application on individual or multiple teeth
- Is autoclavable and reusable, making it a cost-effective choice

Uveneer direct composite template system is a unique, minimally invasive template system that creates beautiful direct composite veneers with predictable shape and symmetry. It mimics natural dentition and is designed to create high-quality, natural-looking anterior restorations in one visit. It can also be used for cosmetic mock-ups and shade selection as well as temporaries during porcelain veneer creation.







Young woman embarrassed to show her teeth. An implant crown on tooth #10 didn't match surrounding dentition. Treatment time was 45 minutes to restore teeth 7, 8, and 9. Minimal preparation needed. Patient is happy and satisfied with results.





Patient wanted something quick, conservative, and affordable. Treatment time was 1.5 hours for teeth 22–27 using Vit-I-escence® PN composite, and required no prep. Tissues still a bit irritated as this photo was taken immediately post-op after removing the retraction cords. Patient extremely satisfied.





Patient asked for a fast and affordable esthetic solution for the improvement of her smile. In one appointment all six upper anterior teeth received full composite veneers (color A1 body) with the aid of the Uveneer system. Total appointment time was around two and a half hours. No preparation was performed except for number 7, where the existing composite was removed.

Each reusable, autoclavable template is designed to mimic ideal tooth anatomy according to the rules of smile design and the "golden proportion." The system incorporates ideal height to width ratio, contour, embrasure, and center midline. Due to the precise anatomical facial tooth contour of the templates, the final result will yield different thicknesses of composite. The composite will be thinre toward the incisal third and gingival areas and will be thicker toward the middle of the facial surface. Because this varied thickness creates different effects and values, only one shade of composite is needed to achieve a natural gradient effect. However, multiple shades of composite can still be used depending on the clinician's preferred technique.

"Terrific tool to quickly and easily create beautiful anterior restorations."
—DR. GARY M. RADZ, DDS

"The Uveneer template makes the practice of the anterior esthetic dentistry easier, faster, and better."

—DR. GEORGE FREEDMAN, DDS

"The simplicity of the Uveneer template is absolutely remarkable. Why didn't I think of this?"

-DR. JOHN C. COMISI, DDS, MAGD

"In a single day I was able to do 11 mock-up veneers that were not part of the original schedule, resulting in several new cases being accepted. I wouldn't want to work without them now."

—DR. CHAD WAGENER, DDS

### UVKV3

### **Uveneer Kit**

16 x Medium upper and lower arch templates 16 x Large upper and lower arch templates



Medium and large templates provide 2 central incisors, 2 lateral incisors, 2 canines, and 2 premolar templates for both the upper and lower arches.

### **ENDODONTICS**

FIND Apex Locator Endo-Eze Ruler

**Endodontic Hand Files** Irrigation Protocol Genius System **Genius Files Genius Motor** Genius Contra-Angle Genius Gutta Percha **EndoREZ Points Absorbent Paper Points** Skini Syringe MTAFlow NaviTip Tips **EndoREZ Canal Sealer EndoREZ Accelerator** DermaDam DermaDam Synthetic Luer Vacuum Adapter ChlorCid Surf ChlorCid ChlorCid V File-Eze EDTA Lubricant **Ultradent EDTA 18% Solution** Consepsis Consepsis V UltraCal XS **Ultradent Citric Acid 20%** PermaFlo Purple UniCore



NaviTip Reference Guide

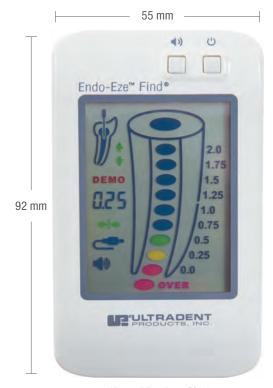












(Actual Product Size)

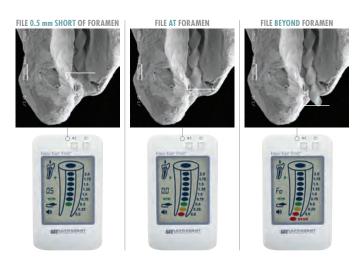
- Convenient, easy-to-read display has unsurpassed accuracy<sup>2</sup>
- Multifrequency measurements are fully automatic
- Compact design with small footprint fits easily on a counter or treatment tray

The FIND apex locator is a battery-operated portable device designed to locate the foramen and determine the working length during root canal treatments. Using a multifrequency-dependent impedance method and a series of proprietary algorithms, the FIND apex locator accurately determines the position of the anatomical apical foramen.

Utilizing the advantages of its well-proven technology, the FIND apex locator offers the clinician unsurpassed accuracy, unrivaled reliability, and an extremely user-friendly interface. The custom color graphic display of the unit helps to achieve the optimal endodontic performance required during every root canal treatment.

### THE EFFECT OF OVERINSTRUMENTATION

Research has shown that instrumentation beyond the apical foramen is a widespread problem, occurring in over half (51%) of the premolars and nearly a quarter (22%) of the molars evaluated in a study.<sup>3</sup> When a file extends beyond the apical foramen and enters the periapical tissues, pain and swelling can occur, resulting in emergency appointments and additional costs for you and the patient. The FIND apex locator helps to avoid overinstrumentation by providing accurate and reliable measurements to notify you when you've reached the ideal working length.

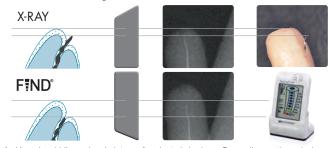


### X-RAY VS. THE FIND® APEX LOCATOR

The success of any root canal treatment depends on accuracy. The most widely used method for determining the apical limit is the radiograph, but, unfortunately, it's not the most accurate. If the film isn't positioned exactly, if the angle of the X-ray beam isn't precise, or if there are interferences from equipment or anatomical structures, the reliability of the radiograph suffers. Not to mention that the location of the anatomical apical foramen is not always the same as the location of radiographical apex.

By sending an electronic signal all the way to the tip of the file, the FIND apex locator lets you know when you've reached the anatomical apical foramen, eliminating the risk of overinstrumentation beyond the apex into the periapical tissues.

A study published in the Journal of Endodontics<sup>3</sup> evaluating 338 radiographs showed the file extending past the foramen—even when the radiograph showed it short of or at the foramen—an average of 24.5% of the time.



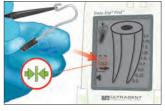
An X-ray is a bidimensional picture of projected shadows. Depending on the apical foramen position, the top of the endodontic file could be beyond the foramen and the X-ray image shows short of the apex.



### **TECHNIQUE GUIDE**



1. Plug measuring cable into device. Connector icon will appear.



2. Test connection by touching file clip to lip clip. Connection icon will appear.



3. Ensure that tooth is properly isolated.



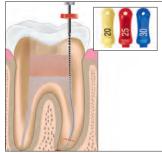
4. Place lip clip onto patient's lip.



5. Before beginning electronic measurement, preflare cervical third and middle third of canal.



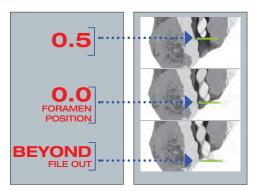
6. Ensure canal is filled with irrigant up to canal opening.



7. Insert a stainless steel K-File to temporary working length. If chosen file is loose inside canal, exchange it for a file with a larger diameter.



8. Connect file clip to file. File icon inside tooth image will stop blinking.



9. Move file toward foramen. As file progresses, colored dots will appear inside root canal image on display to indicate file's progress. Numerical readings will appear on left side of display.



10. When foramen is reached, adjust rubber stop on file to mark length.



11. Determine electronically obtained length with an endodontic ruler. To establish working length, subtract 0.5–1.0 mm from electronic length.

### 3362 Endo-Eze FIND Apex Locator Kit

1 x FIND unit

1 x Cradle

1 x Touch probe

1 x Measuring cable

2 x File clips

5 x Lip clips



3364 Endo-Eze FIND Touch Probe 2pk

3363 Endo-Eze FIND File Clips 2pk



3365 Endo-Eze FIND Measuring Cable 1pk



3368 Endo-Eze FIND Lip Clips 5pk



 realityesthetics.com.
 Ramos, C. S. et al. Preflaring Effect on the Accuracy of Three Apex Locators Electronic Readings. J Dent Res, v. 94 (A), 2094, 2015 (www.iadr.org)
 Elayouti A, Weiger R, Löst C. Frequency of overinstrumentation with an acceptable radiographic working length. J Endod. 2001;27(1):49-52.

### Endo-Eze<sup>™</sup> Ruler





1295 Endo-Eze Ruler 25pk

WINDSHITE Endo-Eze' System

29

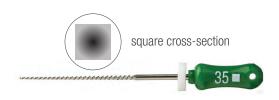




### **Endodontic Hand Files**

The Endo-Eze<sup>™</sup> stainless steel and nickel-titanium hand files are created using a state-of-art alloy treatment, giving them the flexibility to negotiate curvatures and the resistance to advance to the apical third. The ergonomic handles improve your clinical performance, giving better tactile feedback and reducing fatigue.

### Stainless Steel K-Files

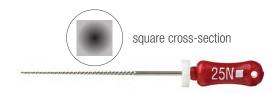


- Balanced flexibility and resistance
- 60° angle non-cutting tip for effortless file penetration
- Spiral design with four cutting edges (square cross section)
- ISO color-coded handles
- Available in 3 lengths—21, 25, and 31 mm
- Tapered design (.02)

#### Stainless Steel K-Files 6pk

Stannood Stoor It Theo opit			
Tip Size	21 mm	25 mm	31 mm
08	3619A	3620A	3621A
10	3622A	3623A	3624A
15	3625A	3632A	3633A
20	3634A	3635A	3638A
25	3639A	3640A	3641A
30	3642A	3643A	3644A
35	3645A	3646A	3647A
40	3648A	3649A	3653A
45	3654A	3655A	3656A
50	3657A	3658A	3659A
55	3660A	3661A	3663A
60	3664A	3665A	3666A
70	3667A	3668A	3669A
80	3670A	3671A	3672A
15–40	3673A	3675A	3677A
45–80	3674A	3676A	3678A

### NiTi K-Files



- Nickel-titanium thermal treated alloy
- Provides sharpness and cutting ability with added flexibility
- Ideal for enlargement of severely curved canals

### NiTi K-Files 6pk

Tip Size	21 mm	25 mm
15	4256A	4258A
20	4257A	4259A
25	3611A	3615A
30	3612A	3616A
35	3613A	3617A
40	3614A	3618A
15–40	3609A	3610A

### Hedstrom (H-Files)



- Spiral-designed flutes increase in depth and length from tip to handle
- Design enhances efficiency while maintaining safety
- File is specially designed for retreatment

### Hedstrom (H-Files) 6pk

Tip Size	21 mm	25 mm	31 mm
15	3686A	3692A	3698A
20	3687A	3693A	3699A
25	3688A	3694A	3700A
30	3689A	3695A	3711A
35	3690A	3696A	3712A
40	3691A	3697A	3713A
15–40	3683A	3684A	3685A



### **Flexfiles**



- Stainless steel alloy is highly flexible
- Square cross-section
- Design has more cutting edges than K-files
- Non-cutting tip increases safety

### Flexfiles 6pk

Tip Size	21 mm	25 mm
15	3716A	3722A
20	3717A	3723A
25	3718A	3724A
30	3719A	3725A
35	3720A	3726A
40	3721A	3727A
15–40	3714A	3715A

### **Finger Spreaders**



- Files safely open space for lateral compaction of gutta percha
- Sizing is based on ISO standard for gutta percha compatibility

### Finger Spreaders .02 Taper 6pk

Tip Size	25 mm
20-30	3742A

### Peeso Reamer Bur



- Prepares canal orifice for straight line access
- Can be used for initial removal of gutta percha in retreatment
- Non-cutting tip increases safety
- Equivalent to 32 mm

### Peeso Reamer Bur 6pk

No.	Tip Size	19 mm
1	0.70 mm	3729A
2	0.90 mm	3730A
3	1.10 mm	3731A
4	1.30 mm	3732A
5	1.50 mm	3733A
6	1.70 mm	3734A
1-6	0.70-1.70 mm	3728A

### Gates Glidden Bur



- Allows for deeper penetration in straight canals
- Can also be used in straight part of curved canals
- Non-cutting tip increases safety
- Equivalent to 32 mm

### Gates Glidden Bur 6pk

No.	Tip Size	19 mm
1	0.50 mm	3736A
2	0.70 mm	3737A
3	0.90 mm	3738A
4	1.10 mm	3739A
5	1.30 mm	3740A
6	1.50 mm	3741A
1-6	0.50-1.50 mm	3735A

### Endo Genius® Practice Blocks

The Endo Genius Practice Blocks were designed from images obtained through micro-CT technology. The block reproduces the internal anatomy of a lower molar with the mesial and distal canals' curvatures, allowing the dentists to train as if they were using a real tooth. It is recommended to use isopropanol for irrigation.

4290 Endo Genius Practice Blocks 5pk



### **Empty Patient Kits**

Autoclavable

1590 Empty Patient Variety Kit 12pk

3 x Each white, yellow, blue, and green with sponges



### IRRIGATION PROTOCOL SUGGESTION WITH GENIUS INSTRUMENTATION

### ESTABLISH PATENCY

1. Fill canal with ChlorCid® V 3% NaOCI solution and place a small amount of File-Eze® 19% EDTA lubricant at canal orifice. These chemicals will be in the canal simultaneously.



2. After scouting canal with a #10 or #15 SS K-File, use Genius® #30 .08 orifice shaper with Genius motor in Rotation P1 mode in straight part of canal.



3. Irrigate with 3-5 ml of ChlorCid® or ChlorCid® Surf solution. File-Eze lubricant is no longer needed.



4. Fill canal with ChlorCid® V solution.



5. Before using the Endo-Eze™ FIND® apex locator, make sure the tip of the file is engaged at the apical region.



6. Irrigate with 3-5 ml of ChlorCid or ChlorCid Surf solution.

### PREPARATION AND GLIDE PATH



1. Fill canal with ChlorCid V solution.



2. Create a glide path using a #15 SS K-File to working length. Using watch-winding movements, open space until file is loose.



3. In calcified canals, move to #20 SS hand K-File to working length in watch-winding movements. Use file until it is loose.



4. Irrigate with additional 3-5 ml of ChlorCid or ChlorCid Surf solution.

### INSTRUMENTATION/OBTURATION



1. Fill canal with ChlorCid V solution.



2. Use #25 .04 Genius file with the Genius motor in Reciprocation GEN mode to the working length.



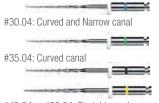
3. Irrigate with additional 3-5 ml of ChlorCid or ChlorCid Surf solution.



4. Fill canal with ChlorCid V solution.



5. Depending on anatomical shape of canal (curved and narrow, curved, or straight), use one of the following apical final enlargement Genius files:



#40.04 or #50.04: Straight canal

Use chosen final file in Reciprocation GEN mode to working length. After opening space, remove file, press mode button on Genius motor to switch to Rotation P1 mode and, with same file in rotation, finish removing debris.







9. Evacuate with Ultradent Luer Vacuum Adapter and Capillary tip.



10. Soak with Consepsis® 2% chlorhexidine gluconate solution. Leave approximately 3-5 minutes.



11. Evacuate with Ultradent Luer Vacuum Adapter and Capillary tip.



12. Dry with paper points for 1-2 seconds (each point should be damp approximately 1-3 mm at tip).



13. Canal should be damp, NOT desiccated, prior to obturation with EndoREZ® canal sealer.



6. Irrigate with additional 3-5 ml of ChlorCid or ChlorCid Surf solution.

# ENDODONTICS (w)

SAFE & EFFICIENT

ROTARY

Rotational movement turns around a single axis

 $(360^{\circ})$ 

**ROTATION** 

P1 SETTING





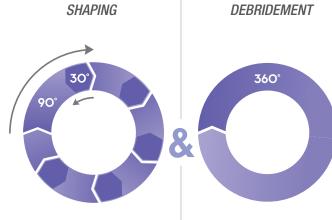


The Genius motor and files system consists of an electric motor and NiTi engine-driven files designed for safe and efficient endodontic instrumentation. The instruments are driven with clockwise cutting asymmetric reciprocating movement. The 90° clockwise movement provides efficient, rapid cutting, while the 30° counterclockwise movement releases the stress in the file.

File separation or breakage can result in serious complications and substantially lengthen the treatment time. Studies have shown that the optimum balance of safety and effectiveness is obtained with this 90°/30° reciprocation movement.¹ The pre-programmed speed, torque, and angle settings on the Genius motor provide the ideal balance for the Genius files, ensuring both efficiency and safety. The 90°/30° asymmetric reciprocation reduces the incidence of file breakage caused by torsional stress and cyclic fatigue that occurs with rotary movement in file and dentin. Reciprocation also reaches the working length with a more gradual and centered enlargement, reduces the shaping time, and allows progression from small to large files without forcing the file apically.²

Once the working length is achieved with the 25/04 Genius shaping file in reciprocation mode, use the largest Genius final shaping file (dependent on canal anatomy/dimension) and work stepwise until working length is achieved. Once enlargement is achieved, use the same final shaping file in rotation mode for the most efficient debris removal.





### ASYMMETRIC RECIPROCATION

SAFE & EFFICIENT

Rotational movement alternates between clockwise and counterclockwise directions, similar to Roane balanced forces motion

> (90°/30°) **RECIPROCATION**

RECIPROCATION
GEN SETTING

RECIPROCATING - GEN
Ratio: 8:1 FWD: 90
RPM: 350 REV: 30

ROTATING - P1

RPM: 300 Torque: 0.5Ncm FWD A/R: SAR





 Sakalauskiene, A. et al. Root canal transportation and centering ability of rotary, reciprocation and hybrid NiTi endodontic instruments: a microCT study, International Endodontic Journal, 50 (Suppl. 1), 3-65, 2017
 Plotino, G. et al. "Current Assessment of Reciprocation in Endodontic Preparation: A Comprehensive Review—Part II: Properties and Effectiveness." Journal of Endodontics. 41.12(2015):1939-1950





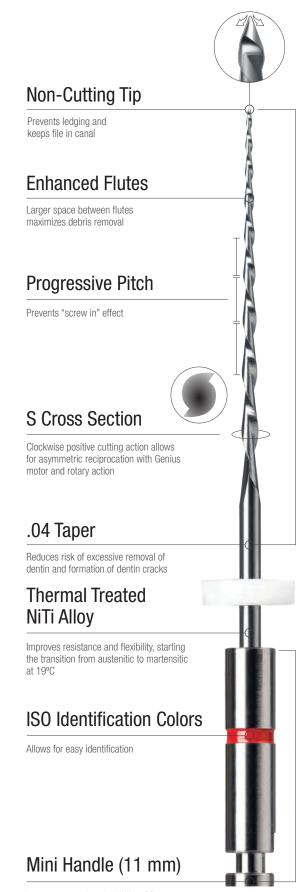




The only files designed and tested to work optimally in both clockwise cutting reciprocation and rotary movements!

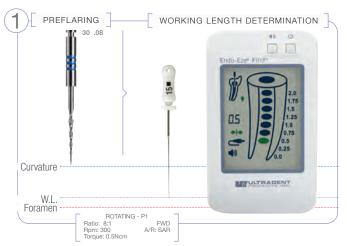
- Flutes are designed for clockwise cutting
- Files provide the safety of reciprocation (90°/30°) and the efficiency of rotary (360°)
- Complete any procedure with just two files after preflaring and creating a glide path
- The same sequence can be used for both treatment and retreatment

Genius files are designed with an "S" cross section that facilitates a slight positive cutting edge while increasing flexibility. The file taper is maintained at .04 to preserve tooth structure. They are used for both the reciprocation and the rotary movement provided by the Genius endodontic motor. The asymmetric 90°/30° reciprocation movement not only reduces the risk of file fracture due to torsional and cyclic fatigue, but also creates a smooth path to the working length. After safely reaching the working length, the Genius files can be used in 360° rotation for maximum removal of any residual debris from the prepared canal.



Improves control and visibility of file

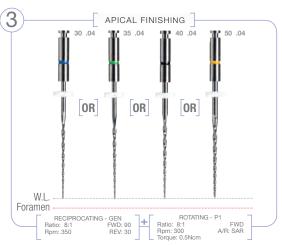
## **PROCESS**



Preflare with orifice shaper and determine working length with FIND® apex locator. Create a glide path using the same hand file used in working length determination.



Always start in reciprocation with the #25 file until working length is achieved.



After reaching working length with 25/04 file, go directly to final Genius® file that will be used. This is determined by canal anatomy and dimensions. Use file in reciprocation mode until working length is achieved, then use same file in rotation mode for maximum debris removal.

Note: For better results, disinfect canal between files with the Ultrawave® XS piezoelectric device, Ultrawave® XS NitiSonic irrigation tip, and ChlorCid® Surf solution. Then use Ultradent® EDTA 18% solution as a final irrigant before obturation.

## FINISHING FILE SELECTION







3752A 3753A

# Genius File Starter Kit (21 mm) Genius File Starter Kit (25 mm)

Genius File Starter Kit (25 mm)

1 x 30 .08 Orifice Shaper (18 mm)

1 x 25 .04 Genius File

1 x 30 .04 Genius File

1 x 35 .04 Genius File

1 x 40 .04 Genius File

1 x 50 .04 Genius File

Note: J canals are average curved canals. This kit can also be used in straight and narrow canals.

3744A Genius File Intro J Kit (21 mm) 3745A Genius File Intro J Kit (25 mm)

1 x 30 .08 Orifice Shaper (18 mm) 1 x 25 .04 Genius File

1 x 35 .04 Genius File

3743A Genius File Orifice Shaper 18 mm 3pk 30 .08 Shapers

Genius File .04 Taper 6pk

Tip Size	21 mm	25 mm	Canals
25	3746A	3747A	_
30	3748A	3749A	JJ
35	3750A	3751A	J
40	3754A	3755A	I
50	3756A	3757A	I

# **★** ENDODONTICS



- Includes pre-programmed settings for Endo-Eze<sup>™</sup> Genius<sup>®</sup> files
- Moves easily between reciprocating and rotary movement
- Features torque-controlled Auto Reverse in rotary mode
- Features varying contra-angle reduction ratios

Studies show that asymmetric reciprocation reduces cyclic and torsional fatigue, while rotary movement removes debris more efficiently. Utilizing a system that enables both reciprocation and rotary movements allows for both safety and efficiency. When used with Genius endodontic files, the Genius endodontic motor and pre-programmed settings reduce the risk of file separation while maximizing instrumentation efficiency.

## F29030

# **Endo-Eze Genius Motor**

1 x Each Genius motor, handpiece foot pedal, and power cord



1. Data on file



- Small head provides better visibility of the treatment site
- Push button simplifies file changes
- Non-slip handle is easy to use
- Stainless steel ball bearings provide accurate, precise, and quiet movement
- · Matches perfectly with Genius endodontic motor
- Autoclavable

4056 Endo-Eze Genius 8:1 Contra-Angle 1pk

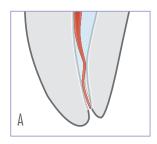


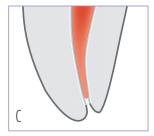


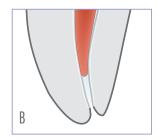


- Designed to perfectly match the tip diameter and taper created by the Genius® file system
- Injection-molded for a more accurate diameter and taper
- Non-coated
- · Compatible with any sealer and technique
- Not made with natural rubber latex

Endo-Eze Genius gutta percha points are designed to provide a more exact fit in the canal. They are injection-molded rather than hand-rolled to provide a consistently accurate diameter and taper, and are formulated with nano-particles to allow for less volumetric change. Plus, Genius gutta percha has a low working temperature with excellent flow for improved 3D obturation.







Obturation defects can occur when gutta percha is smaller (A) or larger (B) than canal. Genius gutta percha has greater tip and taper accuracy, leading to a perfect adaptation of cone at apical stop (C).

60pk
4294
4295
4296
4297
4298
4299





# **EndoREZ®** Points

RESIN-COATED GUTTA PERCHA POINTS





- The ONLY resin-coated gutta percha
- Chemically bonds to EndoREZ canal sealer and other resin-based sealers

EndoREZ Points are standard ISO-sized gutta percha points coated with a thin resin coating, which bonds chemically to EndoREZ canal sealer. They are the first gutta percha points to achieve a chemical bond with the sealer, providing a more effective seal than traditional gutta percha.

#### **GUTTA PERCHA SEM**



Coated

Uncoated

Tip Size	.02 120pk	.04 60pk	.06 60pk
15	_	1838	_
20	_	1839	_
25	1631	1634	1637
30	1632	1635	1638
35	1633	1636	1639
40	1675	1707	
15–40	3355	3357	3359
45–80	3356		

3358 Variety Medium Medium Fine/ Medium Fine 100pk



# **Absorbent Paper Points**



- Sterile
- Color coded
- Highly absorbent
- 28 mm length



Ultradent's paper points quickly and efficiently absorb liquid from the canal and are sold in packs of 200 for a cost-effective solution. For a more efficient way to dry canals, use Ultradent's Luer Vacuum Adapter.

Tip Size	200pk
20	1560
25	1554
30	1555
35	1556
40	1557
45	1558
50	1559
15–40	3360



# Skini 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.









Transfer EndoREZ® canal sealer out of dual barrel syringe into back of a Skini syringe using the Mixing tip. Fill syringe to back flange so no air remains between plunger and EndoREZ canal sealer. Attach a 29 ga NaviTip® tip of the 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.

1680 1880	Skini Syringe 20pk Skini Syringe Clear 20pk	
1681	Skini Syringe 50pk	•









- Has bioactive apatite-forming properties<sup>1</sup>
- Mixes into a smooth consistency
- Resists washout
- Can be delivered with 29 ga NaviTip® tip depending on consistency
- Sets quickly
- Has an adaptable mixing ratio based on procedure

MTAFlow mineral trioxide aggregate repair cement is designed to mix quickly, smoothly, and easily into the right consistency for a variety of procedures. MTAFlow cement has a smooth consistency due to the ultrafine-grained powder and proprietary gel medium. The formulation increases resistance, 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.

"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>2</sup>"

#### Guimaraes, B. et al. Chemical-physical properties and apatite-forming ability of mineral trioxide aggregate flow. J Endod., 2017; 43: 1692-96 Sarkar NK, Caicedo R, Ritwik P, et al. Physiochemical basis of the biologic properties of mineral trioxide aggregate. J Endod. 2017;43:1692–96.

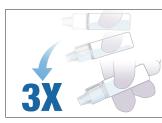
#### THE DIFFERENCE YOU CAN FEEL

MTAFlow cement has 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.

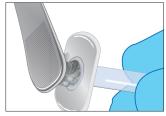




1. Use a cement spatula to remove excess powder. **DO NOT** use powder without leveling at edge of scoop.



2. Shake from top to bottom 3 times. Make sure that gel is in tip end of bottle before expressing.



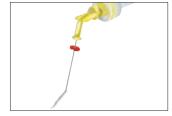
3. After mixing, insert mixed MTAFlow cement into back of clear Skini syringe.



4. Reinsert plunger and express a small amount of material through tip.



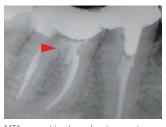
5. Mixed MTAFlow cement inside syringe will be usable for up to 15 minutes.



6. Use thin consistency and a NaviTip® 29 ga tip to deliver MTAFlow cement inside canal.



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 cement is adaptable based on the procedure. Use a thick consistency for pulp capping, pulp chamber perforation, and pulpotomy; a thin consistency for resorption, apexification, and apical plug; or a putty consistency for root end filling.

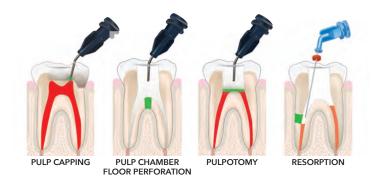
Whatever consistency you need, you can be sure MTAFlow cement will be effective, non-gritty, and easy to deliver accurately. More gel or powder may be added at any time during mixing to achieve the desired consistency.

# MIXING PROPORTION SUGGESTIONS (POWDER AND GEL)\*

Applications	Pulp Capping, Pulp Chamber Perforation, 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	2 drops	3 drops	1 drop**
Consistency	Thick	Thin	Putty
Deliver	Micro 20 ga tip	NaviTip 29 ga tip	Non-syringe delivery

<sup>\*</sup> More powder or gel can be added to achieve desired consistency.

<sup>\*\*</sup> Depends on the desired consistency.









#### EVERYTHING YOU NEED IN ONE PLACE

The MTAFlow cement kit comes with the essential tools you'll need to mix and deliver cement. The kit contains enough MTA powder and gel to complete 8–10 applications.

# 3980-1 MTAFlow Repair Cement Kit

- 1 x Technique guide
- 1 x Instructions for use
- 1 x 2 g MTAFlow Powder
- 1 x 2 ml MTAFlow Gel
- 1 x Measuring spoon
- 1 x Mixing pad
- 10 x Skini syringes
- 10 x Luer Lock caps
- 20 x Micro 20 ga tips



# 3981 MTAFlow Repair Cement Refill

- 1 x Technique guide
- 1 x Instructions for use
- 1 x 2 a MTAFlow Powder
- 1 x 2 ml MTAFlow Gel
- 1 x Measuring spoon
- 1 x Mixing pad



# NaviTip® Tips

With the NaviTip® tips, you will have controlled delivery anywhere in the canal. The flexible cannulas and rounded tips easily navigate curved canals.





LOK-TITE°	mm	20pk	50pk
29 ga NaviTip	27 mm	5115	1377
29 ga NaviTip	25 mm	5114	1376
29 ga NaviTip	21 mm	5113	1374
29 ga NaviTip	17 mm	5112	1378
29 ga-29 ga NaviTips	27-17 mm	5116	1379
LOK-TITE°	mm	20pk	50pk
	mm 27 mm	20pk 1354	50pk 1424
LOK-TITE°			
LOK-TITE° 30 ga NaviTip	27 mm	1354	1424
LOK-TITE° 30 ga NaviTip 30 ga NaviTip	27 mm 25 mm	1354 1250	1424 1423

# **EndoREZ**®

CANAL SEALER







# Unique patent





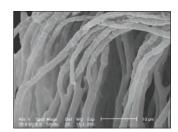
20–30 minute regular set 5–12 minute set when used with accelerator

- 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> and provides the most complete seal available. 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. Additionally, studies show that 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. Create a "monobloc" by using EndoREZ resin-coated gutta percha points.

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  $1200\mu$  into tubules.





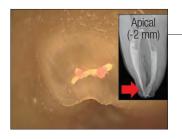
EndoREZ canal sealer penetrates into tubules and adapts to the walls like no other sealer on the market.

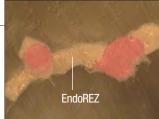


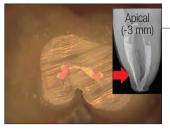


EndoREZ canal sealer results in predictable fills that are radiopaque, easily diagnosed, and suitable for retreatment and post-and-core procedures.

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.







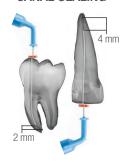




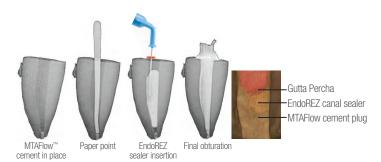


Ultradent's patented NaviTip® tip delivers EndoREZ canal sealer into entire anatomy of canal in one step.

#### CANAL SEALING



EndoREZ resin-based canal sealer is designed with
enhanced flowability properties. The delivery technique
using a Skini 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 foramens 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.

## ENDOREZ CANAL SEALER SEQUENCE OF CLINICAL USE

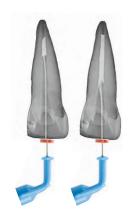
Fit an EndoREZ® gutta percha point to working length. Verify radiographically.



Remove moisture from canal space using Capillary tip and Ultradent® 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® tip 29 ga, inserting the tip 2–4 mm short of working length.



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.



Slowly insert master EndoREZ gutta percha point cone or Genius gutta percha 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. Without using accelerator, EndoREZ canal sealer will set in about 20–30 minutes.



Light cure EndoREZ canal sealer with VALO® LED curing light for 40 seconds. Initial surface polymerization with curing light (without EndoREZ Accelerator) is less than 0.3 mm thick and aids in immediate restoration. Trim excess gutta percha with a very hot instrument or using the Ultrawave® XS PM4 tip with ultrasonification (no water). Complete restorations following obturation to properly seal canal entrance. Do not leave cotton pellets between obturation and temporary restoration.





5900 EndoREZ Syringe Kit

1 x 5 ml syringe 20 x Mixing tips



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

\* Trademark of a company other than Ultradent. 1. realityesthetics.com. 2. Zmener 0, Pameijer CH. Clinical and radiographic evaluation of a resin-based root canal sealer: an eight-year update. J Endod. 2010;36(8):1311-4.

3. Zmener 0, 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 0, Pameijer CH, Serrano SA, Vidueira 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):76-9.

# EndoREZ® Accelerator



ultradent.com





- Accelerates EndoREZ sealer polymerization
- Enables post preparation in the same appointment

EndoREZ Accelerator reduces EndoREZ canal sealer set time from 20–30 minutes to about 5–12 minutes before the commencement of post-endo restorative procedures, enabling the start of definitive post restorations right away. It is designed to work hand in hand with the groundbreaking EndoREZ canal sealer for reliable obturation and minimized chair time.

399 EndoREZ Accelerator Single Use 20pk



41

# **ENDODONTICS**

# **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.



# DermaDam® Synthetic DENTAL DAM

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.

# Zero sensitizing proteins

299 DermaDam Medium Synthetic 0.20 mm 20pk 6"x 6" (15 cm x 15 cm)



# Ultradent® Luer Vacuum Adapter







- 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. Irrigate canals through NaviTip® 31 ga Double Sideport tip.



2. With Capillary tip attached to vacuum, slide tip deep into canal. Move tip in and out while vacuuming. One can usually hear and/or see solutions being removed from canal.



3. The Luer Vacuum Adapter makes it easy to see what is coming from inside the canal, easily identifying its content.



4. Insert paper points into canal 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



# 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 accessory canals of the root canal system to give a deeper clean.

4613 ChlorCid Surf Bottle 1pk
480 ml bottle Only available in the continental United States.
Ground shipping only.

97 ChlorCid Surf IndiSpense Syringe 1pk 30 ml syringe



Sodium hypochlorite with surfactant used with ultrasonics has been shown to be the most effective method for soft tissue dissolution.1

 Estevez R, Conde AJ, de Pablo OV, de la Torre F, Rossi-Fedele G, MclinDent, Cisneros R. Effect of passive ultrasonic activation on organic tissue dissolution from simulated grooves in root canals using sodium hypochlorite with or without surfactants and EDTA. JOE. 2017;43(7):1161-1165.

# ChlorCid® and ChlorCid® V

3% SODIUM HYPOCHLORITE SOLUTIONS









Perfect for lubrication during engine-driven instrumentation

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

4612 ChlorCid Bottle 1pk
480 ml bottle

ChlorCid IndiSpense Syringe 1pk
30 ml syringe

ChlorCid V IndiSpense Syringe 1pk
30 ml syringe



# File-Eze® EDTA Lubricant

FILE LUBRICANT



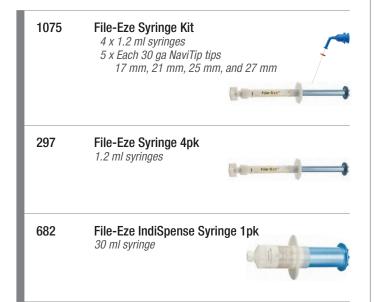




• Peroxide free; will not affect the set of resin sealers

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.\*



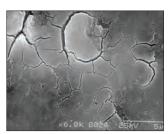
# Ultradent® EDTA 18% Solution



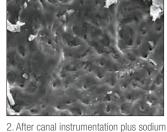




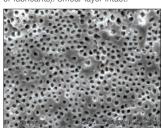
A root canal chelating agent that conditions/cleans through a chelation process, Ultradent EDTA 18% Solution is the irrigant of choice for smear layer removal and can be used as a final irrigant prior to obturation.



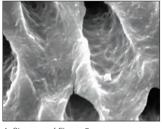
1. After canal instrumentation (no irrigants or lubricants). Smear layer intact.



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 bottle	Only available in the continental United States. Ground shipping only.	EDTA 78-
162	EDTA IndiSpense Sy 30 ml syringe	ringe 1pk	

<sup>\*</sup>Trademark of a company other than Ultradent.



# Consepsis®

2% CHLORHEXIDINE ANTIBACTERIAL SOLUTION









Consepsis antibacterial solution is recommended for procedural endodontic disinfection, as a final endodontic rinse prior to canal obturation,<sup>2–4</sup> and prior to pulp capping. Consepsis solution should be used after smear layer removal for canal disinfection. Sodium hypochlorite and EDTA solutions 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.



realityesthetics.com.
 Leonardo MR, Filho MT, Silva LAB, ácio KC, Ito IY. In vivo antimicrobial activity of 2% chlorhexidine used as a root canal irrigating solution. J Endod. 1999;25(3):167-71.
 Clinical Research Associates Newsletter, Volume 18, Issue 4, April 1994.
 Mohammadi Z, Abbott PV. Antimicrobial substantivity of root canal irrigants and medicaments: a review. Just Endod J. 2009;35(3):131-9.

# 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, place cotton pellet, and seal with temporary cement.



Use Consepsis V solution to disinfect canals during endodontic procedures or as an interappointment intracanal medication.

Consepsis V IndiSpense Syringe 1pk
30 ml syringe

2210



# UltraCal® XS

30%-35% CALCIUM HYDROXIDE PASTE







- 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 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.

Second-visit protocol with an interappointment intracanal medication with calcium hydroxide resulted in improved microbiological status of the root canal system when compared with a single-visit protocol.<sup>1</sup>



# Ultradent® Citric Acid 20% Solution







- Recommended as a cleanser/conditioner of prepared root canals
- Removes mineral and smear layers
- 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. Deliver with the NaviTip tip or the NaviTip FX tip.

329 Citric Acid IndiSpense Syringe 1pk
30 ml syringe

1. Vera J, Siqueira JF Jr, Ricucci D, et al. One- versus two-visit endodontic treatment of teeth with apical periodontitis: a histobacteriologic study. *J Endod*. 2012;38(8):1040-52.



# PermaFlo® Purple







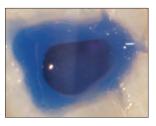


Micro 20 ga Tip

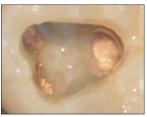
PermaFlo Purple is used with an adhesive system to create an easily identified coronal seal. The purple color simplifies location of the pulp chamber floor when accessing the pulp chamber for future therapy.



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. Optional: Use Peak® SE Primer and Peak® Universal Bond adhesive.



3. Apply a 1–1.5 mm-thick layer of PermaFlo Purple. Light cure 20 seconds to create an immediate "coronal seal." When a post and/or core is prepared, the purple identifies the extent of root canal preparation and/or pulp chamber. 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 eugenolcontaining sealers can prevent polymerization of bonding resins. We recommend EndoREZ hydrophilic resin sealer.

962

PermaFlo Purple Syringe Kit

2 x 1.2 ml syringes 4 x Micro 20 ga tips



Prefilled Whitening Trays, see page 155.





# **UniCore®**

POST, DRILL, AND ACCESSORY POST SYSTEM







- Superior strength
- 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

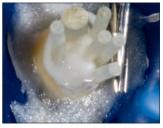
UniCore Posts are composed of glass fibers. The translucent and radiopaque UniCore Post responds to compressive forces as dentin would, without compromising the durability of the restoration. The gentle taper of the UniCore Post corresponds to the natural anatomy of the tooth and perfectly matches the 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. It's 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	1.15 mm	1.35 mm	1.55 mm	1.75 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	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	



UniCore master post in place.



Additional accessory posts.



Final.

<sup>1.</sup> realityesthetics.com.





# 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.

"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

#### 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



Drills	Size	1pk	10pk
Size 0	0.6 mm	7134	
Size 1	0.8 mm	7121	4091
Size 2	1.0 mm	7122	4092
Size 3	1.2 mm	7123	4093
Size 4	1.5 mm	7124	_

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



# NAVITIP® TIP REFERENCE GUIDE



	27 mm		25 mm		21 mm		17 mm	
	30 ga	29 ga						
20pks	1354	5115	1250	5114	1349	5113	1249	5112
50pks	1424	1377	1423	1376	1422	1374	1421	1378

Double Sideport Irrigator



21 mm	17 mm
30 ga	30 ga
1454	1452
5124	5122

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

	Product	Recommended Tip	Compatible Tips
	67 - ChlorCid® IndiSpense Syringe	31 ga	NaviTip® FX®
Darried W	1467 - ChlorCid® V IndiSpense Syringe	31 ga	30 ga and NaviTip® FX®
	682 - File-Eze® IndiSpense Syringe	29 ga or 30 ga	_
	162 - EDTA 18% IndiSpense Syringe	31 ga	30 ga and NaviTip® FX®
	687 - Consepsis® IndiSpense Syringe	31 ga	29 ga, 30 ga, and NaviTip® FX®
description of the control of the co	2210 - Consepsis® V IndiSpense Syringe	30 ga	29 ga
Summer as many	1027 - UltraCal® XS Kit	29 ga	_
	329 - Citric Acid	NaviTip® FX®	30 ga and 31 ga
	5900 - EndoREZ® Kit	29 ga	<u>—</u>
	3980-1 - MTAFlow™ Kit	29 ga	<del></del>

# **ETCH AND BOND**

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



Ultra-Etch



# (X) ETCH AND BOND



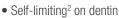












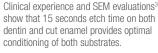
- Penetrates smallest fissures and won't run on a vertical surface
- Precise placement
- Rinses cleanly—leaves no residue

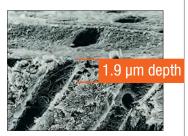
Ultra-Etch etchant 35% phosphoric acid solution features ideal viscosity, facilitates precise placement and superior control. It is self-limiting in its depth of etch (average depth of 1.9  $\mu m$  with 15-second etch),² creating an etch pattern that adhesives can penetrate for increased bond strength. Studies demonstrate Ultra-Etch etchant's unique self-limiting chemistry on dentin creates an optimal surface to receive resin.³ Though Ultra-Etch etchant is viscous, it can penetrate into the smallest fissures or occlusal 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. It can also be used to remove contaminants from composite on porcelain prior to bonding.

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







Ultra-Etch phosphoric acid is proven to be uniquely self-limiting in its depth of etch. Acids with greater depth of etch go beyond the optimum level and increase the potential for incomplete resin impregnation.

"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

# The industry leader for more than 30 years

# 163 **Ultra-Etch Kit** 4 x 1.2 ml syringes 20 x Blue Micro tips 167 Ultra-Etch Econo Kit 20 x 1.2 ml syringes 40 x Blue Micro tips 383 **Ultra-Etch IndiSpense Kit** 1 x 30 ml IndiSpense syringe 20 x 1.2 ml empty syringes 20 x Blue Micro tips 164 Ultra-Etch Syringe 4pk 1.2 ml syringes 168 Ultra-Etch Syringe 20pk 1.2 ml syringes 1407 Ultra-Etch Syringe 50pk 1.2 ml syringes 685 Ultra-Etch IndiSpense Syringe 1pk 30 ml syringe 129 Ultra-Etch Empty Syringe 20pk 1.2 ml empty syringes

Listed as a "CAN'T LIVE WITHOUT" product by a prominent independent research institute for more than 20 years.<sup>4</sup>

Listed as a "TRIED & TRUE" product.5

1. realityesthetics.com. 2. Perdigão J, Lambrechts P, Van Meerbeek B, Vanherle G. A FE-SEM study of the ultra-morphology of etched dentin [IADR abstract 2982]. J Dent Res. 1996;75(suppl):390. 3. Perdigão J, Lambrechts P, Van Meerbeek B, Vanherle G. A field emission SEM study of dentin etched with different phosphoric acid compositions and/or concentrations. Katholieke Universiteit Leuven: Leuven, Belgium; 1994. 4. "Can't Live Without" Clinical Research Associates Newsletter, Volume 21, Issue 7, July 1997. 5. Syrop J. Tried & True Products: Ultra-Etch. Dental Product Shooper, 2008:2(6):76-77.

52

# Peak® SE Primer

SELF-ETCHING PRIMER















Peak SE Primer is a self-etching primer mixed and delivered in the unique JetMix<sup>™</sup> syringe. JetMix technology separates precise quantities of strong acid (pH 1.2) and optimized priming resin to other self-etch chemistries. Components are kept separate until the clinician activates them. Peak SE Primer is used prior to Peak Universal Bond adhesive to achieve unsurpassed bond strengths. Refrigerate for optimal shelf life.

Ideal for all light-accessible bonding procedures, the Peak Self-Etch Adhesive System can also be used for immediate dentin sealing prior to impressions and temporization in order to decrease post-op and cementation sensitivity.

#### FOR INDIRECT BONDING



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

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. For curing lights with output <600 mW/cm2, cure 20 seconds.

- 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
- Eliminates the need for mixing wells or brushes

prevent the hydrolytic breakdown and degradation that occurs with

2. Thin/dry for 3 seconds.

# 3. Apply a puddle coat of Peak Universal

# Highest Bond Strengths to dentin and enamel!2

# COMPARISON OF 3 SELF-ETCH ADHESIVE SYSTEMS, UNIVERSITY OF IOWA COLLEGE OF DENTISTRY2



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® SF Bond.



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

#### REFRIGERATE



<sup>\*</sup> Trademark of a company other than Ultradent. 1. realityratings.com 2. Vargas M. Ultramorphological evaluation of the resin-dentin-enamel interface produced by three proprietary self-etching adhesive systems, 2007. Data on file,

# (X) ETCH AND BOND

# Peak® Universal Bond

LIGHT-CURED ADHESIVE





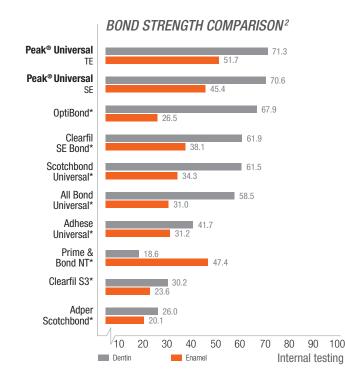






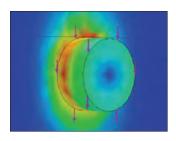
- Features Ultradent's Dyme Tech™ phosphate monomer blend for enhanced strength and greater versatility
- Bonds to dentin, enamel, porcelain, metal, composite, acrylic, and zirconia
- Ideal for direct and indirect bonding, as well as post and core procedures
- Works with self-etch and total-etch techniques
- Available in syringe or bottle delivery

The versatile formulation of Peak Universal Bond adhesive is ideal for direct and indirect bonding, including post and core procedures. With a 7.5% filler content and a blend of custom-synthesized phosphate monomers, its viscosity has been optimized for minimal film thickness and superior strength. It contains an ethyl alcohol solvent carrier and will cure with any dental curing light, including LEDs. Refrigerate for optimal shelf life.



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







<sup>\*</sup> Trademark of a company other than Ultradent. 1. realityratings.com 2. Vargas M. Ultramorphological evaluation of the resin-dentin-enamel interface produced by three proprietary self-etching adhesive systems. 2007. Data on file.

# PQ1<sup>™</sup>

SINGLE-RESIN BONDING













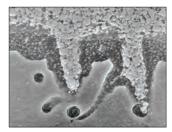
• High bond strengths<sup>2</sup> to dentin creating long lasting bonds

- Ideal for direct bonding procedures
- Highly filled for convenient placement and ease of use
- Chemistry is radiopaque
- 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.

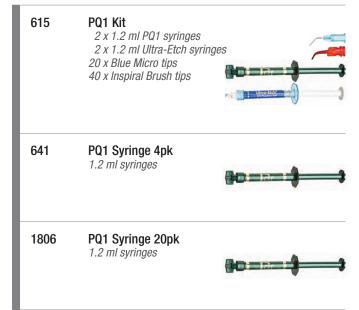
The unique, patented chemistry of PQ1 resin bonds to dentin/enamel, cast metal, porcelain, amalgam, and composite. PQ1 resin is also effective for indirect procedures where light curing is possible.





Note: Exceptional filler penetration for high-strength bonding.

# REFRIGERATE



<sup>\*</sup> Trademark of a company other than Ultradent. 1. realityesthetics.com. 2. Shear bond comparison PQ1 immediate to dentin, 2001, Data on file.

# EtchArrest®

ACID BARRIER/NEUTRALIZER













• Neutralizes acid etchants upon contact

- Protects soft tissues and adjacent restorations
- · Contrasts with tissues and acid etchants
- Rinses easily

When hydrofluoric acid contacts enamel during porcelain repair procedures, formation of calcium fluoride occurs, and bond strengths to enamel drop significantly. Therefore, it is vital to treat porcelain and tooth structure separately with appropriate acids. EtchArrest acid barrier/neutralizer isolates hard and soft tissues when rubber dam placement is not practical.





EtchArrest acid barrier/neutralizer protects adjacent porcelain and soft tissue from hydrofluoric acid. For situations where dentin/enamel are present in a preparation, use Ultra-Etch® etchant first to etch tooth and then use hydrofluoric acid second to etch porcelain. This will ensure that dentin/enamel bond strengths are not compromised. Hydrofluoric acid will reduce adhesion to dentin and enamel. After a 90-second porcelain etch, rinse clean, apply a 5-second phosphoric acid (Ultra-Etch® etchant) to remove porcelain salts, apply Ultradent® Silane to porcelain prep for 60 seconds, apply Peak® Universal Bond adhesive, apply PermaFlo® Dentin Opaquer masking resin if metal is exposed, and restore with Mosaic® or Vit-I-escence® composite.



<sup>1.</sup> realityesthetics.com

# (X) ETCH AND BOND

# Ultradent® Porcelain Etch and Silane

90-Second Etch-60-Second Silane







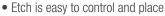




J

Inspiral® Brush Tip page 129

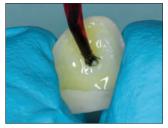
Black Mini<sup>6</sup> Brush Tip page 128



- Yields highest porcelain-to-resin bond strengths<sup>2</sup>
- Silane is a single component
- Use on feldspathic and lithium disilicate (IPS e.max<sup>®3</sup>) restorations

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

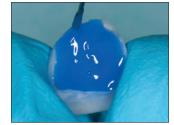
Porcelain Etch is designed for intraoral or extraoral porcelain etching. Use it for in-office etching of indirect restorations, such as veneers, inlays, etc. After porcelain etching, clean residual debris with Ultra-Etch® etchant for 5 seconds and rinse thoroughly; follow with Silane application. Studies 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>



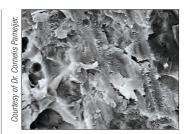
1. Etch ceramic bonding surface with Porcelain Etch for 90 seconds, rinse, and dry.



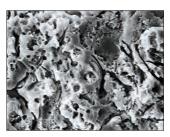
3. Apply a puddle coat of Silane to the inside surface of the prosthesis for 60 seconds, dry, and set aside. Do not rinse. Prosthesis now ready for luting/cementing.



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



1. Diamond-cut porcelain surface.



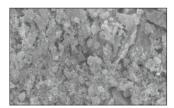
2. Same porcelain following 90-second etch with Ultradent Porcelain Etch.



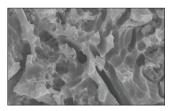
 Porcelain Etch is delivered from Inspiral Brush tip to prepared porcelain after placement of EtchArrest® barrier.



2. Ultradent® Silane is applied and dried, followed by Peak® Universal Bond adhesive.



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.

"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



1. realityesthetics.com. 2. Pameljer CH, Louw NP, Fischer D. Repairing fractured porcelain: how surface preparation affects shear force resistance. *J Amer Dent Assoc.* 1996;127(2):203-9. 3. Trademark of a company other than Ultradent.

# Ultradent® Porcelain Repair Kit

ETCH, SILANE, BOND RESIN, AND FLOWABLE COMPOSITE







- Includes all necessary precomposite-placement materials
- Yields high bond strengths
- 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.

"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

Rated excellent by a prominent independent research institute.<sup>2</sup>

# 1108 Ultradent Porcelain Repair Kit 1 x 1.2 ml PermaFlo Dentin Opaquer syringe 1 x 1.2 ml EtchArrest syringe 1 x 1.2 ml OpalDam syringe 1 x 1.2 ml Peak Universal Bond syringe 1 x 1.2 ml Porcelain Etch syringe 1 x 1.2 ml Ultradent Silane syringe 20 x Black Mini Brush tips 20 x Black Micro tips 20 x Micro 20 ga tips 20 x Inspiral Brush tips

#### 1. realityesthetics.com. 2. Clinical Research Associates Newsletter, Volume 24, Issue 11, November 2000.

#### 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. For curing lights with output <600 mW/cm2, cure 20 seconds.

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

Use a Black Micro® tip to place EtchArrest® neutralizer like a frame around the broken porcelain surface.

Apply Porcelain Etch with an Inspiral® Brush tip onto the broken porcelain surface.

Etch surface for 90 seconds; then suction off gel and carefully rinse with water spray. Option: Blend EtchArrest® neutralizer into etchant until the yellow color of etchant is no longer identifiable. This will neutralize the etchant and eliminate risk of acid splashes when removing the neutralized mix.

Apply Ultra-Etch etchant for 5 seconds to remove salts.

Rinse and thoroughly air dry fractured surface.

Apply Silane onto broken porcelain surface with a Black Mini Brush tip. Use Peak-ZM primer on metal and zirconia surfaces.

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

Apply Peak® Universal Bond adhesive with an Inspiral Brush tip onto fractured surfaces. Air thin gently but thoroughly.

Light cure Peak Universal Bond adhesive for 10 seconds with a VALO LED curing light. For curing lights with output <600 mW/cm2, cure 20 seconds.

Cover exposed metal with a thin layer of PermaFlo® Dentin Opaquer composite using a Micro 20 ga tip, then light cure for 10 seconds with VALO LED curing light. For curing lights with output <600 mW/cm2, cure 20 seconds.

Restore fracture by layering light-cured composite.

Finish and polish repaired area.

completely dry.

57





# **AT LAST!** EVERYTHING YOU WANT IN A FLUORIDE VARNISH.

Enamelast fluoride varnish has superior fluoride uptake, a smooth texture, and a nearly invisible appearance! But the feature your patients will remember is the mouthwatering flavor.



Caramel



**Orange Cream** 



**Bubble Gum** 



**Walterberry**®



**Cool Mint** 

See page 124.















Black Mini® Brush Tip page 128



- A unique blend of phosphate monomers, including the MDP monomer
- Convenient syringe and bottle delivery options
- Significantly enhances bond strengths to resin cements
- 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. With Peak-ZM primer, you can feel confident in your zirconia and metal restorations.

Note: Not for use with self-adhesive resins or RMGI.

2464 Peak-ZM Zirconia Primer Kit
2 x 1.2 ml Peak-ZM syringes
20 x Black Mini Brush tips

2463 Peak-ZM Zirconia Primer Bottle 1pk

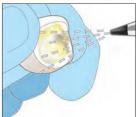


1. Data on file.

## PEAK-ZM ZIRCONIA/METAL PRIMER TECHNIQUE GUIDE



1. Clean, rinse, and dry preparation. Verify fit of zirconia or metal prosthesis.



2. Air abrade internal surface with 50µAl02 for at least 60 seconds at 50 psi. Look for a uniform dull surface. Air clean and set aside. NOTE: Contamination to the internal surface of the prosthesis will cause a decrease in bond strength. Keep area clean and free of phosphoric acid etch and saliva

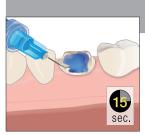


3. Clean tooth surface by applying oil and a fluoride-free abrasive such as Consepsis® Scrub slurry.



4. Scrub abrasive with the STARbrush® intercoronal brush to clean and remove any residual cement. Rinse and then air dry.

# **CHOOSE**





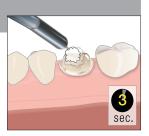


5. Apply Ultra-Etch® etchant for 15 seconds. Rinse for 5 seconds, lightly dry, leave slightly damp. Recommended: Apply Consepsis® solution to preparation, leave slightly damp.

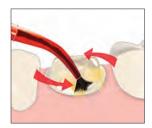
# 0R







5a. Apply Peak® SE Primer using the Black Mini® Brush tip for 20 seconds. Thin and dry with full air pressure for 3 seconds. Recommended: Apply Consepsis solution to the preparation before applying Peak SE.



6. Apply Peak® Universal Bond adhesive in a scrubbing motion for 10 seconds.



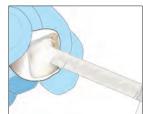
7. Thin with full air pressure for 10 seconds keeping suction close to preparation.



8. Light cure Peak Universal Bond adhesive for 10 seconds.



 Apply Peak-ZM primer to the airabraded prosthesis for 3 seconds and air thin/dry using full pressure. NOTE: Do not use a zirconia primer if luting with a glass ionomer or resinreinforced glass ionomer cement.



10. Apply a thin layer of a resinbased cement (PermaFlo® DC resin) to the prosthesis and firmly seat in place. Cure according to instructions. Remove excess cement.

Note: Use the VALO curing light with the barrier sleeves during procedure.

# **ETCH AND BOND**

# Ultra-Blend® plus

LINER











Black Black Micro® Tip Mini® Tip page 128 page 128

Bioactive<sup>1</sup> liner and pulp-capping material

- Superior calcium release<sup>2</sup>
- Light curable
- Controlled, precise syringe delivery
- No mixing necessary
- Will not dissolve over time
- Radiopaque
- Highly filled

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<sup>2</sup>



1. Use Ultra-Blend plus liner near pulp and for small nonhyperemic exposure. If larger exposure and/or hyperemic pulp, initiate endodontic therapy.



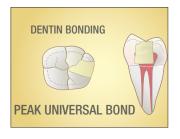
2. Apply Consepsis® antibacterial solution with plastic Blue Mini® Dento-Infusor® or Black Mini® brush tip for 60 seconds with gentle scrubbing action. Dry thoroughly. Do not rinse.



3. With Black Micro tip, apply Ultra-Blend plus liner to dry dentin for direct or indirect pulp caps and light cure. Minimize dentin coverage to maximize available dentin for bonding.



4. Apply Ultra-Etch® 35% phosphoric acid etchant solution for 15 seconds. Suction, rinse, and dry until damp.



5. With the Inspiral® Brush tip, apply Peak® Universal Bond adhesive, paint onto enamel and scrub into dentin for 10 seconds. Air thin at half pressure for 2–3 seconds and light cure for 10 seconds with the VALO® curing light on Standard Power mode. Restore with a quality composite.

# REFRIGERATE

415 Ultra-Blend plus Kit

2 x 1.2 ml Dentin syringes

2 x 1.2 ml 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 syringes

1. Pameijer CH, Stanley HR, Norval G. Pulp capping with a new adhesive light cured calcium hydroxide formula [AADR abstract 757]. J Dent Res. 1998;77(suppl 1):200. 2. Data on file.

# Consepsis®

2% CHLORHEXIDINE ANTIBACTERIAL SOLUTION











ini® Black M

Brush Tip

page 128

Blue Mini® DI Tip page 128



- Reduces potential for postoperative sensitivity
- Increases bond strengths with dentin bonding agents<sup>3</sup>
- $\bullet$  May ensure long-term bond strengths by inhibiting MMP action in the hybrid layers  $^{4\text{-}6}$

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

Minimize post-op pulpitis and sensitivity by thoroughly cleaning the preparation prior to sealing and restoring. Use prior to crown cementation, luting (provisional and/or permanent), and direct restorative placement, as well as procedural endodontic cleaning. During pulp capping, acidic etchants and hemostatic agents can cause disastrous effects on the pulp. Clean with near-neutral Consepsis antibacterial solution, which can also be used to passively control nonhyperemic bleeding.

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

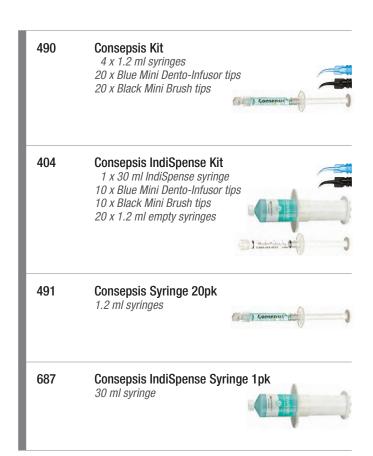


Clean preparations by applying Consepsis solution. Apply with Blue Mini Dento-Infusor tip or Black Mini Brush tip.



Clean canals during endodontic procedures after sodium hypochlorite has been used.

# WHEN DO YOU USE CONSEPSIS ANTIBACTERIAL SOLUTION? SELF-ETCH - Etch and no rinse Peak SE + Peak Universal Bond Consepsis - RECOMMENDED 1. Peak SE Consepsis - RECOMMENDED 2. Peak Universal Bond 2. Peak Universal Bond



realityesthetics.com.
 Carrilho MR, Carvalho RM, Sousa EN, et al. Substantivity of Chlorhexidine to Human Dentin. Dent Mater. 2010;26(8):779-85.
 Cao DS, Hollis RA, Christensen RP, Christensen GJ. Effect of tooth disinfecting procedures on dentin shear bond strength [AADR abstract 493]. J Dent Res. 1995;74(suppl):73.
 Carvalho RM, de Goes MF, et al. Chlorhexidine preserves dentin bond in vitro. J Dent Res. 2007;86(1):90-94.
 Carrilho MRO, Geraldeli S, Tay F, et al. In vivo preservation of the hybrid layer by chlorhexidine. J Dent Res. 2007;86(6):529-533.
 Brackett WW, Tay FR, Brackett MG, Dib A, Sword RJ, Pashley DH. The effect of chlorhexidine on dentin hybrid layers in vivo. Oper Dent. 2007;32(2):107-111.

# AND MORE





The new Omni-Matrix disposable retainer and matrix is a superior circumferential matrix band solution designed to perfectly customize to any preparation.

# **EQUIPMENT**

VALO Corded

**VALO Cordless** 

VALO Grand

**VALO** Accessories

UltraTect

UltraVac

Ultrasep III

**Ultradent Utility Vinyl Cutters** 

Ultradent Ultra-Trim Scalloping Scissors

Ultrawave

Ultrawave XS

**Ultrawave Tips** 

**Ultrawave Wrenches** 

Gemini







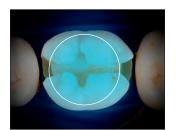


- Ultra-high-energy broadband LEDs cure all dental materials
- Optimally collimated beam delivers consistent, uniform power
- Three curing modes accommodate your preferences
- Extremely durable, slim, ergonomic shape allows unprecedented access to all restoration sites
- Unique unibody design is both extremely durable and lightweight
- Highly efficient LEDs and aerospace unibody aluminum keep wand body cool to the touch

All VALO LED curing lights use 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.



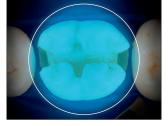
Unique glass lens system forms the light's collimated blended beam



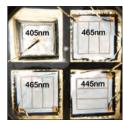
Average competitor surface area 46 mm²



VALO curing light surface area 78 mm²



VALO Grand curing light surface area 107 mm<sup>2</sup>

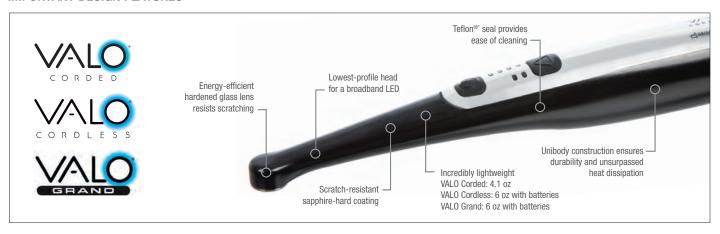


405	465
nm	nm
465	445
nm	nm

VALO® curing lights have custom LED packs that contain chips in 3 wavelengths, which enable VALO lights to cure all dental materials, whether containing proprietary photoinitiators such as Lucirin TPO, PPD, or more commonly found camphorquinone.



#### IMPORTANT DESIGN FEATURES



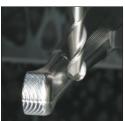




Every VALO® LED curing light starts as a single bar of tempered, high-grade aerospace aluminum, which is CNC precision milled at Ultradent's facility in Utah, USA and ends as the most advanced curing light in the world.





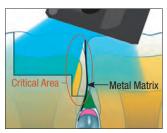




True unibody construction via machining ensures durability and superior heat dissipation and facilitates the elegant, ergonomic, and streamlined design that enables the VALO light to access areas other curing lights simply cannot reach.



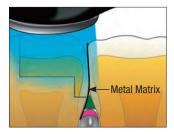
The angle of competitor's 60° light guide causes overextension of jaw and often makes it impossible for light to reach all aspects of preparation.



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



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



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

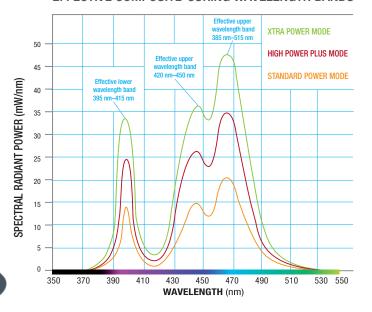
"The VALO line of light curing products and accessories keeps setting the industry standard for highly efficient, effective, ergonomic, no-nonsense, virtually indestructible products."

—DR. FRED RUEGGEBERG, DDS

<sup>\*</sup> Trademark of a company other than Ultradent.

# EQUIPMENT

## EFFECTIVE COMPOSITE-CURING WAVELENGTH BANDS



## VALO TECHNICAL INFORMATION

Range of Light Output (nm)	205 nm E1	Enm			
nange or Light Output (IIII)	385 nm–515 nm				
Wand	Weight VALO: 115 g (4.1 oz) VALO Cordless: 190 g (6.7 oz) VALO Cordless without batteries: 150 g 5.3 oz) VALO Grand: 190 g (6.7 oz) VALO Grand without batteries: 150 g (5.3 oz) Dimensions VALO: 9.25" L x 0.8" W x 0.75" H VALO Cordless: 8" L x 1.1" W x 1.3" H				
VALO Power Supply	9V DC at 2A, medical grade (UL CE) with surge protection of 100VAC to 240VAC				
VALO Cordless and VALO Grand Power Supply	Rechargeable batteries LiFePO <sub>4</sub> RCR123A, Smart battery charger 3.6 VDC LiFePO <sub>4</sub> Medical grade power adapter (UL, CE, RoHS, WEEE) 100VAC 240VAC				
	IRRADIANCE (mW/cm2)				
	Total Power (mW)	Demetron LED Radiometer	MARC Spectrum Analyzer	Gigahertz Spectrum Analyzer	
VALO Standard Power	655	1000	1200	900	
VALO High Power	960	1400	1600	1300	
VALO Xtra Power	1550	N/A	3200	2100	
VALO Grand Standard	970	1000	1200	900	
VALO Grand High Power Plus VALO Grand Xtra Power	1615	1600	1800	1500	
VALO Grand Xtra Power	2260	N/A	3200	2100	
Lens Diameter	9.6 mm VALO and VALO Cordless 11.7 mm VALO Grand				
Light Timing Programs Adjustable time options					

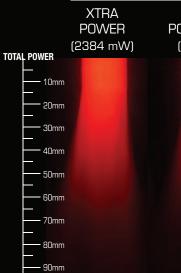






The comparisons below were obtained by shining each curing light through a light-absorbing red dye.

# VALO® GRAND



HIGH POWER PLUS (1781 mW)

STANDARD POWER (989 mW)

ELIPAR<sup>™\*</sup>
DEEPCURE-S
(785 mW)

BLUEPHASE®\*
S STYLE
(651 mW)

**DEMI**™\* **ULTRA**(700 mW)

™\* SMARTLITE®\* A FOCUS W) (466 mW)

**Actual size** 

\* Trademark of a company other than Ultradent.















"The VALO light is a fantastic piece of equipment. Clinicians no longer have to choose between normal output, high-intensity output, or the power of a PAC light, because the VALO light offers all three in one lightweight, compact, durable unit. The VALO light's ability to produce the greatest amount of energy at distances up to 10 mm from the tooth is just amazing. I have been using this light for some time and would not want to be without it."

---DR. JOHN KANCA, DDS - MIDDLEBURY, CT



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

VALO 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-cured dental materials. This intensity will also penetrate porcelain and is capable of curing underlying resin cements. The VALO 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.



# 5919 VALO Corded Kit

1 x VALO LED curing light 7' cord

1 x Power supply with universal plugs 6' cord

1 x Handpiece bracket holder

1 x Light shield

1 x Sample pack of barrier sleeves



5930 VALO Power Supply - 6' cord



5933 VALO Power Supply - 16' cord



4668 VALO Barrier Sleeves 100pk



5935 Light Shield 1pk



508 Blue Light Blocking Glasses 1pk



"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

"A new wave of LEDs is here! The sleek VALO light operates with standard curing, and innovative high-powered curing options. It is compact, light to the touch, and offers the benefits of three lights in one."

—DR. MARK COLONNA, DDS – WHITEFISH, MT

1. realityesthetics.com





















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

VALO Cordless curing light uses a custom, multiwavelength lightemitting 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 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 Cordless curing light is equipped with a sensor that registers movement of the light; when the light is not being used, the VALO Cordless curing light will automatically go into sleep mode and when moved will return to the most recently used setting.



VALO Cordless Kit - Black

1 x VALO Cordless LED curing light

4 x Rechargeable batteries

1 x Battery charger

1 x Charging unit power supply

1 x Handpiece bracket holder

1 x VALO Cordless Light Shield

1 x Sample pack of barrier sleeves



5961 **VALO Cordless Charging Unit Power Supply** 



5962 VALO Cordless Battery Charging Unit 1pk



5963 VALO Cordless Rechargeable Batteries 2pk



4667 VALO Cordless Barrier Sleeves 100pk



5929 VALO Cordless Light Shield 1pk



508 Blue Light Blocking Glasses 1pk



1. realityesthetics.com.





CORDLESS LED CURING LIGHT







- Ultra-high-energy broadband LEDs cure all 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
- Unique unibody design is both 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-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 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.



5972	VALO Grand Cordless Kit  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 VALO Grand Light Shield 1 x Sample pack of barrier sleeves
5961	VALO Grand Charging Unit Power Supply
5962	VALO Grand Battery Charging Unit 1pk
5963	VALO Grand Rechargeable Batteries 2pk
4666	VALO Grand Barrier Sleeves 100pk
1667	VALO Grand Surface Mounting Bracket 1pk
3604	VALO Grand Light Shield 1pk
508	Blue Light Blocking Glasses 1pk



# VALO® and VALO® Cordless Accessories

(not yet available for the VALO® Grand light)



PointCure<sup>™</sup> Lens



Clear lens for pinpoint curing of small composites or tack curing veneers.

5934

PointCure Lens 2pk



EndoGuide™ Lens



Special lens for apical retrofills and other narrow preparations.

5938

EndoGuide Lens 2pk



ProxiCure<sup>™</sup> Ball Lenses



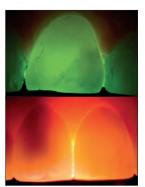
ProxiCure Ball lenses facilitate the building of convex proximal contacts. Imprint is easily filled with composite in a second step. Push ProxiCure Ball lens against interproximal wall of band; do not submerge in composite.

5936

ProxiCure Ball Lenses 2pk
1 x Each large and small



TransLume™ Lenses Green & Orange



The green lens aids in locating and demonstrating cracks and subsurface differences.

The penetrating ability of the orange lens shows the obstruction to light caused by posts or internal bubbles. 5937

**TransLume Lenses 2pk** 1 x Each orange and green



Black Light Lens



Black Light lens aids in detecting fluorescent particles in resins for easy differentiation from natural enamel.

5939

Black Light Lens 1pk

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



Use the mounting bracket for the VALO or VALO Cordless curing lights and mount to any surface.

1667

Mounting Bracket 1pk

### UltraTect™

















Glasses are flexible and impact resistant for ultimate durability.

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

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.

914 Maroon Frame/Brown Lens 1pk

501 Black Frame/Clear Lens 1pk 508

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

### Ultrasep™ III

MOLD RELEASE

176



Quickly and easily removes vacuum-formed parts

Ultrasep III 1pk

- Minimizes distortion and reduces defects
- Contains no CFC propellants or solvents
- Provides outstanding surface coverage
- Colorless and nonstaining



### Ultradent® Utility Vinyl Cutters





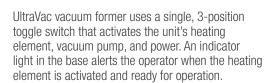
Use for gross trimming of tray



## UltraVac™

**VACUUM FORMER** 





1082 UltraVac Vacuum Former 110 v

### Ultradent® Ultra-Trim Scalloping Scissors





- Spring-loaded to minimize finger fatigue
- Grips tray material easily
- · Made of durable stainless steel



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



# EQUIPMENT







- Connects directly with your in-office water supply for constant flow
- Compact design of unit makes it portable and easy to fit on a counter or treatment tray
- Reflex<sup>™\*</sup> technology allows automatic frequency adjustments creating a high precision application
- Lightweight and ergonomic handpiece reduces physical stress caused by repetitive movements
- The unique Color-Coding System matches tips to the ideal power setting
- Wide range of amplitudes (power) for multiple clinical procedures
- Less water needed than other devices, increasing patient comfort



- Ultrawave XS device comes with LED handpiece for better visibility and working comfort
- Large-capacity, detachable 300 ml tank for irrigation solution
- Reflex<sup>™\*</sup> technology allows automatic frequency adjustments creating a high precision application
- Lightweight and ergonomic handpiece reduces physical stress caused by repetitive movements
- The unique Color-Coding System matches tips to the ideal power setting
- Wide range of amplitudes (power) for multiple clinical procedures
- Less water needed than other devices, increasing patient comfort

Ultrawave and Ultrawave XS piezoelectric devices utilize advanced ultrasonic technology. Unlike sonic or magnetostrictive scalers, these piezoelectric devices offer improved performance and better control of the various tips. As the tips move in a linear motion at an ultrasonic frequency of up to 36 kHz, a microstreaming effect creates a cavitation that helps eliminate biofilm in the periodontal pocket and inside the root canals.

\* Trademark of a company other than Ultradent.

#### F58340 Ultrawave Kit

- 1 x Ultrawave unit
- 1 x Handpiece
- 1 x Each tip (scaling 1, scaling 10Z, and H3)
- 1 x Green wrench
- 2 x Blue wrenches



### F58100 Ultrawave XS LED Kit

- 1 x Ultrawave XS LED unit
- 1 x LED handpiece
- 1 x Each tip (scaling 1, scaling 10Z, and H3)
- 1 x Green wrench
- 2 x Blue wrenches



F12101 Ultrawave Handpiece 1pk



F12617 Ultrawave XS LED Handpiece 1pk



### Ultrawave® XS NiTiSonic Tip, Bottle Connector Kit, and Bottle Caps







### 4307 Ultrawave XS NiTiSonic Tip & Bottle Connector Kit

1 x Each bottle cap with valve, connector base, empty bottle and Ultrawave Metal Flat Wrench

4 x Ultrawave NiTiSonic tips



4308 Ultrawave XS Bottle Cap 1pk



#### COLOR-CODING SYSTEM

The Ultrawave and Ultrawave XS piezoelectric units offer exceptional ease of use through the Color-Coding System. Matching the right tip to the right power is simple and reliable. The colors allow tips to be used with the most efficient corresponding power setting on the control dial of the devices.









Wrenches









Tips









Power (amplitude)



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

F00254 Ultrawave 10Z Scaling Tip 1pk



Fine tip designed for pockets <2-3 mm.

F00253 Ultrawave 10P Scaling Tip 1pk

**Ultrawave PFU Scaling Tip 1pk** 

е

F02170



Straight-oriented tip indicated for supragingival calculus removal.



Recommended for removing supragingival deposits.

F00247 Ultrawave 2 Scaling Tip 1pk



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





- 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
- Sterilization: tips are autoclavable and suitable for sterilization
- Ring color correlates with Ultrawave Power



For removing discolorations and stains.

F00248 Ultrawave 3 Scaling Tip 1pk



Designed to cut excess of gutta percha cones at canal orifices, leaving right space for Unicore® preparation.

F02253 Ultrawave PM4 Tip 1pk



For interproximal spaces and supragingival scaling.

F00359 Ultrawave 10X Scaling Tip 1pk



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.



Right-oriented tip indicated for supragingival calculus removal.

F02172 Ultrawave PFR Tip 1pk



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

F00245 Ultrawave 1 Slim Scaling Tip 1pk



Left-oriented tip indicated for supragingival calculus removal.

F02171 Ultrawave PFL Tip 1pk



Recommended for treating simple cases and gross supragingival scaling.

F00246 Ultrawave 1 Scaling Tip 1pk

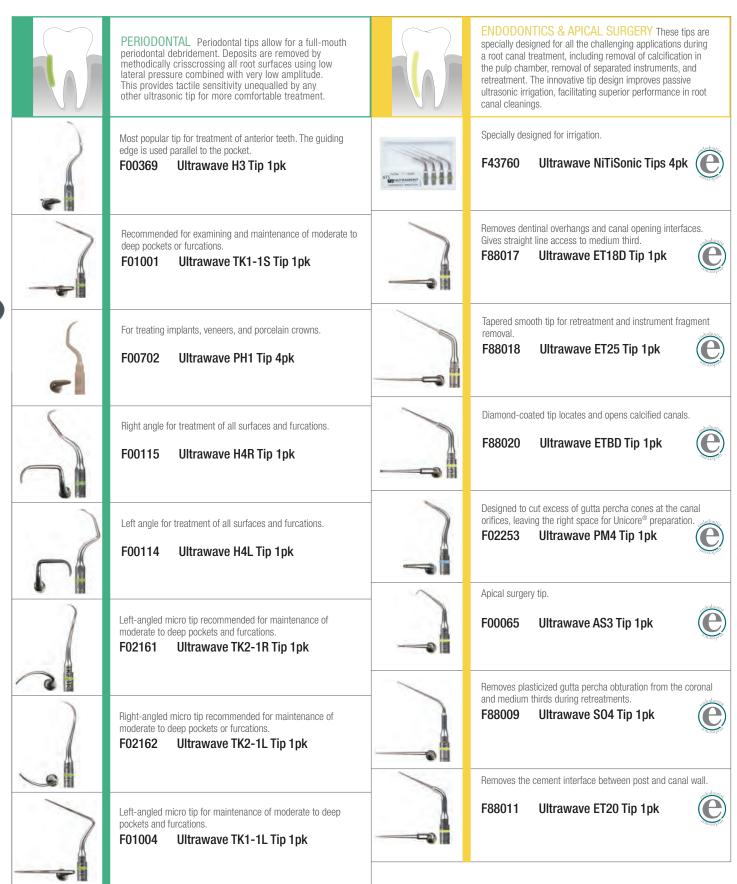


Preparation of occlusal surface and cervical margin. Diameter 1.7 mm.

F02040 Ultrawave EX1 Tip 1pk

<sup>\*</sup> Acteon® and Satelec® are trademarks of Satelec, a company of Acteon Group.





<sup>\*</sup> Acteon® and Satelec® are trademarks of Satelec, a company of Acteon Group.

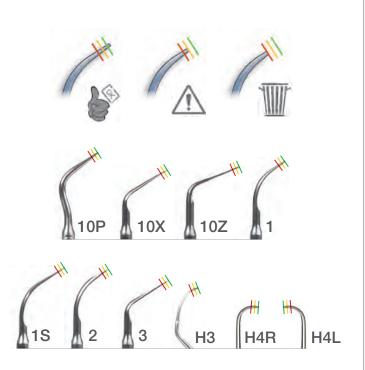


**POST REMOVAL** The ETPR tip is the ideal tool for loosening posts.

Short and powerful tip for loosening posts.

F88019 Ultrawave ETPR Tip 1pk





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

F00446	Wrench - Flat	1
F81302	Wrench - Blue scaling	
F81300	Wrench - Green periodontal	
F81301	Wrench - Yellow endodontic	
F81303	Wrench - Orange post removal	

### Endodontic Files, see pages 34-35.







The only files designed and tested to work optimally in both clockwise cutting reciprocation and rotary movements!

- Flutes are designed for clockwise cutting
- Files provide the safety of reciprocation (90°/30°) and the efficiency of rotary (360°)
- Complete any procedure with just two files after preflaring and creating a glide path
- The same sequence can be used for both treatment and retreatment

<sup>\*</sup> Acteon® and Satelec® are trademarks of Satelec, a company of Acteon Group.



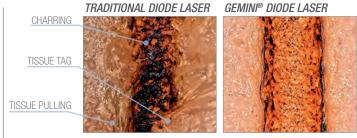




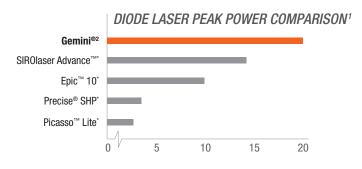




- 20 watts of peak super-pulsed power for faster, smoother cutting
- Dual wavelength technology combines the optimal pigment absorption of the 810 nm wavelength and the optimal water absorption of the 980 nm wavelength in diode lasers
- Sleek, innovative design features a stunning transparent electroluminescent display
- Simple user interface and 19 preset procedures enhance ease of use
- Wireless foot pedal and battery operation allow for convenient movement from operatory to operatory
- Autoclavable handpiece for simple sterilization between procedures
- Designed and assembled in the U.S. from U.S. and imported components



Watt Average Power, 400 micron fiber, Robotically Controlled Speed





<sup>\*</sup>Trademark of a company other than Ultradent. 1. Data published by manufacturer. 2. Peak power in dual wavelength mode.

# **FINISH**

Jiffy Natural Universal Composite
Jiffy Original Composite
Jiffy Natural Universal Ceramic
Jiffy Universal Ceramic
Ultradent Diamond Polish Mint
Jiffy Goat Hair Brush
Jiffy Composite Polishing Brushes
DeOx
Jiffy Diamond Strips
Jiffy Proximal Saw
PermaSeal
PrimaDry











- Complete procedural kit includes everything you need
- 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 Universal composite finishing and polishing system consists of malleable spiral-shaped wheels that are designed to easily conform to all tooth surfaces.

#### INTRAORAL ADJUSTING AND POLISHING

### Recommended speed: 300,000 RPM



Jiffy Diamond Fine Egg Large adjusts occlusal surfaces.



Jiffy Diamond D8F Fine Flame adjusts margins and labial surfaces.



Jiffy Diamond D6F Fine Needle adjusts margins and labial surfaces.



Jiffy Interproximal Diamond is used for interproximal adjusting.

### Recommended speed: 5,000-8,000 RPM





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

### Recommended speed: 2.000-4.000 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.

#### 6105 **Jiffy Natural Composite Diamond** Finishina & Polishina Kit

1 x Jiffy RA Medium Natural Composite 14 mm Wheel 1 x Jiffy RA Fine Natural Composite 14 mm Wheel

1 x Jiffy RA Medium Composite Cup

1 x Jiffy RA Fine Composite Cup

1 x Jiffy D6F Fine Needle

1 x Jiffy D8F Fine Flame

1 x Jiffy Diamond Fine Egg Large

1 x Jiffy Interproximal Diamond



#### 6104 Jiffy Natural Composite Carbide Finishing & Polishing Kit

1 x Jiffy RA Medium Natural Composite 14 mm Wheel

1 x Jiffy RA Fine Natural Composite 14 mm Wheel

1 x Jiffy RA Medium Composite Cup

1 x Jiffy RA Fine Composite Cup

1 x Jiffy TF6 8 BLD Needle

1 x Jiffy 7901 T&F Flame

1 x Jiffy 7408 T&F Egg Large

1 x Jiffy Interproximal Diamond



6089 Jiffy Natural RA Medium 14 mm Polishing Wheel 3pk 6090 Jiffy Natural RA Fine 14 mm Polishing Wheel 3pk



6109 Jiffy Natural RA Assorted 14 mm Polishing Wheel 6pk



6098 Jiffy TF6 8 BLD Needle 5pk



4248 Jiffy Interproximal Diamond 5pk Jiffy D8F Fine Flame 5pk 6087 Jiffy Diamond Fine Egg Large 5pk 6088 6099

Jiffy D6F Fine Needle 5pk



4245 Jiffy 7901 T&F Flame 5pk Jiffy 7408 T&F Egg Large 5pk 4246



838 Jiffy Medium Cup 20pk Jiffy Fine Cup 20pk 841



<sup>\*</sup> Ultradent recommends the use of an aluminum block when autoclaving to prevent warping and deformation. WARNING: Do not use Jiffy Natural Universal polishing wheels to polish the labial surface near the gingival line. This can tear the gingiva.









- Excellent for adjusting and polishing any composite material including Amelogen<sup>®</sup> Plus, Vit-I-escence<sup>®</sup>, and Mosaic<sup>®</sup> composites
- Polishing cups feature a flared, flexible thin-wall design that is ideal for polishing near the gingiva
- Available with or without autoclavable aluminum blocks\*
- Ultradent grit gives a beautiful finish on any composite material
- Not made with natural rubber latex

### **TECHNIQUE**



### 1. Gross to Fine Shaping

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



### 2. High Shine Polish

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



#### 3. Final Finish Option

The unique Jiffy® Goat Hair Brush used with Ultradent® Diamond Polish Mint gives a final esthetic finish to ceramic restorations.



Ultracare® gel facilitates superior finishing and prevents entangling of the rubber dam during finishing.

"Jiffy Polishers provide a great finish to my composite restoration in a timeefficient manner."

—DR. MARK KOENEN – DANVILLE, CA

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

1, realityesthetics.com.

### INTRAORAL SHAPING AND POLISHING

### Recommended speed: 7,500-10,000 RPM



Jiffy Coarse Green Polishing cup shapes cusp, labial, buccal, and cervical areas.



Jiffy Coarse Green Polishing disk shapes labial surfaces.



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

### Recommended speed: 7,500-10,000 RPM



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



Jiffy Medium Yellow Polishing disk polishes occlusal and labial surfaces.



Jiffy Medium Yellow Polishing point polishes margins and labial surfaces.

#### Recommended speed: 5,000-8,000 RPM



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



Jiffy Fine White Polishing disk creates final polish on labial surfaces.



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



### INTRAORAL FINAL POLISHING

### Recommended speed: 5,000-7,500 RPM



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



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



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

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)



#### 848 **Jiffy Polishing Variety Pack**

5 x Each cups and disks (2 coarse, 2 medium, 1 fine) 10 x Points (4 coarse, 4 medium, 2 fine)



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



	Y	T	Ā
	Cups 20pk	Disks 20pk	Points 20pk
Coarse	890	891	892
Medium	838	840	839
Fine	841	843	842

		T	<b>A</b>
	Cups 10pk	Disks 10pk	Points 10pk
HiShine	3061	3062	3060

### INTRAORAL ADJUSTING

#### Recommended speed: 300,000 RPM



Jiffy Diamond Fine Egg Large adjusts occlusal surfaces.



Jiffy Diamond D6F Fine Needle adjusts margins and labial surfaces.



Jiffy Diamond D8F Fine Flame adjusts margins and labial surfaces.



Jiffy Carbide 7408 T&F Egg Large adjusts occlusal surfaces.

### Recommended speed: 450,000 RPM



Jiffy Carbide TF6 8 BLD Needle adjusts margins and labial surfaces.



Jiffy Carbide 7901 T&F Flame adjusts occlusal surfaces.



Jiffy Interproximal Diamond adjusts interproximal surfaces. Also great for sealant groove preparation.

#### 4243 Jiffy Composite Finishing Kit

1 x Each Jiffy T&F Flames (7901, Long, Long 30-Blade)

1 x Each Jiffy Cylinders (T&F Beveled, 7572 Flat) 1 x Each Jiffy T&F Eggs (7406 Small, 7408 Large)

1 x Jiffy Interproximal Diamond



4245	Jiffy T&F 7901 Flame 5pk	
4251	Jiffy T&F Long Flame 5pk	
4252	Jiffy T&F Long Flame 30-Blade 5pk	
4244	Jiffy 7572 Flat Cylinder 5pk	
4249	Jiffy T&F Beveled Cylinder 5pk	
4246	Jiffy T&F 7408 Egg Large 5pk	
4247	Jiffy T&F 7406 Egg Small 5pk	

4248 Jiffy Interproximal Diamond 5pk











- Naturally adapts to any tooth surface, including occlusal anatomy
- Specially formulated Ultradent diamond grit allows for efficient polishing on any ceramic material, including zirconia
- Designed to soften super high-gloss finishes to achieve a more natural look
- Can be used to refresh older prosthetic cases
- Designed for use with the Jiffy Universal ceramic finishing system
- 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 extraoral and intraoral 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.



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.

### EXTRAORAL POLISHING

Recommended speed: 4,000-10,000 RPM



Use Jiffy HP Medium Natural Universal 26 mm wheel to pre-polish.



Use Jiffy Natural Universal HP Fine 26 mm wheel to create final polish.

#### INTRAORAL 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 Fine Universal Cup should be used.

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

6081 Jiffy Natural Universal Extra-Oral Polishing Kit

1 x Jiffy HP Medium Natural Universal 26 mm wheel 1 x Jiffy HP Fine Natural Universal 26 mm wheel



Jiffy Natural HP Medium Polishing 26 mm Wheel 1pk Jiffy Natural HP Fine Polishing 26 mm Wheel 1pk



6080 Jiffy Natural Universal Intra-Oral Polishing Kit

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



Jiffy Natural RA Variety 14 mm Polishing Wheel 6pk



Jiffy Natural RA Medium 14 mm Polishing Wheel 3pk Jiffy Natural RA Fine 14 mm Polishing Wheel 3pk



ultradent.com 8

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





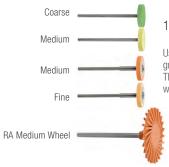
UNIVERSAL CERAMIC ADJUSTING AND POLISHING SYSTEM





- Universal application on all ceramic materials eliminates the need for multiple adjusters and polishers, saving you time and money
- Specially formulated Ultradent 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
- Optimized two-step adjusting and polishing sequence
- · Maximum diamond retention ensures a long service life
- Autoclavable aluminum block extends the life of the system

### **TECHNIQUE**



1. 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.



2. Intraoral Kit for

Minor Adjustments and Polishing
Use the fine football and round end taper diamonds
for the adjusting of ceramics. The orange medium
and fine points, cups, and orange Natural wheels
are used to polish.



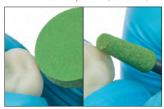
3. Final Finish Option

The unique Jiffy® Goat Hair Brush used with Ultradent® Diamond Polish Mint gives a final esthetic finish to ceramic restorations.

### 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 Grinders (Green) are recommended for grinding down sprues and gross adjustment.



Jiffy Universal Medium Grinders (Yellow) 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.

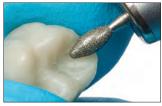


2. Use Jiffy HP Fine Universal Wheel to create final polish.

### INTRAORAL ADJUSTING

Use copious amounts of water

#### Recommended speed:15.000-20.000 RPM



Use Jiffy Fine Football to adjust occlusal surfaces.

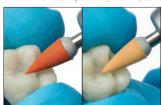


Use Jiffy Fine Round End Taper to adjust contacts.

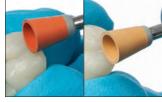
#### INTRAORAL POLISHING

- 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 and Fine Point intraorally to pre-polish on occlusal and labial surfaces.

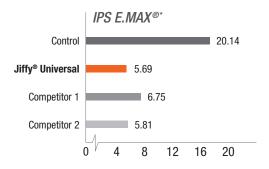


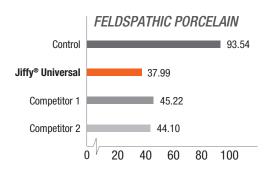
2. Use Jiffy Universal RA Medium and Fine Cup intraorally to create final polish on cusp, labial, buccal, and cervical areas.



### SURFACE ROUGHNESS (UIN)1







4018	Jiffy Universal Extra-Oral Adjusting & 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 4241	Jiffy HP Coarse Polishing Grinder Wheel 1pk Jiffy HP Medium Polishing Grinder Wheel 1pk
4239 4242	Jiffy HP Coarse Polishing Grinder Taper 1pk Jiffy HP Medium Polishing Grinder Taper 1pk
4019	Jiffy Universal Intra-Oral Adjusting & Polishing Kit 2 x Jiffy RA Universal Points (1 Medium, 1 Fine) 2 x Jiffy RA Universal Cups (1 Medium, 1 Fine) 1 x Jiffy Fine Football 1 x Jiffy Fine Round End Taper
4236 4237	Jiffy HP Medium Polishing Wheel 1pk Jiffy HP Fine Polishing Wheel 1pk
4086 4087	Jiffy Fine Round End Taper 5pk  Jiffy Fine Football 5pk
4108 4109	Jiffy RA Medium Polishing Point 5pk  Jiffy RA Fine Polishing Point 5pk
4234 4235	Jiffy RA Medium Polishing Cup 5pk  Jiffy RA Fine Polishing Cup 5pk

<sup>&</sup>quot;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."

<sup>---</sup>DR. ERIC HOLLANDER DDS, AUSTIN, TX

<sup>&</sup>quot;These polishing kits give a very nice sheen and are better than any others I've used."
—DR. WILLIAM J. DUNBAR DDS, GLENCLOE, MN

<sup>\*</sup> Trademark of a company other than Ultradent. 1. Data on file.



### Ultradent® Diamond Polish Mint











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



Use Ultradent Diamond Polish Mint with Jiffy Goat Hair Brushes.

5540 5541

Diamond Polish Mint Syringe 0.5 µm 2pk Diamond Polish Mint Syringe 1 µm 2pk 1.2 ml syringes



### Jiffy® Goat Hair Brush





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

### Recommended speed: 15,000 RPM



Jiffy Goat Hair Brush is used with Ultradent Diamond Polish for a final esthetic finish.

1029

Jiffy Goat Hair Brush 10pk



1. realityesthetics.com.

### Jiffy® Composite Polishing Brushes





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
- Integrity is maintained through limited autoclaving cycles
- 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 1009 Jiffy Regular Brush 10pk Jiffy Pointed Brush 10pk



1. realityesthetics.com



### De0x®

VISCOUS OXYGEN BARRIER SOLUTION











- Prevents oxygen-inhibited layer formation
- Provides easy delivery

DeOx barrier solution is a viscous, glycerine-based gel designed to prevent formation of an oxygen-inhibited layer on the surface of resin materials when they are polymerized.



Veneer containing luting resin is placed. Before curing, excess resin is removed from margin. De0x barrier solution is coated over margins as shown here. Result: No oxygen inhibition on margin of luting resin surface upon polymerization; no ditching at margin.

238 De0x Syringe 4pk 1.2 ml syringes



#### 1. realityesthetics.com.

### Jiffy® Diamond Strips



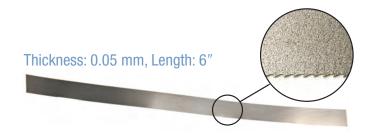


These medium grit finishing strips are flexible, durable, thin, and more aggressive than aluminum oxide strips. The perforated design enhances visibility for more precise contouring. Available in two widths, wide and narrow.

1162 1163 Jiffy Diamond Strips Wide 3.75 mm 10pk Jiffy Diamond Strips Narrow 2.5 mm 10pk

### 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 or dry heat.

1166 Jiffy Proximal Saw 6 mm 12pk



### PermaSeal®

PENETRATING COMPOSITE SEALER











- 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 seals voids and irregularities created during the polishing process, minimizing staining and wear. Place on Class V composite margins to reduce microleakage.<sup>2</sup> For the final glaze-type finish of resin provisionals, cover PermaSeal sealer with DeOx® barrier solution prior to light curing. 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**



Before: Interproximal spaces and slight rotations to be corrected with Peak® Universal Bond adhesive and composite. Air thin and light cure for 20 seconds.



After restoring and polishing, etch 5 seconds and apply PermaSeal composite sealer to seal composite and create a glossy finish.

### **EXISTING RESTORATIONS**



Always clean existing composite restorations and adjacent enamel using Consepsis® Scrub slurry, pumice, or a microetcher. Rinse and etch 15 seconds. Rinse thoroughly and air dry.



Four-year-old bonded composite following PermaSeal composite sealer treatment.



Smooth the provisional surface. Brush PermaSeal composite sealer into surfaces, gently air thin, coat with DeOx barrier solution, and light cure for 20 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 Kit
4 x 1.2 ml 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.

1. realityesthetics.com. 2. Dunn JR, Dole P, Fullerton B, Hennesy C. Microleakage of Class V composite restorations using a composite surface sealant. Biomaterials Research Center, Loma Linda University School of Dentistry. May 1996.

# PrimaDry® DRYING AGENT









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 and microcracks of existing restorations following the etching process. The ultrafine primer film allows UltraSeal XT® plus sealant or PermaSeal sealer to flow perfectly into every pit and fissure. Also useful prior to placing composite repairs. Do not use on dentin.



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# **IMPRESSIONS**

Thermo Clone VPS
Thermo Clone Bite Registration
Chromaclone Alginate
Chromaclone PVS











### MAKE THE RIGHT FIRST IMPRESSION



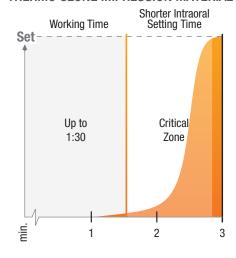


- Thermal-Accelerated Set ensures a long working time and short intraoral setting time
- Increased hydrophilicity reliably captures margins
- Highly thixotropic material flows into all gaps for maximum detail
- High tear strength with superb elastic recovery
- Bubble Gum scent

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 material stays unset, with a working time of up to 1:30. 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 the graph in the next column to view the setting time of Thermo Clone material. The materials were placed into an environment that simulated a patient's mouth and were continually tested to determine the setting stage.

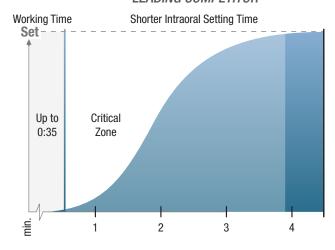
### THERMO CLONE IMPRESSION MATERIAL



- 1. You determine the working time of up to 1:30. The material begins to set as soon as it is placed in the patients' mouth.
- 2. Thermo Clone material exits the Critical Zone in only 80 seconds!
- 3. In this data set, Thermo Clone material was fully set 90 seconds after being placed in the simulated mouth.\*

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.

### LEADING COMPETITOR



- 1. The competitor's material has a maximum and minimum working time of 35 seconds. The material begins to set at the same time regardless of when it is placed in the mouth.
- 2. The material stays in the Critical Zone for 3:30.
- 3. In this data set, the material was completely set 3:55 after being placed in the simulated mouth.

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.

<sup>\*</sup> Please refer to the Instructions for Use for recommended intraoral time.

SET TIMES	SET SPEED	WORKING TIME	SET TIME	TOTAL TIME
SUPER LIGHT BODY	FAST	1:00 min	1:15 mins	2:15 mins
LIGHT BODY	REGULAR <i>FAST</i>	2:15 mins 1:00 min	2:15 mins 1:15 mins	4:30 mins <i>2:15 mins</i>
MEDIUM BODY	REGULAR FAST	2:15 mins 1:00 min	2:30 mins 2:15 mins	4:45 mins <i>3:15 mins</i>
HEAVY BODY	REGULAR FAST	2:15 mins 1:00 min	2:30 mins 2:15 mins	4:45 mins <i>3:15 mins</i>
PUTTY	FAST	2:00 min	2:00 mins	4:00 mins
BITE REGISTRATION	FAST	0:15 min	0:55 mins	1:10 mins

### Thermo Clone® VPS 50 ml Cartridges

	1	
	Regular 2pk	Fast 2pk
50 ml Super Light	_	4060
50 ml Light	4057	4065

2 x 50 ml cartridges 12 x Each Mixing/IntraOral tips



2 x 50 ml cartridges 6 x Mixing tips



	Fast 10pk
50 ml Light	4076

10 x 50 ml cartridges 48 x Each Mixing/IntraOral tips

	Fast 10pk
50 ml Heavy	4077

10 x 50 ml cartridges 30 x Mixing tips





# Ask about our mix and match or bulk discount pricing on Thermo Clone VPS 50 ml Cartridges and Thermo Clone VPS Bite Registration!



### Thermo Clone® VPS Jumbo Cartridges







Remove cap.

Attach tip.

Load mixing machine.

	Regular 1pk	Fast 1pk
380 ml Medium	4068	4070
380 ml Heavy	4069	4071

1 x 380 ml cartridges 10 x Dynamic Mixing tips



### Thermo Clone® VPS Accessories

4073	Thermo Clone VPS Putty	
	1 x Each 200 ml base and 200 ml catalyst 2 x Scoops	
5100	Dispensing Gun 1pk	オ
4074	Tray Adhesive 10 ml Bottle 1pk	The state of the s

# **IMPRESSIONS**

### FOR IMPRESSION MAKING

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.

### **BLEEDING**



1. Subgingival preparation with bleeding.

### **HEMOSTASIS**



2. Burnish Astringedent® X hemostatic firmly against 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 1-3 minutes.

### DRYING/TESTING



5. Remove Ultrapak knitted cord, follow with a firm air/water spray and dry.

### MAKE IMPRESSION



6. Cover preparation with wash material.

### RESULT



7. Predictable quality impressions.

#### **HYDROPHILIC**

Hydrophilicity ensures precision in your impressions by displacing moisture so the material can reach every part of every tooth.

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.



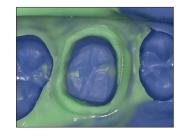
Initial water contact.

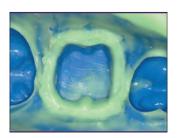


After 30 seconds.

### **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.





### 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.

	2pk
50 ml Bite Registration	4072
2	v FO ml contridace

2 x 50 ml cartridges 12 x Mixing tips



### **Chromaclone®**

AL GINATE







### 5-DAY STABILITY FOR IMPRESSIONS



- 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 Chromaclone 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 to pour your impressions, not just the few hours you're used to.\*

And as always, Chromaclone 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.





4033 Chromaclone 5-day FAST SET Kit 5502 Chromaclone Ortho 5-day EXTRA FAST SET Kit

1 x 1 lb bag of Chromaclone 5-day 1 x Plastic container, water cup, and scoop

4034 Chromaclone 5-day FAST SET Refill
5503 Chromaclone Ortho 5-day EXTRA FAST SET Refill
1 x 1 lb bag of Chromaclone 5-day

Fast Set: 53 seconds time in mouth Extra Fast Set: 45 seconds time in mouth

1. realityesthetics.com

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# **IMPRESSIONS**

### Chromaclone® PVS

HYDROPHILIC POLYVINYL SILOXANE IMPRESSION MATERIAL















WASH/LIGHT

MONOPHASE

**HEAVY BODY** 

**CLONE BITE** 

- Hydrophilic and thixotropic
- Dimensionally stable with great elastic recovery
- Allows you to pour at your convenience
- Tear resistant
- Accurate with multiple pours
- Time in mouth: 2–3 minutes (Fast Set) and 3–4 minutes (Regular Set)
- Bubble Gum flavor

Chromaclone PVS impression material captures even the smallest details, enabling you to make 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, including Chromaclone PVS material, can be increased with the use of Ultradent's Tissue Management System. Profound hemostasis is paramount before making impressions.

### **PROCEDURE**



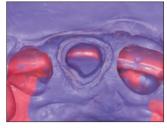
1. Start by applying wash material around outer edges of preparation.



3. Insert tray and make impression.



2. Cover preparation in wash material.



4. Chromaclone PVS 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	REGULAR	2:30 mins	2:30 mins	5:00 mins
BODY	FAST	1:15 mins	1:30 mins	2:45 mins
MEDIUM	REGULAR	2:30 mins	2:30 mins	5:00 mins
BODY	FAST	1:15 mins	1:30 mins	2:45 mins
HEAVY	REGULAR	2:30 mins	2:30 mins	5:00 mins
BODY	FAST	1:15 mins	1:30 mins	2:45 mins
PUTTY	FAST	1:30 min	3:00 mins	4:30 mins
BITE REGISTRATION	FAST	0:20 min	0:70 mins	1:30 mins

	Regular 2pk	Fast 2pk
50 ml Super Light		7601
50 ml Light	5030	5031
50 ml Medium	5020	5021
50 ml Heavy	5010	5011



2	Χ	50	ml	cart	ridg	jes	
0	Χ	Еа	Mi.	xing/	(Inti	a0ral	tips

	Regular 10pk	Fast 10pk
50 ml Super Light	_	_
50 ml Light	5032	5033
50 ml Medium	5022	5023
50 ml Heavy	5012	5013







2 x 50 ml cartridges 12 x Mixing tips



### Chromaclone® PVS Accessories

5040 **Chromaclone PVS Putty** 1 x Each 250 g base and 250 g catalyst

2 x Scoops



5101 Tray Adhesive 10 ml Bottle 1pk



# **ORTHODONTICS**

VALO Ortho
VALO Ortho Cordless
Gishy Goo
Lumaloc + Emiluma
Opal Etch
Opal Band Cement
Opal Seal
Opal Bond
Opal Bond Flow
Opal Bond Flow
Opal Bond MV
Tips





# ORTHODONTICS















"The VALO light is a fantastic piece of equipment. Clinicians no longer have to choose between normal output, high-intensity output, or the power of a PAC light, because the VALO light offers all three in one lightweight, compact, durable unit. The VALO light's ability to produce the greatest amount of energy at distances up to 10 mm from the tooth is just amazing. I have been using this light for some time and would not want to be without it."

—DR. JOHN KANCA, DDS — MIDDLEBURY, CT

- 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
- Intuitive timer controls are easy to operate and user-friendly
- Highly efficient LEDs keep the wand body cool to the touch
- $\bullet$  Extra-durable Kevlar  $^{@2}$  cord provides continuous power, eliminating the need for charging
- Quick-disconnect feature makes it easy to detach the cord and move the light without having to unplug it from the wall

VALO Ortho 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-cured dental materials. This intensity will also penetrate porcelain and is capable of curing underlying resin cements. The VALO Ortho 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.



The Black Light lens is used to detect fluorescent particles in resins for easy differentiation from natural enamel.



The Black Light lens magnetically attaches to the VALO Ortho light.

5940	VALO Ortho Corded Kit  1 x VALO Ortho LED curing light  7' cord  1 x Power supply with universal plugs  6' cord  1 x Handpiece bracket holder  1 x Light shield  1 x Black Light lens  50 x Barrier sleeves
5939	Black Light Lens 1pk
5930	VALO Power Supply - 6' cord
5933	VALO Power Supply - 16' cord
4668	VALO Barrier Sleeves 100pk
5935	Light Shield 1pk
1667	Mounting Bracket 1pk
508	Blue Light Blocking Glasses 1pk

<sup>1.</sup> realityesthetics.com 2. Trademark of a company other than Ultradent. \*Awards given to the traditional VALO curing light. The VALO Ortho curing light meets the same rigorous standards of quality and performance.



















- 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
- Intuitive timer controls are easy to operate and user-friendly
- Highly efficient LEDs keep the wand body cool to the touch
- Battery-operated, cordless wand provides optimal convenience and flexibility
- Rechargeable batteries are environmentally responsible, safe, and inexpensive

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.

# ORTHODONTICS (







The customary two-position curing as shown above 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, 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.

5942	VALO Ortho Cordless Kit  1 x VALO Ortho Cordless LED curing light 4 x Rechargeable batteries 1 x Battery charger 1 x Charging unit power supply 1 x Handpiece bracket holder 1 x VALO Cordless Light Shield 1 x Black Light lens 50 x Barrier sleeves
5939	Black Light Lens 1pk
5961	VALO Cordless Charging Unit Power Supply
5962	VALO Cordless Battery Charging Unit 1pk
5963	VALO Cordless Rechargeable Batteries 2pk
4667	VALO Cordless Barrier Sleeves 100pk
5929	VALO Cordless Light Shield 1pk
508	Blue Light Blocking Glasses 1pk

95

<sup>1.</sup> realityesthetics.com \*Awards given to the traditional VALO curing light. The VALO Ortho curing light meets the same rigorous standards of quality and performance.

# **ORTHODONTICS**

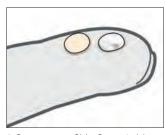
POLYVINYL SILOXANE ELASTOMER





- Reduces costly emergency appointments
- Remains in place better than wax
- Provides lasting comfort for patients' lips, cheeks, and tongue

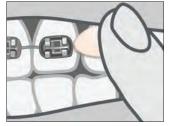
Gishy Goo material is a specially formulated polyvinyl siloxane elastomer that helps patients get comfortable with orthodontic appliances such as brackets, lingual braces, molar tubes, fixed and functional appliances, mouthguards, and other applications where soft tissues can be protected.



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







- Materials chemically cure together to create a single tray with a soft interior
- Made of transparent material that allows brackets to be light cured through indirect bonding trays
- Unique formulations allow both products to remove cleanly without crumbling
- Easy-to-use cartridges fit in a standard impression material dispensing gun
- Supported by Dr. Richard P. McLaughlin and the developers of the Quick IDBS™—Drs. Masatada Koga, Kazuya Watanabe, and Takako Koga

Essential tools for indirect orthodontic bonding, Emiluma and Lumaloc indirect bonding materials are made of transparent silicone that allows quick and precise delivery to the arch.

Emiluma material is soft enough to remove indirect trays without debonding brackets yet firm enough to maintain accurate bracket positioning. Lumaloc material cures stiff to ensure proper tray fit and precise bracket placement, yet it's still easy to shape, mold, and trim.

#### 500-088

Lumaloc Kit

2 x 50 ml cartridges 12 x Tips



### 500-080

**Emiluma Essentials Kit** 

1 x Dispensing gun 3 x 50 ml cartridges 30 x Tips



500-081

**Emiluma Kit** 

2 x 50 ml cartridges 20 x Tips



5100

Dispensing Gun 1pk



### Emiluma Material Lumaloc

### Lumaioc Material

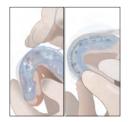




1. Take impression and bond brackets on stone model.



2. Express Emiluma material onto model in a continuous stream, with a bead-sized amount over each bracket. Immediately follow with placement of Lumaloc material.



3. Wrap the model in plastic film (recommended width: 25 mm, length: 250 mm) while Lumaloc material sets up. Surround the facial wall of the tray and cover the occlusal surface.



5. When Lumaloc material is set, remove plastic film from model. Trim excess material around tray.



6. Place model in water for 30 minutes.



7. Starting with the posterior, remove the tray from model, ensuring that brackets remain in the tray.



8. Clean bracket base, removing all debris but leaving adhesive.



9. Mark the center of the tray to ease placement. Proceed with bracket placement.

# ORTHODONTICS

35% PHOSPHORIC ACID GEL



Where Strong Bonds Begin







- Penetrates smallest fissures but won't migrate on a vertical surface
- Precise placement
- Rinses cleanly—leaves no residue

### 500-012 Opal Etch Kit

4 x 1.5 g Opal Etch syringes 20 x Opal Blue tips



500-013

Opal Etch Syringe 20pk

1.2 ml syringe



500-091

Opal Etch Syringe 50pk

1.2 ml syringe



500-090

Opal Etch IndiSpense Syringe 1pk

30 ml syringe



1863

Opal Ortho Empty Syringe 20pk

1.2 ml syringe



# opal band cement

TRIPLE-CURE ORTHODONTIC BAND CEMENT



Opal Band Cement's bright blue chemistry is easy to see whether you're applying or removing it.





- Triple-cure formula provides optimum bond strength for both regular banding and high-force appliance banding
- Convenient syringe delivery system offers superior control and no mixing of liquid and powders
- Glass ionomer fillers release fluoride for additional protection
- Bright blue chemistry facilitates easy placement, cleanup, and removal

Opal Band Cement eliminates the need to have one cement for regular banding and a different cement for high-force appliance banding. Its unique triple-cure formula creates optimal bond strengths for both. Opal Band Cement also contains glass ionomer fillers that react with moisture to strengthen the cure and release fluoride for additional health benefits.

Opal Band Cement comes in a convenient dual-barrel syringe that mixes the chemistry for you. It creates the ideal viscosity for easy placement and removal, and it makes application simple and mess free. No more mixing powders and liquids.



500-086

Opal Band Mixing Tips 50pk



# opalseal

FLUORIDE-RELEASING AND RECHARGING PRIMER AND SEALANT



### **Revolutionizing Orthodontic Bonding**



- Releases and recharges fluoride1
- 38% filled with glass ionomer fillers plus nanofillers for long-lasting strength
- Nonyellowing and stain resistant
- Drying agent seeks out moisture and draws resin in, ensuring superior bonding and fluoride uptake
- Fluorescent properties make reapplication and removal easy and convenient

Opal Seal 38%-filled primer and sealant is used to prepare etched enamel for orthodontic bonding. Apply a thin layer of Opal Seal to etched enamel prior to bracket placement to enhance bonding and recharge fluoride uptake.1



Healthy enamel after orthodontic treatment with Opal Seal primer and sealant.

#### 500-060 **Opal Seal Intro Kit**

1 x 1.7 g Opal Seal syringe 1 x 1.5 g Opal Etch syringe 10 x Metal Opal Seal tips 10 x Opal Blue tips



#### 500-061 **Opal Seal Kit**

4 x 1.7 g Opal Seal syringes 60 x Metal Opal Seal tips



#### 500-062 Opal Seal Syringe 20pk

1.7 g syringes



#### 500-040 **Opal Seal Adhesives Trial Kit**

1 x 1.7 g Opal Seal syringe 1 x 0.9 g Opal Bond MV syringe 1 x 2.3 g Opal Bond Flow syringe 1 x 1.5 g Opal Etch syringe

20 x Metal Opal Seal tips 20 x Opal Blue tips 20 x Opal Bond Flow tips

#### 500-063 **Opal Seal Trial Syringe**

1 x 0.6 g Opal Seal syringe 3 x Metal Opal Seal tips



### UltraSeal XT® hydro Black Light Keychain



35551 UltraSeal XT hydro Black Light Keychain 1pk



1. Data on file.

# ORTHODONTICS

### Opal<sup>®</sup> Bond™

LIGHT-CURED BONDING ADHESIVE FOR METAL AND CERAMIC APPLIANCES







- High viscosity allows easy positioning and flash removal
- Super tacky, viscous formula helps eliminate bracket drift while providing ample working time
- Convenient, familiar compule delivery



# opal bond flow blue







- Ideal for permanent retainers, bite ramps, occlusal buildups, and indirect bonding
- Optimal flow characteristics ease delivery and placement and help prevent slumping
- · Contains a micro-nano hybrid filler for durable strength and wear
- Available in two shades: A2 and Blue
- Compatible with any light-cured bonding system
- Smooth finish and kind to opposing enamel



### 500-096 Opal Bond Flow A2 Sample Kit

1 x 0.8 g Opal Bond Flow A2 syringe 3 x Opal Bond Flow tips



### 500-042 Opal Bond Flow Sample Kit

1 x 0.8 g Opal Bond Flow A2 syringe 1 x 0.8 g Opal Bond Flow Blue syringe 10 x Opal Bond Flow tips



### 500-041 Opal Bond Flow A2 Syringe Kit

2 x 2.3 g Opal Bond Flow A2 syringes 20 x Opal Bond Flow tips



### 500-082 Opal Bond Flow Blue Syringe Kit

2 x 2.3 g Opal Bond Flow Blue syringes 20 x Opal Bond Flow tips



100



# opal bond MV

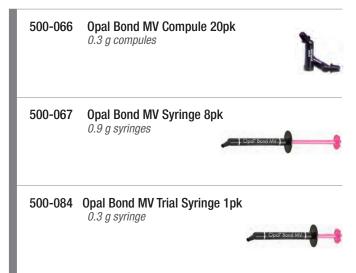




- Medium viscosity
- Butters easily into bracket mesh and minimizes drift upon placement
- Proprietary loading process nearly eliminates "run-on"
- Ergonomic contra-angle syringe delivers adhesive with precision and economy



Visibility under UV black light facilitates easy removal.





# **ORTHODONTICS**



### Metal Opal® Seal Tip

• Soft fibers are ideal for applying a consistent, even, thin layer to etched enamel

Metal cannula provides ideal flow and ease of expression

Designed for: Opal® Seal primer/sealant.

LOK-TITE°	20pk	100pk	500pk
Metal Opal Seal 19 ga	500-094	500-095	500-097



### Opal® Bond Flow Tip

• Large-gauge cannula enables consistent flow

Standard flowable composite delivery tip

Designed for: Opal® Bond Flow.

LOK-TITE <sup>®</sup>	20pk	100pk	500pk
Opal Bond Flow 20 ga	500-079	_	_



### Opal® Band Cement Mixing Tip

Mixes and delivers in one action



Designed for: Opal <sup>®</sup> Band <sup>™</sup> Ceme	1		
LOK-TITE°	20pk	100pk	500pk
Opal Band Cement	500-086	_	_



### Opal® Seal Tip

- Soft fibers are ideal for applying a consistent, even, thin layer to etched enamel
- Specially designed to deliver filled resins with internal helical channel and ridge

Designed for: Opal® Seal.





### Opal® Blue Tip

- Provides pinpoint precision
- Narrow cannula accurately delivers materials

Designed for: Opal® Etch.





## **PREPARE**

Sable Seek

Seek

Ultracare

PropGard

DermaDam

DermaDam Synthetic

OraSeal

Consepsis Scrub

STARbrush

**Omni-Matrix Sectional** 

Omni-Matrix

V3 Sectional Matrix System

SuperCurve Matrix

ClearMetal Matrix

V3 Tab-Matrix

Tab-Matrices

Pin-Tweezers

Forceps

InterGuard

WedgeGuard

AdaptiVe Wedge

aupare meage

Wave-Wedge

V-Wedge







# Sable<sup>™</sup> Seek<sup>®</sup> and Seek<sup>®</sup> CARIES INDICATORS











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- Stains demineralized dentin
- Provides precise, mess-free delivery
- Available in dark green for working near pulp
- Aids in identifying root canal orifices

Sable Seek caries indicator contains FD&C dyes, and Seek caries indicator contains D&C dyes in a glycol base. Both are used to stain carious dentin.

Seek and Sable Seek caries indicators stain demineralized dentin in difficult-to-see places—for example, under the overhanging enamel of Class I, II, or III preparations, or along the DE junction of the preparation. Green Sable Seek caries indicator helps prevent overexcavating deep caries, which can lead to pulp exposure. Nonmineral dentin should be removed to improve the bond strength of the entire restoration, and is easily visible on dark dentin and provides a fast, effective way to locate calcified root canal orifices.



1. Apply Sable Seek indicator with Black Mini Brush tip.



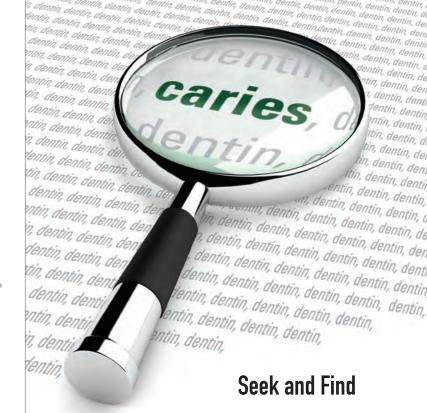
2. Rinse with air/water and suction. Carious dentin is easily identified.



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 complete caries removal.





1. realityesthetics.com













- 20% benzocaine for fast numbing of soft tissues
- Four delicious flavors: Walterberry, Bubble Gum, Cool Mint, and Orange Cream

Ultracare anesthetic gel is a delightfully flavored 20% benzocaine gel that provides rapid, profound topical anesthesia. Deliver it via syringe using the Micro Capillary tip or Blue Micro tip to increase patient comfort during subgingival scaling and root planing.





Ultracare gel can be delivered directly onto a cotton swab or expressed from a syringe.





ıvılcro Blue Capillary™ Tip Micro® Tip page 129 page 129

983 3594

**Ultracare Walterberry Kit Ultracare Orange Cream Kit** 

20 x 1.2 ml syringes 20 x 5 mm Micro Capillary tips 20 x Blue Micro tips



30 ml Bottle	1pk
Walterberry	301
<b>Bubble Gum</b>	302
Cool Mint	308
Orange Cream	3595



30 ml IndiSpense Syringe	1pk
Walterberry	359
Bubble Gum	357
Orange Cream	3596



#### 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 develops: • 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 for children under 2 years of age.

1. realityesthetics.com.



### **PropGard®**

MOUTH PROP





- Use soft when some jaw relief is needed
- Use firm when optimal opening needs to be maintained

PropGard mouth prop's wedge design prevents contamination from tongue and mouth closure and also helps protect the tongue from trauma. Scrub with a brush, disinfect, and cold sterile (do not autoclave).



PropGard mouth prop protects adjacent teeth and tongue.

4100 PropGard Kit

5 x Each PropGards large yellow and regular purple 10 x Each Tongue guards left and right





	Regular 5pk	Large 5pk
Soft Yellow	4105	4103
Firm Purple	4101	4104

**Tongue Guard 10pk** 5 x Each right and left



### 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.





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.

### Zero sensitizing proteins

299 DermaDam Medium Synthetic 0.20 mm 20pk 6" x 6" (15 cm x 15 cm)



1. realityesthetics.com.

# OraSeal® CAULKING AND PUTTY











- 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.



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.

Use OraSeal Caulking material when an adequate seal is difficult to obtain with compromised teeth or roots. OraSeal Caulking material 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. Also used to fill in screw holes on implant impressions prior to making impressions.

#### **PROCEDURE**







Apply OraSeal Caulking material with Black Mini® or White Mac delivery tips to prevent leakage of rubber dam during treatment.<sup>2</sup> Shape with wet gloved finger, wet cotton swab, or instrument. 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 Kit

2 x 1.2 ml OraSeal Caulking syringes 2 x 1.2 ml OraSeal Putty syringes

4 x Black Mini tips 20 x White Mac tips



351 OraSeal Caulking Syringe 4pk 353 OraSeal Putty Syringe 4pk

1.2 ml syringes



354 OraSeal Caulking Syringe 20pk 355 OraSeal Putty Syringe 20pk

1.2 ml syringes



<sup>1.</sup> realityesthetics.com. 2. Cohen S, Burns RC. Pathways of the Pulp. 7th ed. St. Louis, MO: Mosby-Year Book; 1998-193-124



## Consepsis® Scrub

CHLORHEXIDINE ANTIBACTERIAL SLURRY











page 130

- Reduces post-op sensitivity
- Does not compromise bond strength
- Comes in a nonsplatter formula
- Use to clean prior to crown cementation or around ortho brackets
- Use with STARbrush® brush prior to sealant placement

Consepsis Scrub antibacterial slurry is a lightly flavored 2.0% chlorhexidine gluconate (relative to liquid component) antibacterial scrub. Instead of powdered pumice, which may contain several trace impurities from volcanic ash, Consepsis Scrub slurry uses inert, finely ground Pyrex®\* glass as an abrasive scrub.

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. Scouring with a quality antibacterial prior to restoring minimizes the potential for post-op sensitivity associated with an influx of microorganisms into dentinal tubules.

Note: Evidence demonstrates that you can further reduce post-op sensitivity by sealing dentin before cementation. Use PermaFlo® DC luting resin.

See page 61 for Consepsis® chlorhexidine antibacterial solution.





Use Consepsis Scrub antibacterial slurry with a rubber cup or STARbrush® intercoronal brush to remove residual cement.





Afte



\* Trademark of a company other than Ultradent. 1. realityesthetics.com.

# STARbrush® INTERCORONAL 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

1091	STARbrush 30pk	
1092	STARbrush 50pk	
1093	STARbrush 100pk	

1. realityesthetics.com.



## **Clinical Pointer**

#### PROBLEM:

Stain under hydrophobic provisional cement

#### **SOLUTION:**

Use sealing provisional hydrophilic cements (e.g., UltraTemp® temporary luting material)

#### CHEMISTRIES (THE "WHYS"):

- 1. Nonsealing cements allow saliva and bacteria to move between the temporary and preparation.
- 2. Coagulum within cut tissues is a source of iron, which reacts with the hydrogen sulfide gas (rotten egg gas,  $\rm H_2S$ ) produced by anaerobic bacteria in this septic environment. The reaction yields ferric sulfide, the harmless yet annoying dark surface stain shown on the right. This stain can occur to a lesser degree from the natural iron in blood. Additionally, nonsealing provisionals are problematic, as saliva and/or bacteria removes the smear layer, opening tubules to bacteria.  $^1$

#### **HOW TO PREVENT:**

Use a quality sealing provisional cement like Ultradent's non-eugenol, hydrophilic, polycarboxylate, paste-to-paste UltraTemp temporary luting material.

Similar staining can occur even under definitive direct or indirect restorations if contamination is on the preparation prior to bonding. Scour and etch prior to dentin bonding agent application. For scouring, we recommend Consepsis Scrub slurry with a STARbrush® intercoronal brush.

#### CASE 1



Two weeks earlier upon preparation, ViscoStat® hemostatic with Dento-Infusor® tip was used to arrest bleeding. Provisional crowns were cemented with a popular NON-sealing, hydrophobic, resin-based temporary cement.

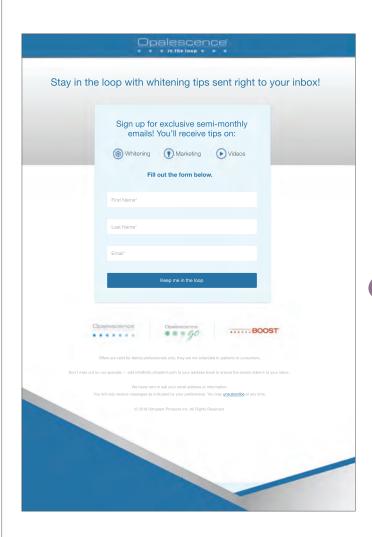
#### CASE 2



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 using a hydrophilic provisional cements such as UltraTemp® temporary luting material.

# Ultradent's e-newsletters

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Visit ultradent.com/in-the-loop to sign up today!



# Omni-Matrix<sup>™</sup> Sectional

MATRICES AND RETAINER CLAMPS





- Creates restorations with natural anatomy
- Thin, flexible bands easily conform to any surface
- No special matrix pliers required
- One clamp fits all teeth
- Clamps are stackable

Omni-Matrix Sectional bands conform to the natural anatomy of the tooth, while the clamp tines provide multiple contact points. The specialized band contour ensures the edge of the matrix will not catch on the gingival margin during placement. The retainer clamps stack easily, allowing both sides of the tooth to be held in a matrix at the same time. The retainer can be placed with any rubber dam forceps or sectional matrix forceps. The bands are interchangeable with all brands of sectional retainers.

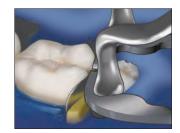
## **INSTRUCTIONS**



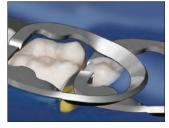
1. Place matrices then wedge.



3. Begin restoration.

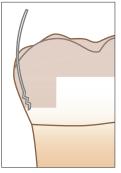


2. Place retainer clamp.

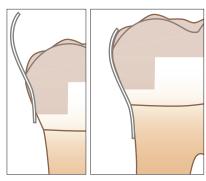


Optional: Stack multiple clamps.

#### CONSTANT RADIUS VS. REVERSE CURVE



Traditional sectional matrices often catch on the gingival margin. This prevents you from being able to position the matrix readily and often deforms it.



The Omni-Matrix Sectional system was created with the natural contour of the tooth in mind, eliminating the problems experienced with traditional systems.



- 1. Clamp
- 2. Band Regular
- 3. Band Large
- 4. Band Regular Extended
- 5. Band Large Extended

318 Omni-Matrix Sectional Kit
4 x Matrix clamps
40 x Each Regular, Regular Extended
Large, and Large Extended



317 Omni-Matrix Sectional Clamps 4pk



304 Regular Matrix Bands 40pk 305 Regular Extended Matrix Bands 40pk



309 Large Matrix Bands 40pk316 Large Extended Matrix Bands 40pk















"Fast, easy, convenient, disposable! What else could you ask for?"
—DR. GEORGE FREEDMAN



	Wingless 48pk	Winged 48pk
6.5 mm001" (.025 mm)	7701	8801
6.5 mm0015" (.038 mm)	7702	8802
5.2 mm0015" (.038 mm)	7704	8804



1. realityesthetics.com.





# Introducing the all NEW Omni-Matrix!



- Unmatched body design is ideal for both single and simultaneous restorations
- Innovative shape allows superior procedural visibility and patient comfort
- Ultra-thin burnishable stainless steel adapts to all preparations
- Unique winged and wingless styles meet individual case needs
- Disposable design saves you time and money

The new 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.

ultradent.com 111

# **PREPARE**



SECTIONAL MATRIX SYSTEM









- Has wide applications for sectional matrix use
- Consistently achieves accurate contacts
- Creates predictable, tight contacts
- Ring and wedge system combine to seal and shape the restoration to minimize required finishing
- System is among the simplest and most accurate matrix solutions on the market
- Can be used on molars, premolars, and primary teeth

The contoured shape of the SuperCurve Matrix saves you time and allows you to achieve even better restorations, and the non-stick coating makes removing the matrix easier and faster. It's the perfect system for any Class II restoration.

#### WHY CHOOSE A SECTIONAL MATRIX?



- · User-friendly system
- Natural contours
- Tight, anatomically correct contact points at the correct height of the contour



- · Large food trap below
- · Fails to restore proximal anatomy
- . Thin contact at the marginal ridge
- · Likelihood of fracture, occlusal interference, recurrent caries, and periodontal disease

#### **WIDE BOX**





3. Completed restoration.

2. Ring and matrix placed.

#### MOD



1. Rings and matrices placed.





3. Prior to finishing.



4. Completed restoration.

#### 403316

### V3 SuperCurve Kit

1 x Universal V3 Ring

1 x Narrow V3 Ring

20 x SuperCurve Matrices 3.5 mm

20 x SuperCurve Matrices 4.5 mm

20 x SuperCurve Matrices 5.5 mm

20 x SuperCurve Matrices 6.5 mm 20 x SuperCurve Matrices 7.5 mm

25 x Wave-Wedges Small

25 x Wave-Wedges Medium

25 x Wave-Wedges Large

2 x Pin-Tweezers

1 x Forceps



#### 403301

#### V3 Matrix Kit

1 x Universal V3 Ring

1 x Narrow V3 Ring

25 x V3 Tab Matrices 3.5 mm

25 x V3 Tab Matrices 4.5 mm

25 x V3 Tab Matrices 5.5 mm

25 x V3 Tab Matrices 6.5 mm

25 x V3 Tab Matrices 7.5 mm

25 x Wave-Wedges Small

25 x Wave-Wedges Medium

25 x Wave-Wedges Large

2 x Pin-Tweezers

1 x Forceps



403341 V3 Ring Variety 2pk

1 x Each Universal Green & Narrow Yellow

403342 V3 Ring Universal Green 2pk

V3 Ring Narrow Yellow 2pk 403343



1. realityesthetics.com.









- 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

#### 403402

#### SuperCurve Non-Stick Matrix Intro Kit

10 x SuperCurve Matrices 3.5 mm (gray) 25 x SuperCurve Matrices 4.5 mm (green) 25 x SuperCurve Matrices 5.5 mm (blue)

25 x SuperCurve Matrices 6.5 mm (maroon)



Matrices	50pk	90pk
Gray 3.5 mm	403417	403403
Green 4.5 mm	403418	403404
Blue 5.5 mm	403419	403405
Maroon 6.5 mm	403420	403406
Gray 7.5 mm	403412	



## ClearMetal™ Matrix





- Transparent matrix band has the advantages of metal malleability
- Matrix can be used with the V3 Ring and AdaptiVe Wedge for precise anatomy and a "clear" advantage
- Anatomical design produces precise contours, saving finishing time
- Greater matrix curvature hugs tooth for stability during placement
- Matrix wings won't get in the way during ring placement
- Non-stick finish makes matrix removal easy

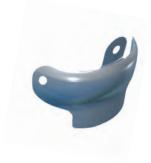
Matrix	50pk
4.5 mm	403328
5.5 mm	403329
6.5 mm	403330



## 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

The V3 Tab-Matrix has a pronounced ridge on the occlusal margin, designed to produce natural-looking Class II composite restorations.

Tab-Matrix	50pk	100pk
3.5 mm	403388	403387
4.5 mm	403372	403375
5.5 mm	403373	403376
6.5 mm	403374	403377
7.5 mm	403398	403397



## **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

Tab-Matrices	100pk
4.5 mm	402072
5.5 mm	402073
6.5 mm	402074





# 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





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



## InterGuard®

**PROXITECTOR** 



20181





The InterGuard proxitector ensures a faster, safer preparation by protecting the adjacent tooth from iatrogenic damage.<sup>2</sup> Stable curls at each end leave transition angles clear for full access. The InterGuard proxitector 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 proxitector.

"InterGuard proxitector 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	8
4016 4017	InterGuard 4.0 mm 10pk InterGuard 5.5 mm 10pk	3-3
4011 4012	InterGuard 4.0 mm 50pk InterGuard 5.5 mm 50pk	3-5

 realityesthetics.com. 2. Ovist V, Johannessen L, Bruun M. Progression of aproximal caries in relation to iatrogenic preparation damage. J Dent Res. 1992;71(7):1370-3.









- Prevents bur damage to adjacent tooth
- Saves time and protects gingival papillae
- Detachable guard leaves wedge in place after tooth prep



403386

WedgeGuard Intro Kit

25 x WedgeGuards Small (white) 25 x WedgeGuards Medium (pink)

25 x WedgeGuards Large (purple)



WedgeGuard	50pk
White Small	403383
Pink Medium	403384
Purple Large	403385



# AdaptiVe Wedge™





- Transparent material allows curing light to pass through
- Wedge is suitable for all Class II cases, whether or not the cure-through option is used
- Notches enhance flexibility for precise matrix adaptation and retention

V4 Wedge	100pk
Clear White	403324
Medium Pink	403325
Large Purple	403326
Extra-Large Gray	403327



## 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



Stacked wedges: One wedge placed from buccal and one from the lingual.

Wave-Wedge	100pk
White Small	402066
Pink Medium	402065
Purple Large	402064



## V-Wedge

DISPOSABLE ANATOMICAL WEDGE





- Self-guiding and stackable making them easy to place
- Adapt to the contours of the interproximal space
- Accommodates gingival tissue
- Strong, anatomical design
- Rigid enough to provide tooth separation

V-Wedge	100pk
Small Hard	402059
Small Soft	402056
Medium Hard	402058
Medium Soft	402055
Large Hard	402057
Large Soft	402054



Ultimately you're creating a better

# restoration, and you feel less stress. Casyline Contains a Botter restoration, and you feel less stress. t's simp It's consistent.

Dr. Patrick Yoshikane

Hear Dr. Yoshikane's story about switching from tofflemire-style bands to the Triodent matrix system at ultradent.com/triodent



Innovative. Simple. Smart.





# PREVENT AND HYGIENE

UltraSeal XT plus
PrimaDry
UltraSeal XT hydro
Ultrapro Tx Air Handpiece
Ultrapro Tx Disposable Prophy Angles
Ultrapro Tx Prophy Paste
Enamelast
Ultradent Universal Dentin Sealant
Opalpix

Opalescence Whitening Toothpaste

**Opalescence Toothbrushes** 





# PREVENT AND HYGIENE

# UltraSeal XT<sup>®</sup> plus<sup>+™</sup>

HYDROPHOBIC PIT AND FISSURE SEALANT













- High retention rate<sup>2</sup>
- Direct delivery into difficult-to-access areas
- Bubble-free, drip-free placement
- High marginal retention prevents microleakage
- Penetrates deepest pits and fissures
- Four shades: Opaque White, Clear, A1, and A2

UltraSeal XT plus hydrophobic pit and fissure sealant is a light-cured, radiopaque, fluoride-releasing composite sealant. It is stronger and more wear resistant because it is a 58%-filled resin and has less polymerization shrinkage than competitive products. The spiral in the Inspiral Brush tip causes shear thinning of the filled, thixotropic resin, reducing its viscosity as it is placed. The resin firms up when shear thinning ceases and placement is complete, preventing the resin from running before it can be light cured. Using PrimaDry® drying agent with UltraSeal XT plus sealant enhances penetration into pits and fissures³ by eliminating moisture that can cause failure in hydrophobic sealants.

#### **BEFORE AND AFTER**



Before.



Before.



After UltraSeal XT plus sealant.



After UltraSeal XT plus sealant.

## THE LEADER IN SEALANTS SINCE 1998!\*

#### FIVE SIMPLE STEPS



1. Etch for 30 seconds on uncut enamel, 15 seconds on cut enamel. Rinse.



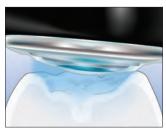
2. Remove visible moisture. PrimaDry® drying agent will desiccate.



3. Apply PrimaDry agent for 5 seconds with Black Micro® FX® tip, then air dry.



4. Place UltraSeal XT plus sealant.



5. Cure for 3 seconds with VALO® curing light on Xtra Power mode or 10 seconds on Standard Power mode.

"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."

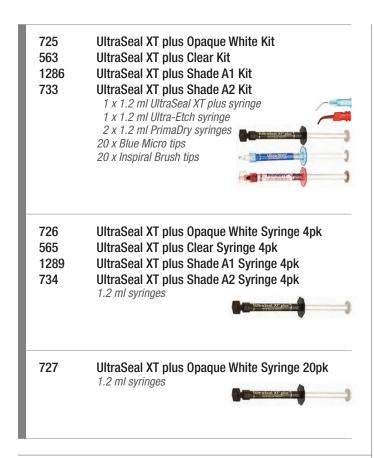
--- DR. DAVID GOLDSTEIN -- ORLANDO. FL

"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

\*Reality Ratings. Reality. Reality Publishing Company 1998–2017. 1. realityesthetics.com. 2. Boksman L, Carson B. Two-year retention and caries rate of UltraSeal XT and Fluorshield light-cured pit and fissure sealants. Gen Dent. 1998;46(2):184-7. 3. Adams TJ, Frazier KB, Browning WD. Effect of drying agent use on sealant penetration [IADR abstract 363]. J Dent Res. 2000;79(suppl):189.





# PrimaDry® DRYING AGENT







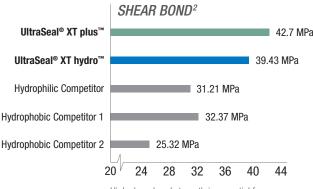
- Black Micro FX® Tip page 128
- For use with UltraSeal XT plus pit and fissure sealant
- Reduces microleakage in hydrophobic sealants

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 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. Do not use on dentin.

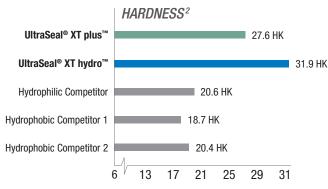


# UltraSeal XT°plus<sup>+™</sup>and UltraSeal XT°hydro<sup>•™</sup>

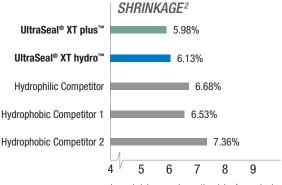
## PHYSICAL PROPERTY COMPARISON



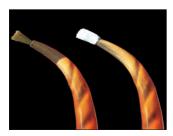
High shear bond strength is essential for retaining the sealant under normal use.

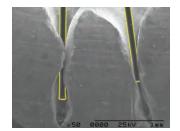


High hardness indicates a strong, durable sealant that won't break away or wear down.



Low shrinkage reduces the risk of marginal gaps which can lead to microleakage.





With its adjustable fibers and helical channel, the Inspiral® Brush tip is designed to optimally deliver UltraSeal XT sealants.

# PREVENT AND HYGIENE

# UltraSeal XT<sup>®</sup>hydro → Maro →

HYDROPHILIC PIT AND FISSURE SEALANT















- Hydrophilic
- Advanced adhesive technology
- Fluoresces under black light to ensure sealant is still in place
- Highly filled resin 53%
- Thixotropic/ideal viscosity
- Two shades: Opaque White and Natural

UltraSeal XT hydro hydrophilic pit and fissure sealant is a light-cured, radiopaque, fluoride-releasing composite sealant. It is stronger and more wear resistant because it is a 53%-filled resin and has less polymerization shrinkage than competitive products. The spiral brush action of the tip causes shear thinning of the thixotropic UltraSeal XT hydro sealant. The resin stops flowing when shear thinning ceases and placement is complete, 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

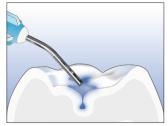




**Before** 

After 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



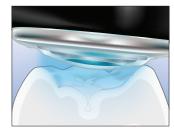
1. Ftch for 30 seconds on uncut enamel. 15 seconds on cut enamel. Rinse.



2. Remove visible moisture.



3. Place UltraSeal XT hydro sealant.



4. Cure for 3 seconds with VALO® LED curing light on Xtra Power mode or 10 seconds on Standard Power mode.

"Since I have had such great success with Opalescence® Boost® and Opalescence® PF whitening, I also ordered the UltraSeal XT hydro sealants. 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, VIRGINIA

#### MARGINAL RETENTION AND MICROLEAKAGE

#### UltraSeal XT hydro Sealant





No microleakage.

Sealed margins.

#### Competitor Hydrophilic Sealant



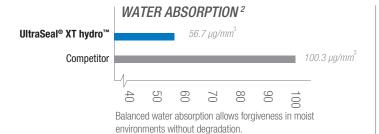




Peeling from margins.

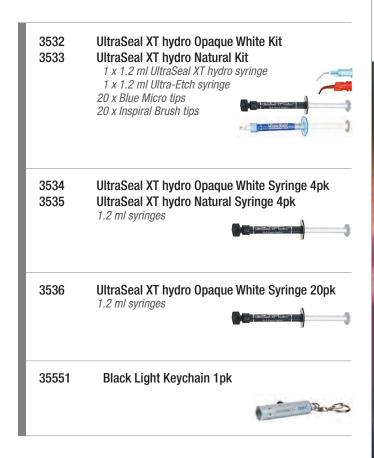
# PREVENT AND HYGIENE







No degradation as a result of balanced water absorption.



Curing Lights, see pages 67–69.



of the Ultrapro® Tx family













- Lightweight—2.2 oz to reduce hand and arm fatigue
- Ergonomically shaped and vibration-free for maximum comfort
- Swivels 360° for easy rotation
- Soft-start motor to minimize splatter
- Cleans effectively at a maximum speed of 4,000 RPMs
- Universal E-type motor for multifunctionality
- Compatible with nearly all disposable prophy angles

Featuring an ergonomic handpiece, innovative prophy angle cup designs, and splatter-free prophy pastes, our next generation 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	o much
8506	Ultrapro Tx Air Motor	
8503 8504 8505	Ultrapro Tx Air Green Nose Cone Ultrapro Tx Air Pink Nose Cone Ultrapro Tx Air Blue Nose Cone	
8316	Universal Lubricating Oil - 0.5 oz Bottle	<b>D</b>

1. realityesthetics.com.









- Innovative cup design for reduced splatter and efficient cleaning
- Designed for better access and improved visibility, with 20% shorter head and 25% slimmer neck (skini angles)
- All designs feature optimal flare
- Improved outer ridges for improved interproximal cleaning and available in right- or contra-angle designs (extra and skini angles)
- 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 will have a comfortable experience. With an advanced cup design both inside and out, the extra and skini angles are built to clean better than ever.

original	144pk	500pk
Soft	8308	8318
Firm	8307	8317



#### 8356 Ultrapro Tx Tapered Brush 100pk



extra	144pk	500pk
Soft	8340	8342
Firm	8341	8343



extra CONTRA	144pk	500pk
Soft	8344	8346
Firm	8345	8347



	skini	144pk	500pk
LE R	Soft	8348	8350
STERILE R	Firm	8349	8351



	skini CONTRA	144pk	500pk
IE R	Soft	8352	8354
STERILE R	Firm	8353	8355



# PREVENT AND HYGIENE



#### SKINI HEAD COMPARISON







20% shorter head





































- Contains 5% potassium nitrate and 1.23% fluoride ion
- Splatter-free formula
- Rinses easily and completely to eliminate residual grittiness
- Gluten free



• Pure is free of fluoride, potassium nitrate, flavors, dyes, and oil Note: Use Consepsis Scrub prior to bonding procedures.

2 g	Fine 200pk	Medium 200pk	Coarse 200pk
Cool Mint	8309	8310	8311
Walterberry	8320	8312	8313
Bubble Gum dye-free	8321	8314	8315
Orange Dreamsicle	8322	8323	8324
Variety W, OD, BG	8326	_	_
Variety W, OD, CM	_	8327	_
Pure	_	8325	_

# PREVENT AND HYGIENE





















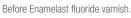
- Patented adhesion-promoting agent for enhanced retention
- Superior fluoride release and uptake
- Smooth, nongritty texture
- Nearly invisible appearance
- · Certified nut free and gluten free

Enamelast fluoride varnish is a flavored, xylitol-sweetened, 5% sodium fluoride in a resin carrier. Its unique formula is made with a patented adhesion-promoting agent for enhanced retention, while providing superior fluoride release and uptake. Available in syringe applications in Walterberry® flavor and unit-dose applications in Walterberry, Orange Cream, Cool Mint, Bubble Gum, and NEW Caramel flavors.

Enamelast fluoride varnish produces a mechanical occlusion of the dentinal tubules in the treatment of tooth hypersensitivity. The AAPD recommends fluoride varnish for use as a preventative adjunct to reduce the risk of caries. The use of fluoride varnish for caries prevention has also been endorsed by the ADA. 4.5

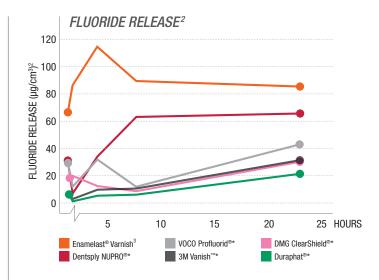
#### BEFORE AND AFTER

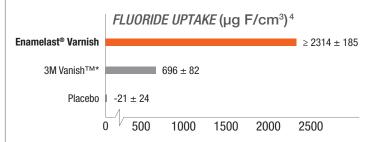






Immediately after applying Enamelast fluoride varnish.







0.4 ml Unit-Doses	50pk	200pk	
Walterberry	4518	4528	63 minustra 53 minustra 63 minustra
Orange Cream	4344	4343	Organism Department of the second
Cool Mint	4353	4352	Secured Secures Secure
Bubble Gum	4363	4362	structure to minima communica
Caramel	4819	4822	ing Princip Princip Princip
50 ea - W, OC, CM, BG		4368	
50 ea - W,CM, BG, C		4821	



<sup>\*</sup> Trademark of a company other than Ultradent. 1. American Academy of Pediatric Dentistry. Policy statement on the use of fluoride. Adopted 1967. Reaffirmed 1977. Revised 2014. Available from http://www.aapd.org/media/Policies\_Guidelines/P\_FluorideUse.pdf. 2. Schemehorn BR. Sound enamel fluoride uptake from a fluoride varnish. 2013. Data on file. 3. Due to formula variations actual results may be greater than represented data. 4. American Dental Association Council on Scientific Affairs. Professionally applied topical fluoride: evidence-based clinical recommendations. *J Am Dent Assoc*. 2006;137(8):1151-9. 5. The use described in the text might not be claimed by the FDA.

# Ultradent® Universal Dentin Sealant

FOR TRANSIENT ROOT SENSITIVITY





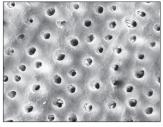


Black Mini

- 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 after root planing or scaling.





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.

Universal Dentin Sealant Syringe 4pk

1.2 ml syringes

Note: Ultradent Universal Dentin Sealant is NOT a bonding agent. For unsurpassed bonding products, see pages 53–54. If base or liner is needed, use Ultra-Blend® plus liner, page 60.

# opalpix TM







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





Use Opalpix interproximal cleaners to clean under and around bonded retainers and brackets.

6600	Opalpix 12pk Each pk contains 32 Opalpix cleaners.	opalpix
5590	<b>Opalpix 100pk</b> <i>Each pk contains 32 Opalpix cleaners.</i>	opalpix

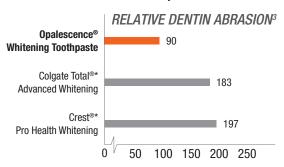
# PREVENT AND HYGIENE



- Unique formulation is ideal for promoting oral health and maintaining bright, white smiles when used daily
- Low abrasion formulation protects enamel while removing surface stains
- Efficient, quick fluoride release
- Available in Original and Sensitivity Relief formula
- Triclosan-free formula
- Cool Mint flavor

Opalescence whitening toothpaste<sup>1</sup> assists in the prevention of dental caries as it helps patients maintain whitened smiles. It is also gentle enough to use every day. The Original formula offers a fresh, Cool Mint flavor patients love, and a high fluoride uptake that promotes oral health. The Sensitivity Relief formula has all the benefits of the original, plus potassium nitrate to help reduce sensitivity.

# Removes surface stains to lighten teeth two shades in just one month!<sup>2</sup>



Opalescence Whitening Toothpaste has lower abrasiveness than other leading whitening toothpastes.<sup>3</sup>



<sup>\*</sup>Trademark of a company other than Ultradent. 1. This toothpaste does not contain peroxide. 2. Gultz J, Kaim J, Scherer W. Whitening efficacy of a whitening toothpaste creme [IADR abstract 2747]. *J Dent Res.* 1998;77(suppl 2):975. 3. Schemehorn BR. Relative dentin abrasion test on dentifrices. Data on file.

## Opalescence® Smilebrushes





- Gentle cleaning for teeth and gingiva
- · Great access for hard-to-reach areas
- Available in pink, green, and blue

5850

Opalescence Smilebrushes Variety 12pk 4 x Each color

The classic.

## Opalescence® Oral Hygiene Brushes





- Comfortable grip
- Integrated tongue cleaner
- Effective plaque and bacteria removal
- Gentle cleaning for teeth and gingiva
- Available in red, purple, green, and blue

5858

Opalescence Oral Hygiene Brushes Variety 12pk 3 x Each color

The advanced design.

# Opalescence® Jr. Smilebrushes





Cushioned head

5855

- Large, easy-to-grip handle
- Gentle cleaning for teeth and gingiva
- · Playful colors and images
- Available in red, green, and blue

Opalescence Jr. Smilebrushes Variety 12pk 4 x Each color

The fun way to brush!

# TIPS AND SYRINGES

#### **RESTORATIVE**

## **SYRINGES**

Black Micro FX Skini Syringe Black Mini **Empty Syringes** Black Mini Brush Syringe Cover

Black Micro

Blue Micro

Blue Mini Dento-Infusor

ExperTemp Mixing

Inspiral Brush

Intraoral Tip

Metal Dento-Infusor

Micro Capillary

Micro 20 ga

Micro 20 ga FX

SoftEZ

SST

Mixing

**IMPRESSIONS** 

NaviTip 31 ga NaviTip FX

**ENDODONTICS** 

Micro Capillary Endo-Eze

Endo-Eze Irrigator

Capillary

NaviTip

Mixing

IntraOral Impression

**Dynamic Mixing** 

#### **ACCESSORIES**

Micro Applicators Mixing Wells Luer Lock Cap Syringe Organizer





# **ULTRADENT® TIPS** DESIGNED TO DELIVER



# Check out our tips with **LOK-T**

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.

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?

Ultradent makes tips designed to deliver each chemistry we create. Whether you're delivering 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 works perfectly with the chemistry it's intended for.

# Black Micro® FX® Tip

- · Accommodates various viscosities
- Flocked tip fans out to spread materials in a thin, uniform layer



# Black Micro® Tip

- Provides pinpoint precision
- Narrow cannula accurately delivers materials

Designed for: Ultra-Blend® plus and EtchArrest®.



	100pk	500pk
22 ga Black Micro	1085	1435

# Black Mini® Tip

- Dispenses large volumes
- Opaque plastic preserves the flow of light-cured materials

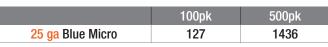
Designed for: Ultra-Blend® plus, Ultradent® LC Block-Out Resin, PermaFlo®, TriAway™ Adapter, UltraTemp®, Opalescence® Boost®, Ultradent® Diamond Polish Mint, OpalDam®, Opalescence® Endo, and OraSeal® Caulking.



# Blue Micro® Tip

- Provides pinpoint precision
- Narrow cannula accurately delivers materials

Designed for: Ultra-Etch®, Consepsis®, Ultracare®, and PrimaDry®.



# Black Mini® Brush Tip

- Precise, controlled delivery of aqueous materials
- Tight, adjustable brush fibers minimize bubbles
- Unique to Ultradent

Designed for: Consepsis®, Peak® SE, PermaQuick® Primer, Seek®/Sable™ Seek®, Ultradent® Silane, and Ultradent® Universal Dentin Sealant.



# Blue Mini® Dento-Infusor® Tip

- · Offers the same tissue management benefits as the Metal Dento-Infusor® tip
- Allows controlled flow of drop-sized quantities

Designed for: Astringedent®, Astringedent® X, and Consepsis®.







# ExperTemp® Mixing Tip

Mixes and delivers in one action

Desi

signed for: ExperTemp®.	
	45pk
ExperTemp Mixing	6346



# Metal Dento-Infusor® Tip

- Places hemostatic agents precisely and effectively removes superficial coagulum
- Blunt, bent cannula with padded brush enables gentle pressure on the sulcus
- Ultradent's first tip, the "MDI" remains paramount for successful tissue management

Designed for: Astringedent®, Astringedent® X, ViscoStat®, ViscoStat® Clear, and Peak® Universal Bond.

LOK-TITE°	100pk	500pk
19 ga Metal Dento-Infusor	2259	2560

# 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, PermaQuick®, PQ1®, Ultradent® Porcelain Etch, Ultra-Etch®, UltraSeal XT® plus, and UltraSeal XT® hydro.



LOK-TITE°	100pk	500pk
Inspiral Brush	123	1033-I

# Micro Capillary™ Tips

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

Designed for: Ultracare®, periodontal materials, and the Ultradent® Luer Vacuum Adapter.



LOK-TITE°	mm	20pk	100pk
0.008" Micro Capillary	5 mm	1120	1802
0.008" Micro Capillary	10 mm	1121	

# **Intraoral Tip**

- Allows precise placement
- Attaches to dual-barrel mixing tips

Designed for: PermaFlo®.





# Micro 20 ga Tip

- Large-gauge cannula enables consistent flow
- Standard flowable composite delivery tip

Designed for: MTAFlow<sup>™</sup>, PermaFlo<sup>®</sup>, PermaFlo<sup>®</sup> Purple, OpalDam®, and OpalDam® Green

paidam, and opaidam dieen.		
LOK-TITE°	100pk	500pk
20 ga Micro	1252	1437



# Micro 20 ga FX® Tip

• Standard flowable delivery tip

Micro 20 ga FX

 Flocked fibers fan out to evenly spread material over the entire surface



1405



1406

# Ultradent® Mixing Tip

• Mixes and delivers in one action

Designed for: UltraTemp® REZ, UltraTemp®, EndoREZ®, and PermaFlo® DC.



	20pk
Ultradent Mixing	5920

# SoftEZ® Tip

- Tip fibers provide visible, controlled delivery
- Brush fibers facilitate smooth application

Designed for: Enamelast®.



LOK-TITE°	50pk	100pk
SoftEZ	4712	4711

## White Mac<sup>™</sup> Tip

- Dispenses large volumes
- All-plastic delivery tip
- Greater angle for easy intraoral delivery

Designed for: OraSeal® Caulking, OraSeal® Putty, Consepsis® Scrub, and Opalustre®.

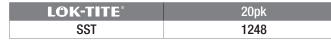


	100pk	500pk
White Mac	1361	1480

# SST™ - Surgical Suction Tip

- Ideal for delicate surgeries
- Large-diameter tip opening

Designed for: Ultradent® Luer Vacuum Adapter for small periodontic or endodontic surgeries and controlled suction of Opalescence® Boost®.





# White Mini<sup>™</sup> Tip

- Dispenses large volumes
- All-plastic delivery tip
- Easily dispenses viscous chemistries

Designed for: OraSeal Caulking®, OraSeal® Putty, Consepsis® Scrub, and Opalustre®.

	20pk
White Mini	1247





# Skini Syringe

- Generates pressure in the syringe with low force to the plunger, resulting in more precise apical delivery
- Low waste

Designed for: EndoREZ® and PermaFlo® DC.



## 1.2 ml Empty Syringe

• Snug Luer Lock threads prevent tips from popping off

Designed for: All 30 ml IndiSpense® syringes.

1.2 ml Empty Syringe



157

124

ViscoStat®	<b>Empty</b>	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.



## 5 ml Syringe

• Syringe barrel flanges positioned for optimum control/leverage

Designed for: Irrigants for in-office or dentist-supervised procedures, as well as Capillary tip, ChlorCid®, Ultradent® Citric Acid, Ultradent® EDTA 18% Solution, and Consepsis®.



	10pk
5 ml Syringe	201

# Ultra-Etch® Empty Syringe

- Snug Luer Lock threads prevent tips from popping off
- Blue color makes identification easy

Designed for: 30 ml IndiSpense syringes of Ultra-Etch®.



	-
	20pk
1.2 ml Ultra-Etch Empty Syringe	129

# Ultradent® Syringe Cover

- Provides an easy, reliable barrier
- Ensures asepsis of syringe during cleanup

Designed for: All 1.2 ml syringes.



	300pk
1.2 ml Syringe Cover	249

# TIPS - ENDODONTIC

# **Capillary Tips**

- Evacuates canals and substantially minimizes use of paper points
- Narrow, flexible taper accesses curved canals

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



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

Note: Do not use for delivery of endodontic sealers.

# Endo-Eze<sup>™</sup> Tips

- Great for endodontic procedures
- Flexible, strong cannulae
- Bend easily

Designed for: Luting materials and air/water delivery.
Use with: TriAway™ Adapter, PermaFlo® DC, and other Ultradent syringes.



	mm	20pk	100pk
22 ga - 0.028" Endo-Eze	0.70 mm	348	1431
<b>20</b> 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

# Micro Capillary<sup>™</sup> Tips

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

Designed for: Ultracare®, periodontal materials, and the Ultradent® Luer Vacuum Adapter.



LOK-TITE°	mm	20pk	100pk
0.008" Micro Capillary	5 mm	1120	1802
0.008" Micro Capillary	10 mm	1121	_

# **Endo-Eze<sup>™</sup> Irrigator Tip**

- Provides ideal reach reducing risk of expressing chemicals past the apex
- Comes with a flexible, blunt cannula with a unique, anti-obturating end
- Non-sterile

Designed for: ChlorCid  $^{\!0}$  , ChlorCid  $^{\!0}$  V, and Ultradent  $^{\!0}$  5 ml syringe.



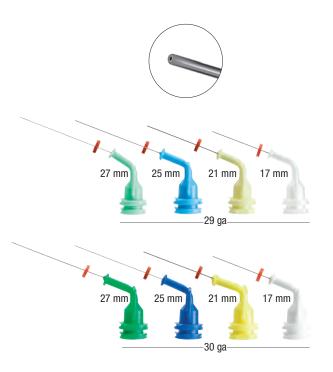


# NaviTip® Tips

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

29 ga delivers paste materials: MTAFlow<sup>™</sup>, EndoREZ<sup>®</sup>, and UltraCal XS<sup>®</sup>. 30 ga delivers solutions/gels:

File-Eze®, Ultradent® EDTA 18% Solution, ChlorCid®, ChlorCid® V, Consepsis®, Consepsis® V, and Ultradent® Citric Acid 20% Solution.



LOK-TITE°	mm	20pk	50pk
29 ga NaviTip	27 mm	5115	1377
29 ga NaviTip	25 mm	5114	1376
29 ga NaviTip	21 mm	5113	1374
29 ga NaviTip	17 mm	5112	1378
29 ga-29 ga NaviTips	27–17 mm	5116	1379
LOK-TITE°	mm	20pk	50pk
30 ga NaviTip	27 mm	1354	1424
30 ga NaviTip	25 mm	1250	1423
30 ga NaviTip	21 mm	1349	1422
30 ga NaviTip	17 mm	1249	1421
30 ga-30 ga NaviTips	27-17 mm	1351	3319

# NaviTip® 31 ga Tip 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 navigates the most intricate canal spaces

Designed for: ChlorCid®, ChlorCid® V, ChlorCid® Surf, Ultradent® EDTA 18% Solution, Ultradent® Citric Acid 20% Solution, and Consepsis®.



LOK-TITE°	mm	20pk	50pk
31 ga NaviTip	21 mm	5121	5122
31 ga NaviTip	27 mm	5123	5124

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

# NaviTip® FX® Tip

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

Designed for: Ultradent® Citric Acid 20% Solution.



LOK-TITE <sup>®</sup>	mm	20pk
30 ga NaviTip FX	17 mm	1452
30 ga NaviTip FX	25 mm	1454

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



## Mixing Tips

- Enable direct delivery of impression materials
- Automixing, disposable, and color coded

Designed for: Thermo Clone® VPS and Chromaclone® PVS.



	50pk
<b>Yellow Mixing Tips</b>	2902
Pink Mixing Tips	2903
<b>Green Mixing Tips</b>	2904

# Ultradent® Micro Applicators

- Bend easilyApply small amounts accurately
- Standard size

The micro applicator is composed of small nonlinting, nonabsorbent fibers that suspend solutions, creating a nondripping sphere.

4548

Micro Applicator Brush 400pk 200 x Each color



# IntraOral Impression Tip

- Allows precise placement
- Attaches to mixing tips

Designed for: Thermo Clone® VPS and Chromaclone® PVS.



	50pk
IntraOral Impression	2906

## Ultradent® Mixing Wells

• Use with bottled chemistries



Designed for: Peak® and Peak®-ZM.

	100pk
Mixing Wells	4545

# **Dynamic Mixing Tip**

- Easily and securely locks on cartridge
- Provides consistent mixing of base and catalyst

Designed for: Thermo Clone® VPS 380 ml cartridges



Designed for Thermo office Vi o 500 mi cartilages.	
	50pk
Dynamic Mixing	4075

# Luer Lock Cap

- Winged, polypropylene, plastic luer lock cap
- Use to seal syringes loaded in the office

Designed for: All Ultradent® plastic syringes.



	20pk
Luer Lock Cap	205

# Syringe Organizer

- Holds 14 syringes
- Made of clear acrylic

Designed for: Mosiac®.



	1pk
Syringe Organizer	382

ViscoStat
ViscoStat Clear
Astringedent
Astringedent X
Astringedent Spot Remover
Ultrapak/Ultrapak E
Fischer's Ultrapak Packers
Ultradent Slide Packers





#### FOR HEMOSTASIS AND FLUID CONTROL

For more than 40 years, dentists have trusted the immediate hemostatic power, detailed margins, and elimination of surface bleeding and sulcular fluid provided by using Ultradent's tissue management products. Our complete line of solutions continuously sets the standard for superior control and predictability while offering dentists fast, reliable, and affordable products.

Unparalleled tissue management starts with rapid, profound hemostasis. 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 unit dose syringe directly from the IndiSpense® syringe.



Firmly rub Viscostat®, Astringedent®, or Astringedent® X hemostatics against the cut bleeding tissue to obtain hemostasis.

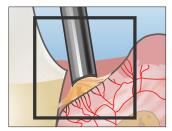
# TISSUE MANAGEMENT IS KEY TO QUALITY DIRECT AND INDIRECT RESTORATIONS





Contralateral molars removed for maxillofacial surgery. Crowns fabricated by same technician. Different dentists made impressions.

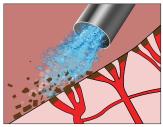
#### FERRIC SULFATE - ACTIVE HEMOSTASIS



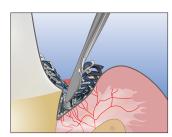
1. Burnish hemostatic agents firmly against sulcus until bleeding stops and no more coagulum forms.



2. Using the Dento-Infusor® tip with padded scrub brush, scrub firmly to infuse hemostatic and clean cut sulcus.



3. Apply firm air/water spray to remove residual coagulum and test tissue for quality, profound hemostasis. If bleeding continues, repeat infusion technique.



4. After complete hemostasis has been reached, excellent retraction is achieved using Ultrapak® knitted cord placed with the Ultrapak® packer.



ViscoStat hemostatic protects tissues even with low pH.

Note: ViscoStat hemostatic will not remove dentinal smear layer, resulting in less tooth sensitivity even after 10 minutes of exposure.

"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."

leave 1 to 3 minutes

spray; air dry

—DR. DAN FISCHER, DDS

firm air/water spray

Timeline: 0 1 min. 2 min. 3 min. 4 min. Rub hemostatic Clean sulcus with Perform final Remove Ultrapak Bleeding If necessary, Place soaked agent firmly with cleaning/testing with air/water spray repeat hemostatic Ultrapak cord(s); cord(s); air/water

application

136 800.552.5512

Dento-Infusor tip

## FOR INDIRECT BONDING (LUTING)

#### PROVISIONAL REMOVED



1. Well-healed tissue 2 weeks post-op

#### CONTAMINATION



2. Sulcular fluids contaminate bonding materials/preparation when not controlled.

#### SEAL/DRY



3. Seal epithelium by gently rubbing with ViscoStat® hemostatic and Blue Mini® Dento-Infusor® tip.

#### PREP SCOURED



4. Scour off hemostatic agent and residual temporary cement with Consepsis® Scrub, prepare site for application of any dentin bonding agent, including self-etching systems.

#### WASH/DRY



5. Wash and dry. Pack Ultrapak cord to ensure hemostasis while applying etch and dentin bonding agent and to help protect the bond surface before bonding the crown. Make sure the tissue is dry before seating.

#### SEAT RESTORATION



6. Preparation ready for final cementation.

Note: Perfect sulcular fluid control is mandatory if bonding and luting is adjacent to gingival sulcus.<sup>1</sup>

#### 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.

#### FOR DIRECT BONDING

#### **MICROLEAKAGE**



Several Class V restorations were performed on these anterior teeth 2 months prior. Inadequate tissue management or inadequate removal of hemostatic and/or blood contaminants resulted in microleakage on maxillary right central incisor.

## STAINING



2. With microleakage, blood pigments move into space between preparation and restoration and stain interface.

#### **ISOLATION**



3. Isolate tissues with Ultrapak® cord soaked in hemostatic solution. Firmly air/water spray/rinse excess hemostatic from cord, tissues, and tooth surfaces to prevent contamination and resultant leakage.

#### RESTORATION



4. Replaced Class V restoration 3 months

#### CONTROL



For Class V restorations, ViscoStat 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.

# INDIRECT VENEER RETRACTION



1. Packing Ultrapak cord quickly displaces tissues and improves access for indirect veneer luting.

#### FOR IMPRESSION MAKING

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.

#### **BLEEDING**



1. Subgingival preparation with bleeding.

#### **HEMOSTASIS**



2. Burnish 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.

## DISPLACEMENT



4. Soak Ultrapak® knitted cord in ViscoStat hemostatic, pack, and leave for 1–3 minutes.

#### DRYING/TESTING



5. Remove Ultrapak knitted cord, follow with a firm air/water spray and dry.

#### MAKE IMPRESSION



6. Deliver Thermo Clone VPS impression material.

#### RESULT



7. Predictable quality impressions.

# FOR VITAL PULPOTOMY IN PRIMARY TEETH

#### - EXPANDED APPLICATION

#### **HEMOSTASIS**



1. Control bleeding. Use Dento-Infusor tip with ViscoStat or Astringedent® hemostatics. 1-4

#### **ANTIMICROBIAL**



2. Apply a sustained antibacterial like ZOE in a thin layer.

#### **EUGENOL BARRIER**



3. Create a eugenol barrier.\* Apply a thin layer of Ultra-Blend plus liner because eugenol inhibits most resin polymerization.

#### **ETCH**

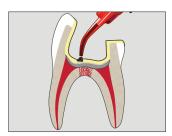


4. Apply Ultra-Etch® phosphoric acid or Peak® SE Primer.

\*Note: Apply ZOE and Ultra-Blend® plus liner in minimal thickness to keep maximum dentin available for bonding.

Note: Remove all hemostatic and extraneous coagulum prior to placement of the thin layer of ZOE.

#### BOND



5. Apply Peak® Universal Bond adhesive.

#### **RESTORE**



6. Use flowable and/or paste composite as desired.

1. Fei AL, Udin RD, Johnson R. A clinical study of ferric sulfate as a pulpotomy agent in primary teeth. Pediatr Dent. 1991;13(6):327-32. 2. Fuks AB, Holan G, Davis JM, Eidelman E. Ferric sulfate versus dilute formocresol in pulpotomized primary molars: long-term follow up. Pediatr Dent. 1997;19(5):327-30. 3. Landau MJ, Johnsen DC. Pulpal responses to ferric sulfate in monkeys [IADR abstract 822]. J Dent Res. 1988;67(suppl):215. 4. Fuks AB, Eidelman E, Cleaton-Jones P, Michaeli Y, Pulp response to ferric sulfate, diluted formocresol and IRM in pulpotomized primary baboon teeth. ASDC J Dent Child. 1997;64(4):254-9.

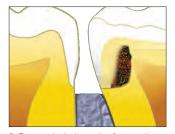
### FOR CHALLENGING CASES



1. Old, fractured amalgam filling. Patient has been chewing on fragments for months, leaving gingiva inflamed.



2. Remove old amalgam. Keep caries as a barrier for the time being, in case pulp is exposed.



3. Expose gingival margin of restoration before placing a rubber dam. Move to step 4, if necessary, to improve visibility.



4. If necessary, achieve profound hemostasis by applying ViscoStat® hemostatic or Astringedent® X hemostatic with brush end of Metal Dento-Infusor® tip.



5. Place a dental dam; then remove residual caries. Treat exposed pulp if necessary. Etch and bond with Peak® Universal Bond adhesive.



6. DO NOT wedge matrix band until first layer of composite has been placed.



7. CORRECT: First, place matrix band to create a gingival barrier; then place first layer of composite. **Optional**: Etch and bond after placing matrix band, and then place first layer of composite.



8. Wedge after first layer. Loosen matrix band and contour for good interproximal contact. Place an initial adaptive layer with a flowable composite (PermaFlo® composite) and fill cavity with one of our quality composites.





# 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.



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 device 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 only control of sulcular fluid is required, the softer tip end of the plastic Blue Mini® Dento-Infusor® tips 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 hemostatic agent into capillaries, forming a cork-like "plug," then cleans coagulum away.



A blunt, bent cannula with padded "scrub brush" on Metal Dento-Infusor tip enables ViscoStat Clear hemostatic to temporarily close off capillary ends by causing collagen in them to swell.

# Dento-Infusor Tips, see pages 128-129.





## ViscoStat®

20% FERRIC SULFATE









- Creates profound hemostasis
- Stops bleeding in seconds, saving 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 hemostatic and isolate the tissues. Follow with a firm air/water spray.

Note: Do not use epinephrine preparations with ferric sulfate products (ViscoStat, Astringedent), as blue/black precipitate will occur.

"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



## ViscoStat® Clear 25% ALUMINUM CHLORIDE









- Does not discolor the gingiva
- Stops minor bleeding in the esthetic zone
- Rinses easily
- Viscous gel
- Does not interfere with bonding<sup>2</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 oozing in restorative and operative dentistry. It is designed to be used with gingival retraction cord and/or the Dento-Infusor tip. The gel facilitates the insertion of the cord into the sulcus.





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. Press soaked Ultrapak® cord into the sulcus. Leave 4-5 minutes.



4. Remove cord. Firm air/water spray. Air dry. Rub hemostatic into the sulcus again. Leave 1 minute.



Facilitates great control in esthetic zone with no gingival stain.



#### 6409 ViscoStat Clear Dento-Infusor Kit

4 x 1.2 ml syringes 20 x Metal Dento-Infusor tips



#### 6407 ViscoStat Clear Dento-Infusor IndiSpense Kit

1 x 30 ml IndiSpense syringe 20 x Metal Dento-Infusor tips 20 x 1.2 ml empty syringes



6410 ViscoStat Clear Syringe 20pk

1.2 ml syringes



6408 ViscoStat Clear IndiSpense Syringe

30 ml syringe



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

## Astringedent®

15.5% FERRIC SULFATE









- The "Classic" hemostatic agent
- Stops bleeding in seconds
- 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.

"Highly recommended as effective and easy to use for control of bleeding, tissue management, and pulpotomies. Rating++++."2 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.2

111 Astringedent Bottle 1pk 686 Astringedent IndiSpense Syringe 1pk 30 ml

NOTE: ViscoStat® and Astringedent hemostatic agents are more viscous and should be used with a Metal Dento-Infusor® tip with, as there is less flow through plastic Blue Mini® Dento-Infusor® tip. The plastic Dento-Infusor tip should be used when you are dealing with newly healed epithelium, as the softer tip is slightly less aggressive.

1, realityesthetics.com, 2, "Can't Live Without" Clinical Research Associates Newsletter, Volume 21, Issue 7, July 1997

# Astringedent® X

12.7% IRON SOLUTION







- Effectively treats difficult-to-stop bleeding
- Is less acidic than competitive iron subsulfate solutions

Astringedent X hemostatic is an aqueous 12.7% iron solution that works quickly to stop difficult bleeding. It contains equivalent ferric sulfate and ferric subsulfate. Note: Diluted Astringedent X hemostatic does not equal ViscoStat or Astringedent hemostatics.

Use 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).





Astringedent X hemostatic and Dento-Infusor tip facilitate profound hemostasis, even with challenging cases.

112 Astringedent X Bottle 1pk Astringedent X IndiSpense Syringe 1pk 690 30 ml



# Astringedent® Spot Remover CLEANING SOLUTION

Astringedent Spot Remover is designed to remove ViscoStat hemostatic, Astringedent hemostatic, and Astringedent X hemostatic stains that will not come out of clothing with soap and water. Not for intraoral use.

2160

Astringedent Spot Remover 1pk 30 ml bottle



# TISSUE MANAGEMENT

# Ultrapak® and Ultrapak® E KNITTED AND EPINEPHRINE KNITTED CORD







Best Gingival Retraction Materia





- The original knitted cord
- Provides rapid 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
- Does not entangle in diamond bur
- Bright colors facilitate easy identification and removal
- Available with or without epinephrine<sup>2</sup>

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 1–3 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.

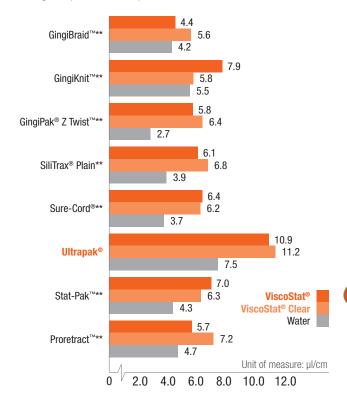
Note: Do not use Ultrapak E knitted cord or other epinephrine preparations with ferric sulfate solutions, including ViscoStat, Astringedent, and Astringedent X hemostatics, as blue/black precipitate will occur.



#### Listed as a "CAN'T LIVE WITHOUT" product by a prominent independent research institute.3

#### ULTRAPAK CORD COMPETITOR ABSORPTION COMPARISON

Data shows Ultrapak® knitted cord vs. leading competitors' absorption abilities.\*



<sup>\*</sup> Data on file. \*\* Trademark of a company other than Ultradent. 1. realityesthetics.com. 2. Note: Do not use Ultrapak E knitted cord or other epinephrine preparations with ferric sulfate solutions, including ViscoStat, Astringedent, and Astringedent X hemostatics as a blue/black precipitate will occur. Ultrapak knitted cord with epinephrine is not available in all countries. **3.** "Can't Live Without" Clinical Research Associates Newsletter, Volume 21, Issue 7, July 1997

# **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.

#### 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 or #00—as deep as possible into 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.

#### FOR DIGITAL IMPRESSIONS - COMPLETE HEMOSTASIS

#### **HEMOSTASIS**

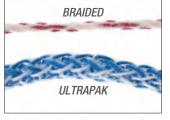


1. Complete hemostasis is essential, especially when taking digital impressions, for the most accurate marginal fit of any restoration.

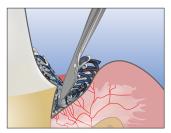
#### **CLEAR FIELD**



2. After hemostasis is achieved and tissue is retracted, preparation is ready for digital impression.



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 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 for 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.

"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



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

Ultrapak Cord #00 Regular 1pk 136



197 Ultrapak Cord #00 Epinephrine 1pk



#0 - .045" (1,143 mm)

- Lower anteriors
- 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

# Each bottle contains 8 ft/244 cm of cord.

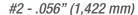
#1 - .049" (1,245 mm)

- 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



- Upper cord for "double-cord" technique
- Protective "pre-preparation" cord

133 Ultrapak Cord #2 Regular 1pk



200 Ultrapak Cord #2 Epinephrine



#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.

ultradent.com

# **TISSUE MANAGEMENT**

## Fischer's Ultrapak® Packers

THIN SERRATED PACKING INSTRUMENTS



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.

 $90^{\circ}$  AND PARALLEL TO HANDLE: Same size design as the  $45^{\circ}$  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



## Ultradent® Slide Packers

THIN, CIRCULAR, NON-SERRATED PACKING INSTRUMENTS

LINCOLFRONCISC

BECHARS UNDER ROCKERS

These thin, non-serrated slide packers are designed to place and compress cord with a sliding action as the clinician places cord around the prep. The thin head presses into the cord, and the smooth, circular head allows placement of cord in a sliding motion around the preparation without lifting the instrument from the cord.

834 833 Small Slide Packer (45° to handle) 1pk Regular Slide Packer (45° to handle) 1pk



# WHITEN

**Questions Behind Tooth Whitening** 

Whitening Treatment Protocol

Opalescence Tooth Whitening Reference Guide

Opalescence Carbamide vs. Hydrogen Peroxide Concentrations

Opalescence PF 10%, 15%, 20%, 35%, and 45%

Opalescence 10%

**Opalescence Custom Tray Patient Instructions** 

Opalescence Shade Guide Cards

**Opalescence Gift Bags** 

Opalescence Pocket Tray Cases

.

Opalescence Go 10% and 15%

Ultradent LC Block-Out Resin

**Custom Tray Fabrication** 

Sof-Tray Classic Sheets

**Ultradent Utility Vinyl Cutters** 

Ultradent Ultra-Trim Scalloping Scissors

UltraEZ

KleerView

IsoBlock

OpalDam/OpalDam Green

**Opalescence Boost** 

Opalescence Endo

Opalustre

OpalCups

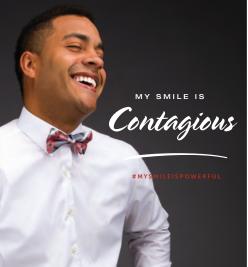
OpalCups

Opalescence Whitening Toothpaste











# WHITEN YOUR SMILE - Questions Behind Tooth Whitening

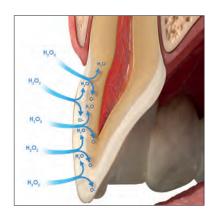
There are many causes of tooth staining. Certain medicines, tooth trauma, root fillings, and foods and beverages can cause tooth discoloration over time. Some discolorations are superficial, while others are internal. Both can be effectively treated by a dentist. Professional whitening is the best option to safely lighten discolored teeth.

#### **HOW DOES WHITENING WORK?**

During the whitening treatment, hydrogen and carbamide peroxide change to form reactive oxygen species. These penetrate the tooth and break down the stain molecules to change their optical properties. This interaction transforms the color molecules, making the tooth appear more white.

Reactive oxygen species are able to migrate throughout the tooth, so there is no need for the entire surface of the tooth to be in contact with the whitening agent for the entire tooth to be whitened.

Because the reactive oxygen needs to dissipate from the tooth before bonding, it is necessary to wait 7–10 days before any bonding procedure.



#### WILL WHITENING AFFECT BOND STRENGTH?

Even though whitening agents release oxygen into the tooth, existing bonds are not weakened.<sup>1,2</sup>

Note: Allow a period of 7–10 days after whitening treatment before bonding. The high concentration of oxygen in the tooth could have a significant adverse effect on polymerization of the resins.<sup>3,4</sup>

#### 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 as a result of whitening. If sensitivity occurs, 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 Formula can also be used to help to prevent or lessen sensitivity if it occurs.

#### WILL WHITENING WEAKEN THE TOOTH'S ENAMEL?

No. Tooth whitening has not been shown to weaken tooth enamel.<sup>5–9</sup>

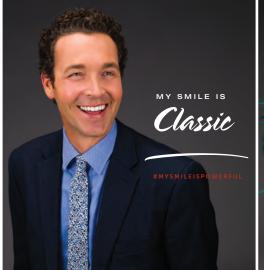
#### IMPORTANT:

#### DENTIST SUPERVISION IS THE BEST WAY TO WHITEN!

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 over-the-counter (OTC) products often does not provide the results desired, and leaves the patient without options for managing potential sensitivity or other concerns.

1. Klukowska M, White DJ, Kozak KM, et al. Effect of bleach on microleakage of Class V composite restorations. J Dent Res. 85(Spec Iss B):0035, 2006 (www.dentalresearch.org). 2. Angerame D, Garaffa S, Maglione M, Di Learnard R, De Stefano Dorigo E. Effect of in-office bleaching on Class V composite restorations seal. J Dent Res. 84(Spec Iss A):3013, 2005 (www.dentalresearch.org). 3. Wilson D, Xu C, Hong L, Wang Y. Effects of clinical factors during tooth whitening on enamel. J Dent Res. 86(Spec Iss A):2632, 2007 (www.dentalreasearch.org). 4. Lim B-S, Ryu I, Lee Y-K, et al. Effect of bleaching agent on shear bond strength to dentin. J Dent Res. 85(Spec Iss B):0036, 2006 (www.dentalresearch.org). 5. Basting RT, Rodrigues AL Jr, Serra MC. The effects of seven carbamide peroxide bleaching agents on enamel microhardness over time. J Am Dent Assoc. 2003;134(10):1335-42. 6. Al-Qunaian TA. The effect of whitening agents on caries susceptibility of human enamel. Oper Dent. 2005;30(2):265-70. 7. Clark LM, Barghi N, Summitt JB, Amaechi BT. Influence of fluoridated carbamide peroxide bleaching gel on enamel demineralization. J Dent Res. 85(Spec Iss A):0497, 2006 (www.dentalresearch.org). 8. Amaechi BT, Clark LM, Barghi N, Summitt JB. Enamel fluoride uptake from fluoridated carbamide peroxide bleaching gel . J Dent Res. 85(Spec Iss A):0498, 2006 (www.dentalresearch.org). 9. Browning WD, Myers M, Downey M, Pohjola RM, Brackett WW. Report on low sensitivity whiteners. J Dent Res. 85(Spec Iss A):1650, 2006 (www.dentalresearch.org).







# Whitening Treatment Protocol

We recommend the following steps for professional whitening evaluation and treatment.

#### 1. TAKE PATIENT'S MEDICAL HISTORY

Pregnant or breastfeeding women should not whiten. Patients with serious health concerns should consult their primary care provider prior to treatment.

#### 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

Proceed to the hygiene treatment. Use polishing paste to remove all plaque. For patients with known sensitivity, wait 3–5 days before beginning whitening treatment.

#### 5. DETERMINE THE INITIAL TOOTH COLOR

Identify the initial tooth color with the aid of a shade guide. Take a photograph with shade tab after hygiene treatment.

#### 6. CREATE WHITENING TREATMENT PLAN

Multiple Opalescence® whitening products may be used as part of the whitening treatment plan to help the patient achieve their desired results. If the patient has a history of tooth sensitivity, add a desensitizing protocol prior to whitening treatment and consider using a lower concentration of gel and/or reduced wear time. Additionally, if the patient tolerates whitening treatments without sensitivity, consider providing a higher concentration gel for more rapid results.

#### 7. OBTAIN PATIENT'S CONSENT

Have the patient sign a whitening consent form that outlines the whitening treatment and cost involved.

#### 8. EDUCATE PATIENT

Tooth whitening results can last a year or more. Depending on the patient's nutrition and lifestyle habits, whitening may need to be repeated periodically to maintain the look they desire. Instruct patient how to use the chosen whitening products and answer any questions or concerns.

#### 9. DETERMINE THE FINAL TOOTH COLOR

Identify the final tooth color using the shade guide. 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

Some patients may experience lingering sensitivity. We recommend using UltraEZ® desensitizing gel or Enamelast® fluoride varnish. Opalescence® Whitening Toothpaste Sensitivity Formula can also be used to help minimize sensitivity.

Note: Allow a period of 7–10 days after whitening treatment before bonding. The high concentration of oxygen in the tooth could have a significant adverse effect on polymerization of resins.





# Opalescence® Tooth Whitening Reference Guide

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Product Name	Active Ingredient	Contains	Indications For Use	Flavors	Wear Time
Opalescence® PF 10%	10% Carbamide Peroxide	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Patients with sensitivity concerns; can be worn day or night	10% Mint 10% Melon 10% Regular	8–10 hours a day
Opalescence® PF 15%	15% Carbamide Peroxide	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Faster whitening, recommended to wear during the day	15% Mint 15% Melon 15% Regular	4–6 hours a day
Opalescence® PF 20%	20% Carbamide Peroxide	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Faster whitening, recommended to wear during the day	20% Mint 20% Melon 20% Regular	2–4 hours a day
Opalescence® PF 35%	35% Carbamide Peroxide	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Shorter wear time and touch-ups	35% Mint 35% Melon 35% Regular	30–60 minutes a day
Opalescence® Quick PF 45%	45% Carbamide Peroxide	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Shorter wear time and touch-ups	45% Mint	15–30 minutes a day
Opalescence Go® 10%	10% Hydrogen Peroxide	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Ready-to-go, an alternative to OTC products	10% Mint 10% Melon	30–60 minutes a day
Opalescence Go® 15%	15% Hydrogen Peroxide	Potassium Nitrate, Fluoride, and Xylitol	TAKE-HOME Ready-to-go, an alternative to OTC products	15% Mint	15–20 minutes a day
Opalescence® Endo	35% Hydrogen Peroxide	-	DENTIST-ADMINISTERED for internal whitening of endodontically treated teeth	-	3–5 days per application
Opalescence® Boost® 40%	40% Hydrogen Peroxide	Potassium Nitrate and Fluoride	DENTIST-ADMINISTERED Fast chairside treatment	-	2–3 20-minute applications DO NOT exceed 3 applications per visit
Opalustre® Microabrasion Slurry	6.6% Hydrochloric Acid Silicone Carbide	-	DENTIST-ADMINISTERED Chairside treatment to remove superficial white/brown stains	-	Office visit
UltraEZ® Desensitizing Gel	3% Potassium Nitrate and 0.25% Neutral NaF	-	TAKE-HOME Sensitivity treatment	-	15–60 minutes a day

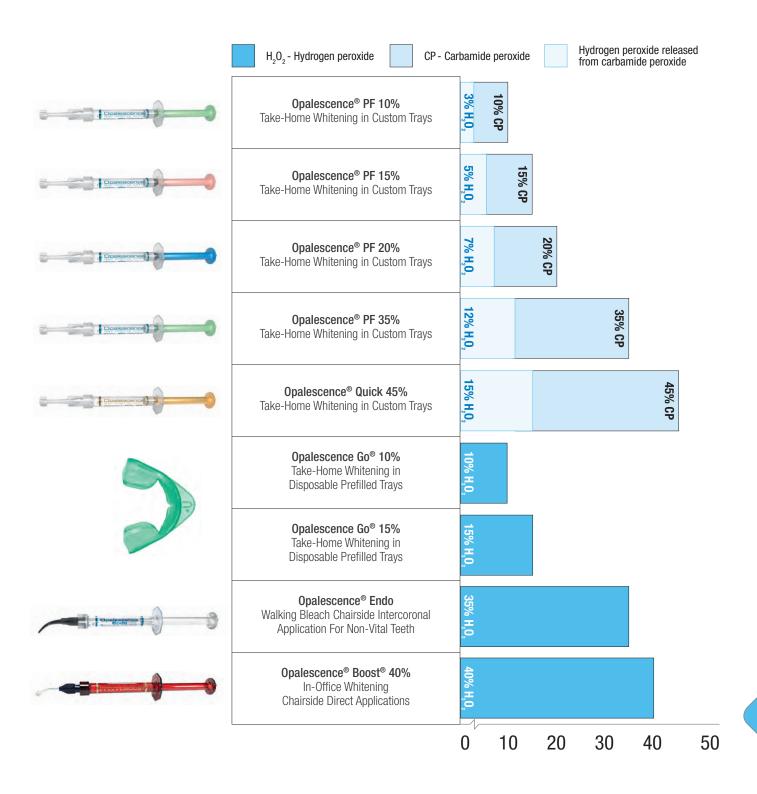
Opalescence tooth whitening gel contains PF (potassium nitrate and fluoride).

In an in vitro study researchers looked at whether treatment with tooth whitening products with different concentrations of carbamide peroxide or hydrogen peroxide would increase the susceptibility for caries. Even a tooth whitening product with a neutral pH and 10% carbamide peroxide did not lead to a higher caries risk.



# Opalescence® Carbamide Peroxide vs. Hydrogen Peroxide Concentrations

About one-third of the carbamide peroxide (CP) contained in whitening agents separates into hydrogen peroxide  $(H_2O_2)$ , the active whitening agent. This is important to know in order to correctly assess the intensity of whitening products.



ultradent.com 151





The leader in tooth whitening

## PF 10%, 15%, 20%, 35%, and 45%

CARBAMIDE PEROXIDE WITH POTASSIUM NITRATE AND FLUORIDE











- · Opalescence PF tooth whitening gels contain PF (potassium nitrate and fluoride)
- Opalescence PF whitening gel is designed to maximize patient comfort
- Formulated to prevent dehydration and shade relapse
- Five concentrations for treatment flexibility
- Available in Mint, Melon, and Regular flavors
- Sticky, viscous gel won't migrate to soft tissues and ensures tray stays securely in place
- Day or night wear

The sticky, viscous formula of Opalescence gel does not leach from the tray like other whitening agents,4 and the sticky gel holds the comfortable tray securely in place. Opalescence gel contains PF (potassium nitrate and fluoride). Twenty percent water content prevents dehydration and shade relapse, making Opalescence gel one of the most reliable whitening gels available. 2-5 A university study proves that the gel stays active for 8-10 hours during overnight whitening,5 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 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 congenital, systemic, pharmacologic, traumatic, etc., factors as well as aging. It is successful with fluorosis and even tetracycline staining. 4,6

#### BEFORE AND AFTER



Before whitening



approximately 40 hours.



Before whitening



After seven Opalescence® Boost® whitening treatments over six months. Patient also whitened at home with Opalescence® PF 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® PF 20% whitening gel.



Moderate to advanced tetracycline stains.



Improvement in 2 weeks. With tetracycline stains, treatment can require 2 to 6 months.4

#### INSTRUCTIONS



1. Pour impression with fast-set plaster or dental stone. Pour alginate shortly after making impression to ensure accuracy. Trimming is less work if quantity of stone is kept to a minimum. Palate and tongue areas are not poured or should be removed after plaster has set. Allow model to dry two hours.

3. With vacuum former, heat tray material

(Sof-Tray® Classic Sheets) until it sags

model. Cool and remove model from

vacuum former

approximately 1 inch. Adapt plastic over



2. For reservoir spaces, apply Ultradent® LC Block-Out Resin approximately 0.5 mm thick onto labial surfaces and approximately 1.5 mm shy of the gingival margin. DO NOT extend onto incisal edges or occlusal surfaces. Using VALO® curing light, cure each tooth 5 seconds. Wipe off oxygen inhibition layer.



4. With tactile scissors (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; check tray extensions. Gently flame polish the edges one quadrant at a time, if necessary, with a butane torch. While still warm, immediately hold periphery of each segment firmly against model for three seconds with water-moistened gloved finger. If this over-thins the tray material, fabricate a new tray.



6. Review enclosed instructions with patient to brush teeth and explain process of loading tray by expressing one continuous bead of gel approximately halfway up from the incisal edge on facial side of tray from molar to molar using about one third to one half 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. Gently wipe off excess gel with a soft toothbrush



Clean tray with soft toothbrush and water. Store tray in appliance case when not in use.



"I recommend Opalescence PF gel to other doctors because the results from patients using it are consistent. The sticky, viscous Opalescence PF 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

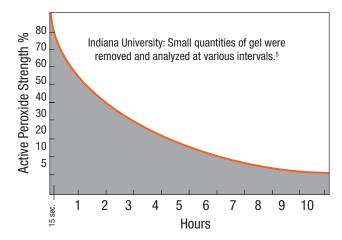
"On behalf of my staff as well as my patients, not one person has made a comment in regards to sensitivity while using this product."

—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!



1. realityesthetics.com. 2. Rosenstiel SF, Gegauff AG, Johnston WM. Efficacy and safety evaluations of a home bleaching procedure. 1994. The Ohio State University, College of Dentistry, Data on file. 3. Russell CM, Dickinson GL, Johnston MH, et al. Dentist-supervised home bleaching with ten percent carbamide peroxide gel: a six-month study. J Esthetic Dent. 1996;8(4):177-82. 4. Caughman WF, DMD, Frazier KB, Haywood, VB. Carbamide peroxide whitening of non-vital single discolored teeth: Case reports. Quintessence Int. 1999;30(3):155-61. 5. Matis BA, Gaiao U, Blackman D, Schultz FA, Eckert GJ. In vivo degradation of bleaching gel used in whitening teeth. JAm Dent Assoc. 1999;130(2):227-35. 6. Morgan J, Presley S. In-office "power" bleaching of vital teeth as an adjunct to at-home bleaching. Pract Perio Aesthet Dent. 2002;14(suppl 2):16-23.

## Opalescence® Custom Tray Patient Instructions



Use these instructions to quickly and easily explain the take-home whitening process and procedure to your patients.

80040 Patient Instructions 50pk



#### **Opalescence Patient Kits**

						· · · ·
Flavor	10%	10% PF	15% PF	20% PF	35% PF	45% PF
Mint	5361-US	5364-US	5367-US	5370-US	5373-US	5357-US
Melon	_	5365-US	5368-US	5371-US	5374-US	_
Regular	5363-US	5366-US	5369-US	5372-US	5375-US	_

8 x 1.2 ml Opalescence syringes

1 x 1 oz Whitening Toothpaste

1 x Tray case

1 x Shade guide



-NFW

-NFW

#### **Opalescence Doctor Kits**

-		-				IVEVV
Flavor	10%	10% PF	15% PF	20% PF	35% PF	45% PF
Mint	5376-US	5379-US	5382-US	5385-US	5388-US	5358-US
Melon	_	5380-US	5383-US	5386-US	5389-US	_
Regular	5378-US	5381-US	5384-US	5387-US	5390-US	_

8 x 1.2 ml Opalescence syringes

1 x 1.2 ml Ultradent LC Block-Out Resin syringe

2 x Sof-Tray 0.035" 5" x 5" sheets

1 x Black Mini tip

1 x 1 oz Whitening Toothpaste

1 x Tray case

1 x Shade guide



-NEW

#### Opalescence Syringe 40pk

Opalescence®

Shade Guide Card

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Flavor	10%	10% PF	15% PF	20% PF	35% PF	45% PF
Mint	5391-US	5394-US	5397-US	5400-US	5403-US	5359-US
Melon		5395-US	5398-US	5401-US	5404-US	_
Regular	5393-US	5396-US	5399-US	5402-US	5405-US	_

1.2 ml syringes



#### 498 Shade Guide Card 50pk

# Opalescence® Gift Bags







SMALL ORGANZA



LARGE ORGANZA



**CARRYALL** 

#### Note: Gift bags only. Product not included.

Description	QTY	Sku	Price
Frosted Plastic	10pk	8752	
Small Organza	10pk	8751	
Large Organza	10pk	8750	
Carryall	1pk	5337	

# Opalescence® Pocket Tray Cases





707 Pocket Tray Cases Variety 20pk

# Opalescence



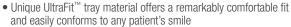
PREFILLED WHITENING TRAYS - HYDROGEN PEROXIDE











- 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 for 5–10 days; 15% - wear 15–20 minutes for 5–10 days
- 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 over-the-counter whitening products. With no impressions, models, or lab time required, Opalescence Go whitening trays are also a perfect follow-up to in-office whitening.

#### PATIENT INSTRUCTIONS



1. Remove from package.



2. Center tray on arch.



3. Gently suck down or swallow.



4. Remove outer tray.



5. Suck down or swallow again.



6. Wear 10% for 30–60 minutes and 15% for 15–20 minutes.







#### **BEFORE AND AFTER**



Before



Female patient, results with Opalescence Go® 10% whitening after ten trays



Before



Male patient, results with Opalescence Go 15% whitening after ten trays

#### **Opalescence Go Patient Kits**

Flavor	10%	15%
Mint 6pk	4635	4638
Melon 6pk	4636	_

10 x Each upper/lower trays



#### Opalescence Go Mini Kits

Flavor	10%	15%
Mint 12pk	4645	4648
Melon 12pk	4646	_

4 x Each upper/lower trays



#### Opalescence Go Sample Dispenser Kit/Refill

Flavor	Kit 20pk	Refill 20pk
Mint 10%	4654	4657
Melon 10%	4652	4655
Mint 15%	4706	4695

20 x Each upper/lower trays 20 x Patient instructions



<sup>1.</sup> realityesthetics.com.



### Ultradent® LC Block-Out Resin









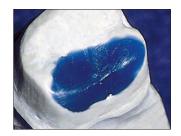


- Optimal viscosity for proper application
- Blue pigment for visibility during application
- Great utility resin with multiple uses

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.



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.



Also use for periodontal trays.

"Ultradent LC Block-Out Resin is the original resin block-out product for extraoral use and it's still the best."

-REALITY RATINGS



1. realityesthetics.com.

## **Custom Tray Fabrication**

Ultradent's dental lab is available to professionally fabricate trays, night guards, and mouthguards for all your patients' needs. If you would like our lab to fabricate your trays or guards, 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.







# 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.



With vacuum former, heat tray material (Sof-Tray® Classic Sheets) until it sags approximately 1 inch. Adapt plastic over model. Cool and remove model from vacuum former.

226 Sof-Tray Regular Sheets 0.035" 5" x 5" 25pk

0.9 mm - 127 x 127 mm

227 Sof-Tray Medium Sheets 0.060" 5" x 5" 20pk

0.5 mm - 127 x 127 mm

284 Sof-Tray Heavy Sheets 0.080" 5" x 5" 20pk

2.0 mm - 127 x 127 mm

# Ultradent® Utility Vinyl Cutters







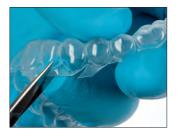
• Use for gross trimming of tray

604

**Ultradent Utility Vinyl Cutters 1pk** 

## Ultradent® Ultra-Trim Scalloping Scissors







- Use for precise trimming of border around interdental papilla
- Spring loaded to minimize finger fatigue
- Grips tray material easily

605

• Made of durable stainless steel

Ultradent Ultra-Trim Scalloping Scissors 1pk



# **UltraEZ**

DESENSITIZING GEL WITH POTASSIUM NITRATE AND FLUORIDE









- Provides immediate results
- Eliminates 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 quickly eliminates sensitivity from toothbrush abrasion, thermal and chemical changes, tooth whitening, and root exposure.



# KleerView™

CHEEK/LIP RETRACTOR







KleerView cheek and lip retractors are perfect for in-office tooth whitening, bonding, composites, and clinical photography.

1820 1821 KleerView Child Size 1pk KleerView Adult Size 1pk



## 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.

1. realityesthetics.com.



# OpalDam® and OpalDam® Green

LIGHT-CURED RESIN BARRIERS











Micro Blac 20 ga Tip Mini® page 129 page 1

- Protects soft tissue with impervious 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.

#### INSTRUCTIONS







1. Apply OpalDam resin barrier 4–6 mm wide on gingiva. Seal interproximal spaces. Overlap resin approximately 0.5 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 OpalDam syringes 10 x Micro 20 ga tips 10 x Black Mini tips



#### 325-U OpalDam Syringe 4pk

1.2 ml syringes



#### 326-U OpalDam Syringe 20pk

1.2 ml syringes



#### 1824-U OpalDam Green Kit

4 x 1.2 ml OpalDam Green syringes

10 x Micro 20 ga tips

10 x Black Mini tips



#### 1825-U OpalDam Green Syringe 4pk

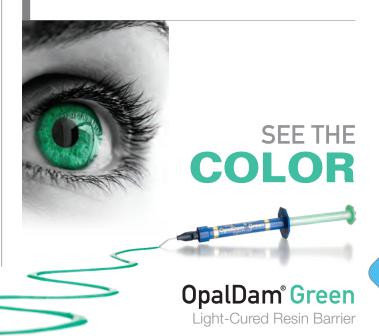
1.2 ml syringes



#### 1826-U OpalDam Green Syringe 20pk

1.2 ml syringes





OpalDam Green resin barrier offers effective coverage of oral tissues, making in-office whitening easier than ever before.





IN-OFFICE POWER WHITENER - 40% HYDROGEN PEROXIDE

















Micro 20 ga FX® Tip page 130

Micro 20 g Tip page 129

- NO LIGHT NEEDED!
- No refrigeration required
- 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 complete removal
- Chairside syringe-to-syringe mixing ensures maximum strength
- Opalescence Boost tooth whitening gel contains PF (potassium nitrate and fluoride)

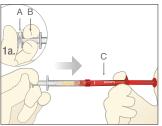
Opalescence Boost in-office whitener is chemically activated, so it does not require a light for whitening. Syringe-to-syringe mixing activates the product just prior to application. The activated 40% hydrogen peroxide is conveniently delivered via syringe and applied to teeth for whitening.

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 Boost whitening is an excellent in-office treatment for less severe, more mild staining as well as tetracycline staining. Patients should see immediate results and, in most cases, their teeth will continue to whiten 24–48 hours after the treatment.

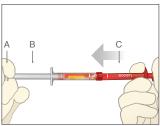
#### **INSTRUCTIONS**

IMPORTANT NOTE: After mixing, Opalescence® Boost® 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 gauzes used are rinsed with water.

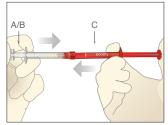
WARNING: Clinician, assistant, and patient must wear protective eyewear with side shields when mixing and applying Opalescence Boost in-office whitening gel.



Check to see that the syringes are securely attached. Depress the small clear plunger (A) into the middle small clear syringe (B) to rupture the internal membrane and combine whitening agent and activator.



2. Press the plunger of the red syringe (C) in, pushing all contents into the clear syringe (B).



3. Press the clear plunger completely back into the red syringe (C). To thoroughly mix activator with whitening gel, push stems back and forth continually with thumbs and mix a minimum of 50 times rapidly (25 times each side).



4. Press all mixed gel into the RED syringe. Separate the two syringes and attach the Micro 20 ga FX® tip onto the red syringe. Check the flow on a cotton gauze or mixing pad prior to applying it intraorally. If resistance is met, replace the tip and recheck the flow.



 Place Ultradent IsoBlock™ bite block and self-supporting plastic cheek retractors. Completely rinse and air dry teeth and gingiva.



6. Securely attach a Micro 20 ga tip to an OpalDam® resin barrier syringe and check flow. Express a continuous bead along the gingival margin, overlapping approximately 0.5 mm onto the enamel. Begin and finish the bead one tooth beyond the most distal tooth that is being whitened, building the barrier 4–6 mm wide and 1.5–2.0 mm thick. Express the resin through any open embrasures.

#### BEFORE AND AFTER



Before Opalescence Boost in-office whitener.



After two 20-minute applications of Opalescence Boost whitening treatments.



Before Opalescence Boost in-office whitener.



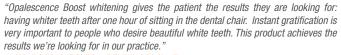
After three 20-minute applications of Opalescence Boost whitening treatments.



7. Light cure the OpalDam resin barrier for 20 seconds per arch using a scanning motion. Check the resin cure with an instrument, using caution to not disrupt the seal.



8. Apply a 0.5–1.0 mm thick layer of the gel to the labial surface of the tooth. Allow the gel to remain on the teeth for 20 minutes per application.



---DR. RONALD FISHER -- DELRAY BEACH, FL



9. Suction gel from teeth using the Ultradent® Luer Vacuum Adapter and SST™ tip or a surgical suction tip. Do not use water. Repeat steps 8–9. Stop when desired results are achieved, or if the three applications per visit maximum have been met.



10. After the final application is complete and all visible gel is removed, thoroughly rinse the teeth with an air/water spray and high volume suction.

#### 4750-US Opalescence Boost 40% Intro Kit

- 4 x 1.2 ml Opalescence Boost/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
- 10 x Micro 20 ga tips
- 10 x Micro 20 ga FX tips





11. Gently slide the tip of a dental instrument beneath the OpalDam resin barrier and lift it off. Check for and remove any interproximal remnants.



11. Evaluate the shade change. If additional whitening is desired and no sensitivity is noted, reschedule patient in 3–5 days for repeat treatment or dispense take-home whitening treatment.

#### 4751-US Opalescence Boost 40% Patient Kit

- 2 x 1.2 ml Opalescence Boost/Activator syringes
- 1 x 1.2 ml OpalDam Green syringe
- 1 x Shade guide card
- 1 x IsoBlock
- 5 x Micro 20 ga tips
- 5 x Micro 20 ga FX tips



4754-US Opalescence Boost 40% Syringe 20pk

1.2 ml syringes



# WHITEN

# **Opalescence** Endo

NON-VITAL "WALKING BLEACH" - 35% HYDROGEN PEROXIDE











Black Mini® Tip page 128

- 35% hydrogen peroxide
- Easy to place inside pulp chamber
- 3–5 day treatment

Opalescence Endo non-vital whitening gel is formulated specifically to whiten endodontically treated discolored teeth using the "walking bleach" technique.

#### **BEFORE AND AFTER**





Before

After.





Before.

After.





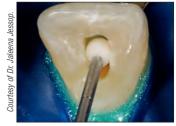
Before.

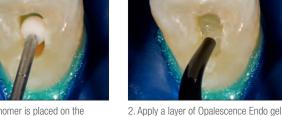




After.

#### **PROCEDURE**





1. A glass ionomer is placed on the floor of the pulp chamber to seal the obturation from penetration of the hydrogen peroxide.

2. Apply a layer of Opalescence Endo gel to the chamber.





3. Insert a cotton pellet inside the chamber.

4. Deliver mixed UltraTemp® Regular filling material directly to site.





5. Easily wipe away excess with a wet cotton ball or gauze before it sets.

Finished. Repeat every 3-5 days until desired results are achieved.

Note: Not intended for use in traumatized teeth, any sign of cervical resorption, or after multiple whitening attempts.

#### MUST BE REFRIGERATED



1. realityesthetics.com



Our next generation Ultrapro Tx prophylaxis equipment family features an ergonomic handpiece, innovative prophy angle cup designs, and splatter-free prophy pastes. Together they offer a powerful, comfortable, and effective solution to all your polishing needs.



# Opalustre® and OpalCups™

CHEMICAL AND MECHANICAL ABRASION SLURRY















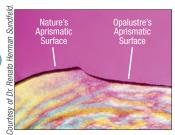
OpalCups Bristle

**OpalCups Finishing** 

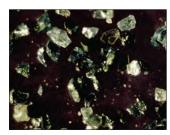
- Permanently removes superficial white and brown stains
- Provides minimally invasive, permanent treatment for mild fluorosis
- Low 6.6% hydrochloric acid concentration aids in chemical stain removal
- Silicon carbide microparticles provide gentle mechanical abrasion
- Features optimum viscosity for precise abrasion and control of the slurry
- Autoclavable OpalCups minimize splatter

Opalustre 6.6% hydrochloric acid slurry contains silicon carbide microparticles. This combination provides chemical stain removal along with gentle mechanical abrasion. 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. Both types of OpalCups are autoclavable through a limited number of cycles.

Use Opalustre slurry and OpalCups to quickly remove unsightly enamel decalcification defects that are less than 0.2 mm in depth. Abrasion slurries are ideal for superficial white and brown demineralization due to enamel mottling from fluorosis.<sup>2</sup> This treatment can be classified under ADA insurance code 9970: enamel microabrasion.



Chemical and mechanical abrasion produce a natural-looking surface.



Silicon carbide microparticles contained in Opalustre slurry.

#### INSTRUCTIONS - RUBBER DAM



1. Before.



2. After rubber dam placement, apply Opalustre slurry to discolored enamel using the syringe.



3. Use bristle cup to compress Opalustre slurry on tooth surface. Intermittent rinsing and inspection is recommended. Finish treatment by polishing with Opal Cups finishing.



4. After enamel microabrasion and 21 days of using Opalescence® whitening gel.

#### INSTRUCTIONS - OPALDAM



1. Isolate mottled teeth with OpalDam resin barrier. Apply Opalustre slurry directly out of the syringe with a Black Mini® 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.



4. Result of the Opalustre slurry treatment. Upper: before. Lower: after.

realityesthetics.com. 2. Croll TP, Segura A, Donly KJ. Enamel microabrasion: new considerations in 1993. Pract Periodontics Aesthet Dent. 1993;5(8):19-28; quiz 29.



#### **BEFORE AND AFTER**





Remove or significantly reduce mild to moderate decalcification related to orthodontic treatment with a few applications of Opalustre® slurry. Apply with stiff bristle cups and 10:1 gear reduction handpiece with firm pressure.





Enamel decalcification corrected after one application of Opalustre® slurry using OpalCups bristle cups and 10:1 gear reduction handpiece with firm pressure.





Remove or significantly reduce mild to moderate decalcification with a few applications of Opalustre® slurry.

# 554 Opalustre Kit 4 x 1.2 ml Opalustre syringes 10 x Each OpalCups bristle and finishing 20 x White Mac tips 555 Opalustre Syringe 4pk 1.2 ml syringes 5800 OpalCups Bristle 20pk 5799 OpalCups Finishing 20pk

## Interproximal Cleaner, see page 125.





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

## Fluoride Varnish, see page 124.









#### WALTERBERRY



#### ORANGE CREAM



#### **COOL MINT**



#### **BUBBLE GUM**



#### **CARAMEL**

- Patented adhesion-promoting agent for enhanced retention
- Superior fluoride release and uptake
- Smooth, nongritty texture
- Nearly invisible appearance
- · Certified nut free and gluten free









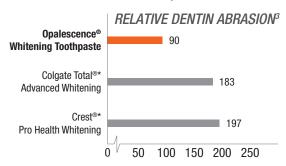




- Unique formulation is ideal for promoting oral health and maintaining bright, white smiles when used daily
- Low abrasion formulation protects enamel while removing surface stains
- Efficient, quick fluoride release
- Available in Original and Sensitivity Relief formula
- Triclosan-free formula
- · Cool Mint flavor

Opalescence Whitening Toothpaste¹ assists in the prevention of dental caries as it helps patients maintain whitened smiles. It is also gentle enough to use every day. The Original formula offers a fresh, Cool Mint flavor patients love, and a high fluoride uptake that promotes oral health. The Sensitivity Relief formula has all the benefits of the original, plus potassium nitrate to help reduce sensitivity.

# Removes surface stains to lighten teeth two shades in just one month!<sup>2</sup>



Opalescence Whitening Toothpaste has lower abrasiveness than other leading whitening toothpastes.<sup>3</sup>



402 Opalescence Whitening Original Toothpaste 24pk
 3472 Opalescence Whitening Sensitivity Toothpaste 24pk
 1.0 oz tubes



401 Opalescence Whitening Original Toothpaste 12pk
 3470 Opalescence Whitening Sensitivity Toothpaste 12pk
 4.7 oz tubes

\*Trademark of a company other than Ultradent. 1. This toothpaste does not contain peroxide. 2. Gultz J, Kaim J, Scherer W. Whitening efficacy of a whitening toothpaste creme [IADR abstract 2747]. *J Dent Res.* 1998;77(suppl 2):975. 3. Schemehorn BR. Relative dentin abrasion test on dentifrices. Data on file.

## Toothbrushes, see page 126.





**Every Smile** 





**Display Inserts** UltraSeal XT plus Display Inserts Display Brochures Window Clings Mirror Clings **Opalescence Gift Certificate Enamelast After Care Treatment Card** Opalescence Toothpaste Patient Handout **Opalescence Gift Bags Ultradent Candles** 



Ceiling Posters

Office Flyers

**Display Stands** 



Get your patients excited with marketing materials designed specifically for your practice.

# Opalescence® Small Posters 1pk 16" x 20"





Plan.

1007445 - PF

5 - PF 1007529 - PF





1007444 - Boost

1007530 - Boost





1007446 - Go

1007528 - Go







1007468

1007467

1007469





1007470

1007471





1007472

1007473

800.552.5512

# Opalescence® Large Posters 1pk 24" x 36"







1007442 - PF

1007441 - Boost

1007443 - Go







1007535 - PF

1007534 - Boost

1007536 - Go







1007460

1007461

1007464





1007462 - PF

Teeth whitening to fit your lifestyle



1007466 - Go

## Opalescence® Ceiling Posters 1pk 24" x 24"

Place these on the ceiling above your dental chairs. Patients will see them and ask for more information about whitening treatments.



1007439 - PF



1007438 - Boost



1007440 - Go



1007533 - PF



1007531 - Boost



1007532 - Go



1007458



1007459

# Opalescence® Statement Stuffers 50pk



1007448 - PF



1007477 - Boost



1007449 - Go



1007476 - PF



1007475 - Boost



10074474- Go

# Opalescence® Office Flyers 50pk

Customize it! Visit ultradent.com to personalize these products using our printing template.



1007586 - PF



1007587 - Boost



1007588 - Go



1007398 - PF



1007400 - Boost



1007397 - Go

## Opalescence® Appointment Cards 50pk

Printed on a perforated 8 1/2" x 11" sheet with a blank back so you can print a message and your address using an inkjet or laser printer.





1007436 - PF



1007435 - Boost



1007437 - Go



1007456



1007457



1007455

# Plastic Display Stands 1pk



# Opalescence $^{\tiny{\circledR}}$ Displays 1pk Free of charge



# Opalescence® Whitening Menu 50pk

Educate patients on the many whitening options available in your office and set your offerings apart from the many over-the-counter whiteners available.



# Opalescence® Custom Tray Patient Instructions 50pk

Use to quickly and easily explain the take-home whitening process and procedure to your patients.



80040

# Opalescence® Display Inserts 1pk







1007394 - PF

1007395 - PF

1007396 - PF







1007392 - Go

1007393 - Go

1007391 -Go - Ortho





1007374 - Boost

1007390 - Boost

# UltraSeal XT® plus Display Inserts 1pk





84094

1003984

# Opalescence® Display Brochures 50pk



1007625 - PF



1007626 - PF



1007628 - PF



1007629 - PF Spanish



80035 - PF Clinical Patient



1007634 - Boost



1007635 - Boost



1007636 - Boost Spanish



1007631 - Go



1007631 - Go



1007632 - Go Spanish



1007633 - Go Ortho

# UltraSeal® XT plus Display Brochures 50pk



1003983



1006735

# UltraSeal® XT plus and Enamelast® Display Brochures 1pk



84093



1003723

# MARKETING MATERIALS



Tooth Whitening, see page 152–154.



# Opalescence® Small Window Cling 1pk $3'' \times 6''$

Place these on your windows or mirrors so patients will see them and ask for more information about whitening treatments.



98761 - Blue

## Enamelast® After Care Treatment Card 25pk



1002791

# Opalescence® Large Window Clings 1pk 7" x 18 1/2"



98755 - PF Blue



98757 - Boost Red



98756 - PF White



1006233 - Go Color

## Opalescence® Toothpaste Handout 25pk



1004858

# Opalescence® Mirror Cling 1pk 5 1/2" x 7"



1005909 - White

# Opalescence® Gift Bags Note: Gift bags only. Product not included.

Description	Part #	Price	
Frosted Plastic 10pk	8752		
Small Organza 10pk	8751		
Large Organza 10pk	8750		
Carryall 1pk	5337		



## Opalescence® Gift Certificate 1pk



# Ultradent® Candles 1pk



981 Walterberry



980 Red Rock



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Sodium Hypochlorite Solution         43           SoftEZ Tip         130           Sof-Tray Classic Sheets         157           SpeedMix         13           Spot Remover         142           Synthetic Rubber Dam         42,106           STARbrush         108           Statement Stuffers         169           Stainless Steel Files         30,31           SuperCurve         113           Surgical Suction Tip         130           SYT Tip         130           SYTINGES         127-134           Syringe Covers         131           Syringes, 1.2 ml Plastic         131           Syringes, 5 ml Plastic         131           Syringes, Empty         131           Syringes, Skini         37,131           Tab-Matrix         113           Take-Home Whitening         152-154,155           Template, Direct Veneer         26           Temporary Crown/Bridge Material         14           Temporary Veneer Cement         89           Thermo Clone VPS Accessories         89           Thermo Clone VPS Dispensing Gun         89           Thermo Clone VPS Impression Material         88-90           Thermo Clone VP	Toothpicks         125           Tooth Whitening Reference Guide         150           Touch Probe         29           Topical Anesthetic Gel         105           TransLume Lenses         70           Transient Root Sensitivity         125           Tray Adhesive         89,92           Tray Cases         154           Tray Fabrication         156           Tray Sheets         157           Triodent AdaptiVe Wedge         115           Triodent Forceps         114           Triodent Forceps         114           Triodent Super Curve Matrix         113           Triodent Tab-Matrix         113           Triodent V3 Sectional Matrix Kits         112           Triodent V3 System         112           Triodent V3 Tab-Matrix         113           Triodent ClearMetal Matrix         113           Triodent Wedges         115           Triodent Wedges         115           Triodent Wave-Wedge         115           Triodent Wave-Wedge	VALO Mounting Bracket.       .69,70         VALO Ortho LED Corded Curing Light       .92         VALO Ortho LED Cordless Curing Light       .95         Varnish, Fluoride       .124         Veneer Cement       .8         Veneer Luting Resin       .9         Veneer Template System       .26         Vinyl Cutters       .71,157         Vinyl Polysiloxane       .97         Vinyl Polysiloxane Impression Material       .88–90         ViscoStat Clear       .14         ViscoStat Hemostatic       .14         Vit-I-escence       .18–20         Vit-I-escence Singles       .20         Waiting Room Brochures       .17         Walking Bleach       .162         Wedge       .11         Wedge       .11         Wetting Resin       .22         Wheels, Finishing       .78,81,83         White Mac Tip       .13         White Mini Tip       .13         Whitening In-Office       .160–161,162         Whitening, Non-Vital Teeth       .16         Whitening Reference Guide       .15         Whitening Take-Home       .152–154,15         Whitening Toothpaste       .126,166
Sodium Hypochlorite Solution         43           SoftEZ Tip         130           Sof-Tray Classic Sheets         157           SpeedMix         13           Spot Remover         142           Synthetic Rubber Dam         42,106           STARbrush         108           Statement Stuffers         169           Stainless Steel Files         30,31           SuperCurve         113           SST Tip         130           SYRINGES         127-134           Syringe Covers         131           Syringe Organizers         134           Syringes, 1.2 ml Plastic         131           Syringes, 5 ml Plastic         131           Syringes, Empty         131           Syringes, Skini         37,131           Tab-Matrix         113           Take-Home Whitening         152-154,155           Template, Direct Veneer         26           Temporary Crown/Bridge Material         14           Temporary Veneer Cement         8           Thermo Clone VPS Accessories         89           Thermo Clone VPS Dispensing Gun         89           Thermo Clone VPS Impression Material         88-90           Thermo Clone VPS M	Toothpicks         125           Tooth Whitening Reference Guide         150           Touch Probe         29           Topical Anesthetic Gel         105           TransLume Lenses         70           Transient Root Sensitivity         125           Tray Adhesive         89,92           Tray Cases         154           Tray Fabrication         156           Tray Sheets         157           Triodent AdaptiVe Wedge         115           Triodent Forceps         114           Triodent Forceps         114           Triodent Super Curve Matrix         113           Triodent Tab-Matrix         113           Triodent V3 Sectional Matrix Kits         112           Triodent V3 Sectional Matrix Kits         112           Triodent V3 Tab-Matrix         113           Triodent V3 Tab-Matrix         113           Triodent Wedges         115           Triodent Wedges         115           Triodent Wedges         115           Triodent Wave-Wedge         115           Triodent Wave-Wedge         115           Triodent Wave-Wedge         115           Triodent Wave-Wedge         115           Triodent Wave-Wed	VALO Mounting Bracket.       .69,70         VALO Ortho LED Corded Curing Light       .92         VArnish, Fluoride       .124         Veneer Cement       .82         Veneer Luting Resin       .92         Vinyl Cutters       .71,157         Vinyl Polysiloxane       .97         Vinyl Polysiloxane Impression Material       .88–90         ViscoStat Clear       .14         ViscoStat Hemostatic       .140         Vit-I-escence       .18–20         Waiting Room Brochures       .17         Walking Bleach       .162         Wave-Wedge       .115         Wedge       .115         Wedge Meels, Finishing       .78,81,83         White Mac Tip       .13         White Mac Tip       .13         White Mini Tip       .13         Whitening In-Office       .160–161,162         Whitening Reference Guide       .15         Whitening Reference Guide       .15         Whitening Take-Home       .152–154,156         Whitening Trays       .15
Sodium Hypochlorite Solution         43           SoftEZ Tip         130           Sof-Tray Classic Sheets         157           SpeedMix         13           Spot Remover         142           Synthetic Rubber Dam         42,106           STARbrush         108           Statement Stuffers         169           Stainless Steel Files         30,31           SuperCurve         113           Surgical Suction Tip         130           SYT Tip         130           SYRINGES         127-134           Syringe Covers         131           Syringes, 1.2 ml Plastic         131           Syringes, 5 ml Plastic         131           Syringes, Empty         131           Syringes, Skini         37,131           Tab-Matrix         113           Take-Home Whitening         152-154,155           Template, Direct Veneer         26           Temporary Crown/Bridge Material         14           Temporary Veneer Cement         8           Thermo Clone VPS Dispensing Gun         89           Thermo Clone VPS Dispensing Material         8-90           Thermo Clone VPS Mixing Tips         134           Thermo Clone VPS	Toothpicks         125           Tooth Whitening Reference Guide         150           Touch Probe         29           Topical Anesthetic Gel         105           TransLume Lenses         70           Transient Root Sensitivity         125           Tray Adhesive         89,92           Tray Cases         154           Tray Fabrication         156           Tray Sheets         157           Triodent Adaptive Wedge         115           Triodent Forceps         114           Triodent SuperCurve Matrix         113           Triodent V3 Ring         112           Triodent V3 System         112           Triodent V3 System         112           Triodent V3 Tab-Matrix         113           Triodent V-Wedge         115	VALO Mounting Bracket.         .69,70           VALO Ortho LED Corded Curing Light         .94           VALO Ortho LED Cordless Curing Light         .95           Varnish, Fluoride         .124           Veneer Cement         .82           Veneer Luting Resin         .95           Veneer Template System         .26           Vinyl Cutters         .71,157           Vinyl Polysiloxane         .97           Vinyl Polysiloxane Impression Material         .88–90           ViscoStat Clear         .14           ViscoStat Hemostatic         .14           Vit-I-escence         .18–20           Waiting Room Brochures         .17           Walking Bleach         .16           Wave-Wedge         .11           Wedge         .11           Wetting Resin         .23           Wheels, Finishing         .78,81,83           White Mac Tip         .13           White Moni Tip         .13           Whitening In-Office         .160–161,162           Whitening Reference Guide         .15           Whitening Reference Guide         .15           Whitening Take-Home         .152–154,155           Whitening Treatment Protocol         .149
Sodium Hypochlorite Solution         43           SoftEZ Tip         130           Sof-Tray Classic Sheets         157           SpeedMix         13           Spot Remover         142           Synthetic Rubber Dam         42,106           STARbrush         108           Statement Stuffers         169           Stainless Steel Files         30,31           SuperCurve         113           Surgical Suction Tip         130           SYT Tip         130           SYRINGES         127-134           Syringe Covers         131           Syringes, 1.2 ml Plastic         131           Syringes, 5 ml Plastic         131           Syringes, Empty         131           Syringes, Skini         37,131           Tab-Matrix         113           Take-Home Whitening         152-154,155           Template, Direct Veneer         26           Temporary Crown/Bridge Material         14           Temporary Veneer Cement         8           Thermo Clone VPS Dispensing Gun         89           Thermo Clone VPS Impression Material         88-90           Thermo Clone VPS Mixing Tips         134           Thermo Clone VP	Toothpicks         125           Tooth Whitening Reference Guide         150           Touch Probe         29           Topical Anesthetic Gel         105           TransLume Lenses         70           Transient Root Sensitivity         125           Tray Adhesive         89,92           Tray Cases         154           Tray Fabrication         156           Tray Sheets         157           Triodent Adaptive Wedge         115           Triodent Forceps         114           Triodent SuperCurve Matrix         113           Triodent V3 Ring         112           Triodent V3 Sectional Matrix Kits         112           Triodent V3 Tab-Matrix         113           Triodent V3 Tab-Matrix         113           Triodent V4 Wedge         115	VALO Mounting Bracket.         .69,70           VALO Ortho LED Corded Curing Light         .92           VALO Ortho LED Cordless Curing Light         .92           Varnish, Fluoride         .124           Veneer Cement         .8           Veneer Luting Resin         .9           Veneer Template System         .26           Vinyl Cutters         .71,157           Vinyl Polysiloxane         .97           Vinyl Polysiloxane Impression Material         .88-90           ViscoStat Clear         .14           Vit-I-escence         .18-20           Vit-I-escence Singles         .20           Waiting Room Brochures         .17           Walking Bleach         .16           Wave-Wedge         .11           Wedge.         .11           WedgeGuard         .11           Wetting Resin         .23           Wheels, Finishing         .78,81,83           White Mac Tip         .13           White Mini Tip         .13           Whitening In-Office         .160-161,162           Whitening Menu, Opalescence         .17           Whitening Reference Guide         .150           Whitening Take-Home         .152-154,155
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