

# SCIENCE AND DENTISTRY BONDED

### Easy Clean-up

Quick and easy removal of excess cement

### 5 Reasons to try TheraCem®

### Highly Radiopaque

Easily identified on a radiograph



### Bonds to Zirconia

Strong bond to zirconia and most substrates

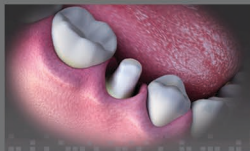
### Fluoride and Calcium Release

Continuous ion release

### Alkaline pH After Bonding

Transitions from acidic to alkaline pH in minutes

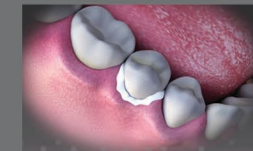
### TECHNIQUE



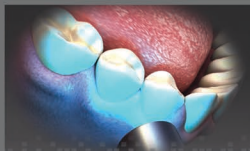
(1) Clean and prepare tooth



(2) Dispense TheraCem into the crown



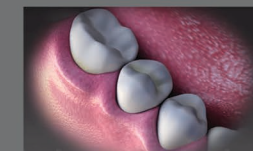
(3) Place the crown onto the preparation



(4) Tack cure the margins for 2 to 3 seconds



(5) Remove excess material



(6) Inspect the margins. As needed, light cure for 20 - 30 secs. or allow to self-cure

\* Refer to complete instructions for detailed techniques.

## INTRAORAL REPAIR KIT

Repair of Porcelain-Fused-to-Metal or Zirconia/Alumina Restorations



(1) Isolate the area to be repaired. Remove the glaze and bevel (45 degrees) the porcelain around the area to be repaired. Sandblast or abrade with a coarse diamond bur. Rinse with water and air dry.



(2) Place Barrier Gel on the gingival tissue and porcelain to protect areas where etching is not desired.



(3) Apply 9.5% Porcelain Etchant to the dry porcelain surface for 90 secs. Suction the etchant with high volume evacuation, rinse with water and air dry. The etched porcelain should appear dull and frosty.



(4) Clean the etched porcelain with Uni-Etch® w/ BAC or Select HV® w/BAC and agitate for 20 secs to remove any salts. Rinse and dry thoroughly.



(5) Apply 1 coat of silane (Porcelain Primer or Bis-Silane™) to the etched porcelain and allow to dwell for 30 secs. Dry with warm air syringe.



(6) Apply 1 coat of Z-Prime™ Plus to the exposed metal / zirconia / alumina and dry with an air syringe for 3-5 seconds.



(7) If metal masking is required, dispense one drop each of Catalyst & Base onto a mixing pad and mix with a brush tip. Apply a thin coat of Opaquer only to the metal surface. Allow to self cure, or light cure for 5 seconds.



(8) Apply a thick layer of Porcelain Bonding Resin to the repair site. Spread a hybrid composite (Aelite™ All-Purpose Body) evenly over the surface and light cure, finish/polish.



(9) Place Bis-Cover™ LV to seal and glaze the composite.

## ADHESIVES & PRIMERS



### ALL-BOND UNIVERSAL

The First TRULY UNIVERSAL Dental Adhesive



### ONE-STEP®

light-cured single component adhesives that bond to a multitude of dental substrates, including self-cured and dual-cured materials.



### Z-PRIME™ PLUS

significantly enhances bond strengths to Zirconia, Alumina and Metal substrates.



### PORCELAIN PRIMER™

used to improve bonding between porcelain substrates and resin cements.



### THERABASE

TheraBase is a dual-cured, calcium and fluoride releasing, self-adhesive base/liner.



### ZIRCLEAR™

cleaning gel designed for the non-abrasive cleaning of the bonding surfaces of zirconia (and other prosthetic restorations) after intraoral try-in

### THERACAL PT

Is a biocompatible, dual-cured, resin-modified calcium silicate designed for pulpotomy treatment.



### ETCH-37™ w/BAC

37% semi-gel phosphoric acid etchant available with Benzalkonium Chloride (BAC) and designed for etching tooth structure prior to bonding



### PORCELAIN ETCHANT

Improve the adhesive bond between porcelain and resin cements.



### CAVITY CLEANSER™

2% chlorhexidine digluconate aqueous solution intended for cleansing and moistening, re-wetting cavity preparations.

BISCO is Imported & Distributed in the Philippines by:



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OTANER DENTAL & MEDICAL DISTRIBUTION INC.  
610-A-1 6th Flr. Doña Felisa Syjuco Bldg., Remedios cor. Taft Avenue, Malate, Manila, Philippines



# 5 Reasons to Try Duo-Link Universal™

- 1 Universal**  
For all cementation procedures\* and is also ideal for CAD/CAM restorations
- 2 Highly radiopaque**  
Easily identified on radiographs for quick and effective diagnosis
- 3 Extremely Easy Clean-Up**  
Formulated for quick and easy removal of excess cement
- 4 Esthetic Shades**  
Universal shade can be used for most restorations while the Milky White shade can be used to mask some darker tooth preparations
- 5 Low Film Thickness**  
For complete seating of any restoration



## RESTORATION TREATMENT

### PORCELAIN ETCHED FROM LAB

Glass Ceramics/porcelain (silica-based) or Lithium Disilicate/Silicate

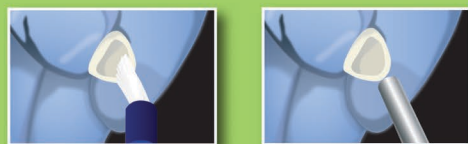


- 1 Apply PORCELAIN PRIMER to restoration
- 2 After try-in, decontaminate the internal surface

OR

### SANDBLASTED FROM LAB

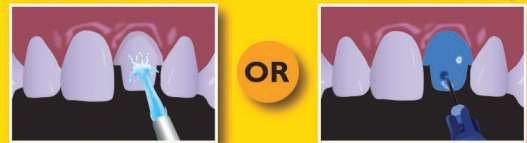
Metal, Zirconia, Alumina, Composite



- 1 Apply Z-PRIME Plus to restoration
- 2 After try-in, decontaminate the internal surface

## TOOTH PREPARATION AND CEMENTATION

Choose SELF-ETCHING or TOTAL-ETCHING technique



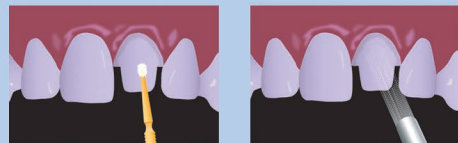
OR

**1 SELF-ETCHING:**  
Wash thoroughly with water spray. Remove excess water (do not desiccate)

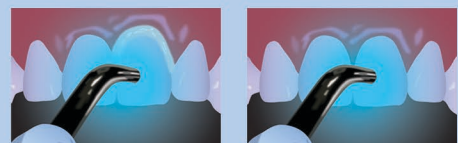
**TOTAL-ETCHING:** Prepare cavity. Wash thoroughly with water spray, apply phosphoric acid etchant and rinse thoroughly. Preparation should be visibly moist



- 4 Light cure for 10 seconds
- 5 Apply DUO-LINK UNIVERSAL to restoration



- 2 Apply ALL-BOND UNIVERSAL
- 3 Air-dry



- 6 Seat the restoration
- 7 Optional: Light cure for 10 seconds

\* Refer to complete instructions for detailed techniques.

## TheraCal LC®

# 5 Reasons to Try TheraCal LC® Today!



**1 Calcium Release**  
Hydroxyapatite formation<sup>1,2</sup>

**3 Promotes Healing<sup>1</sup>**  
Liner insulates the pulp<sup>3</sup>, providing virtually no post-operative sensitivity

**2 Alkaline pH**  
Promotes healing and apatite formation<sup>2,4</sup>

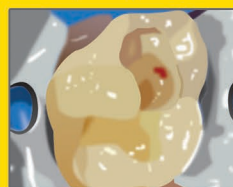
**4 Insulation**  
Forms a protective barrier that insulates the pulp<sup>5,6</sup>

**5 Moisture tolerant and Radiopaque**  
Can be placed under restorative materials and cements

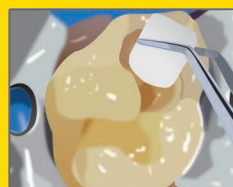


### TECHNIQUE 1

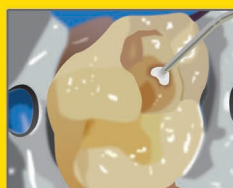
**Pulp Exposures (Direct Pulp Capping)**



- (1) Under rubber dam isolation, complete cavity preparation.



- (2) Control bleeding by placing a sterile cotton pellet dampened with sterile saline. Blot preparation with cotton pellet. Leave visibly moist.



- (3) Apply TheraCal LC directly to the exposed pulp in incremental layers. Layer must not exceed 1 mm in depth. Cover all the exposed areas, extend TheraCal LC at least 1 mm onto sound dentin surrounding the exposure. Light cure between layers



- (4) Light cure each increment for 20 seconds. Place desired adhesive, base, and/or restoration following manufacturer's directions. Continue restoring tooth.

### TECHNIQUE 2

**Deep Preparations (Indirect Pulp Capping), Large Preparations (Liner), Base or Sealer**



- (1) Isolate the tooth and perform conventional cavity preparation. Remove all infected carious tooth structure. Leave preparation visibly moist.



- (2) Apply TheraCal LC directly to the cavity floor of the preparation in incremental layers. Layer must not exceed 1 mm in depth. Manipulate into a smooth surface covering all deep dentin areas. Light cure between layers.



- (3) Light cure each increment for 20 seconds. Place desired adhesive, base, and / or restoration following manufacturer's directions. Continue restoring tooth.

\* Refer to complete instructions for detailed techniques.

The Perfect *Choice* for Color Stable and Extremely Strong Veneers

# Choice 2



### OPTIONAL



1. Prepare the internal surface of the restoration as instructed by the laboratory.
  - a. Porcelain/Lithium Disilicate: If needed, etch the veneer with hydrofluoric acid (4% Porcelain Etchant or 9.5% Porcelain Etchant) according to the manufacturer's instructions.
  - b. Apply a thin coat of silane (Porcelain Primer) to the internal surface. Wait for 30 seconds, or dry with warm air.



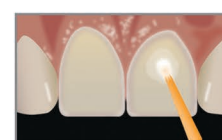
2. Remove the temporary restorations and clean the preps with Cavity Cleanser™ and pumice slurry. Rinse thoroughly.



3. Try in the restorations using the corresponding shade of water-soluble try-in paste. Remove the veneers and either clean with etchant and rinse thoroughly or ultrasonicate in water of alcohol in 2-3 min. Dry the restorations.



4. Isolate. Etch preps with Uni-Etch w/ BAC or Select HV Etch w/BAC for 15 seconds, then rinse thoroughly.



5. Dispense All-Bond Universal® in a mixing well. Apply 2 separate coats, agitating each coat for 10-15 secs.



6. Gently air dry until there is no visible movement of the adhesive.



7. Light cure for 10 seconds.

### OPTIONAL



8. Apply a thin layer of HEMA-free resin (Porcelain Bonding Resin) to the internal surface of the veneer. Do NOT light cure.



9. Using a light-cured resin cement (Choice 2), fill the internal surface of the restoration with the cement.



10. Seat with gentle, passive pressure and light-cure for 2-3 seconds to tack the veneer into place. Remove excess cement, then light cure each veneer for 40 seconds.

