

***Ammdent** products are from a stable of ISO 13485:2016 Certified Company and it has been in operation since 1996. The Company is pioneer in India in the field of preventive dentistry and Endodontics products. All the products are well known for their Quality and Reliability and CE Certified. The Company is committed to bring innovative products to dentists with strong quality assurance and performance guarantee.*



AMMDENT

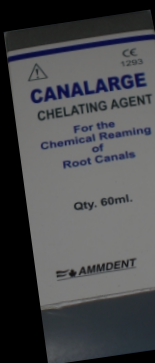
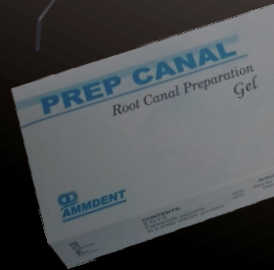


AMMDENT

Endodontics, Preventive & Cosmetic Dentistry

Bigger
Smiles

*Endodontics,
Preventive
&
Cosmetic
Dentistry*





About us

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The Company is Pioneer in India in the field of preventive dentistry and Endodontic products.

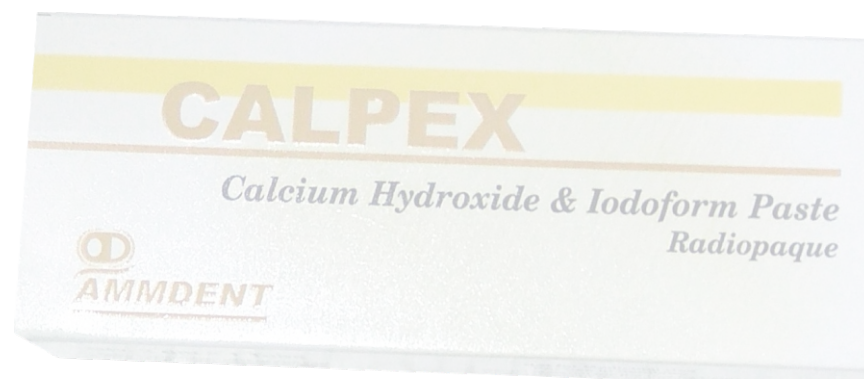
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Contect us

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Our Product Catagory

Endodontic Material

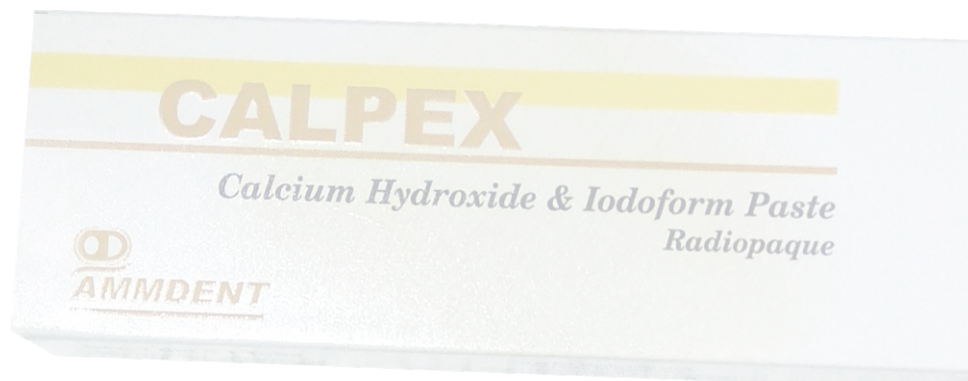
Orthodontics Material

Filling Material

Composites

Esthetics

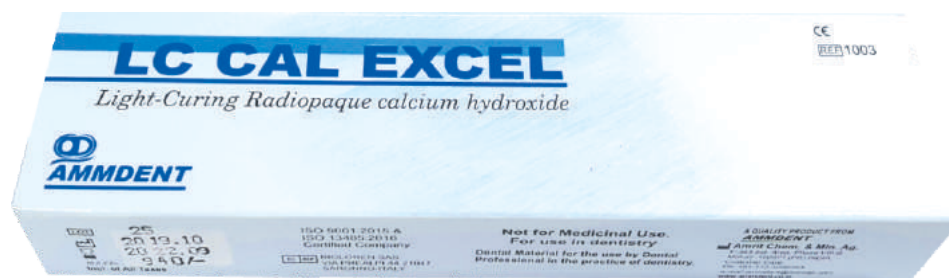
Cements





LC CAL EXCEL

Light-Curing Radiopaque calcium hydroxide



Instructions for use

This is a light-curing radiopaque one-component calcium hydroxide material.

Field of application:

- As a liner for indirect pulp capping
- As liner under all filling materials
- As a protection against acid when applying the total etch technique.

To prevent marginal leakage and infiltration of bacteria in the cervical/ approximal margins, a permanent isolation is recommended.

LC CALEXCEL can be directly applied from the tube. In case of linings of more than 1 mm apply and polymerize layer.

Cure LC CALEXCEL with halogen light. Keep the light source as close as possible to the surface (approx. 1-2 mm) and cure for at least 40-60 s in case of more distance extend curing time. Carefully remove excess materials with a rotating instrument and apply the filling according to the manufacturer's instructions.

Indications, precautions:

LC CALEXCEL adheres to materials, e. g. crown and bridge materials,, temporary sealants on methacrylate basis, certain impression materials (e. g. polyether). This could lead to removal of the lining (core build-up). In such cases it is recommended to apply an isolating agent (e.g. vasline, glycerine gel or similar). Remove isolating agent prior to definite application.

The consistency of LC CALEXCEL does not allow to remove excess material with a probe, this could eventually remove the whole lining (use a rotating instrument).

After use of LC CALEXCEL avoid direct light (operation lamp, sunlight) and apply the material immediately.

LC CALEXCEL contains calcium hydroxide, TEGDMA, BHT, UDMA and amine. Do not apply the material in case of patients with known allergies against these ingredients.

Eugenol and other contaminations (e.g. thymol) prevent the polymerization, therefore avoid contact with these materials.

Too short curing times and insufficient light intensity lead to incomplete curing, therefore check the halogen lamp/ light guide regularly.

Application: The dental surfaces have to be dried thoroughly and contamination has to be avoided. The preparation corresponds to the rules of the usual filling technique. In direct proximity of the pulp the application of an aqueous calcium hydroxide preparation is recommended. (CAL- EXCEL)

Presentation: 3.5 gms tube with 4 applicator tips.

Our preparations are developed for use in dentistry. As far the application of the products delivered by us is concerned, our verbal and/ or written information has been given to the best of our knowledge and without obligation, our information and / or advice do not relieve you from examining the materials delivered by us as to their suitability for the intended purposes of application. As the application of our preparations is beyond our control, the user is fully responsible for the application. of course, we guarantee the quality of our preparations in accordance with the existing standards and corresponding to the conditions as stipulated in our general terms of sale and delivery.

Dental Material for the use by Dental Professional in the practice of dentistry.
Not for medicinal use.



LC GI LINE



Light Curing radiopaque glass Ionomer Lining



INSTRUCTIONS FOR USE

LC GI LINE is a light cure, radiopaque resin-based glassionomer liner for light cure composites.

Its field of application is:

- ? lining of cavities for following filling procedures
- ? lining of cavities to improve marginal behaviour

Application

Clean and dry the cavity. Remove the cap from the LC GI LINE -syringe and attach a NeedleTip. Squeeze out the first small drop on a pad to ensure safe handling of LC GI LINE.

Before applying LC GI LINE paste use of a radiopaque calcium hydroxide liner, e.g. CALCIUM HYDROXIDE LINE in areas in proximity of the pulp (pulp protection) is recommended. Dentin should be primed with a suitable dentin priming agent .

Apply then LC GI LINE in a thin layer until the desired thickness is reached. Light cure LC GI LINE for **40 seconds**. Do not apply to the cavity edges and remove any paste sticking to them. Then proceed with light cure composites, e.g. LC NANOFILL.

Contraindications

Contraindications or interactions are not known.

Storage

Do not store above 25 °C (78 °F). Cool storage prolongs shelf life.

Additional Notes:

- ? Do not use any resin to adjust viscosity of LC GI LINE.
- ? Do neither store the composite material in proximity of eugenol containing products, nor let the composite allow coming into contact with materials containing eugenol. Eugenol can impair the hardening of the composite and cause discoloration.
- ? Avoid contact of resin pastes with skin, especially by anyone having known resin allergies.

Warranty

AMMDENT warrants this product will be free from defects in material and manufacture. AMMDENT makes no other warranties including any implied warranty of merchantability or fitness for a particular purpose. User is responsible for determining the suitability of the product for user's application. If this product is defective within the warranty period, your exclusive remedy and AMMDENT sole obligation shall be repair or replacement of the product.

Limitation of Liability

Except where prohibited by law, AMMDENT will not be liable for any loss or damage arising from this product, whether direct, indirect, special, incidental or consequential, regardless of the theory asserted, including warranty, contract, negligence or strict liability.



CAL-EXCEL

Calcium Hydroxide Paste

Radiopaque



COMPOSITION:

Calcium Hydroxide, Methyl Cellulose, Barium Sulphate, Excipient to make

DESCRIPTION:

Cal excel is ready-mixed Calcium hydroxide paste which comes provided with its own tube to facilitate its application to the prepared cavity. Used as a base under the filling Cal-Excel, due to its chemically neutralizing properties, protects the pulp against acids residual in most dental cements and other filling material adversely.

Applied in several layers Cal-Excel does not inhibit formation of secondary (reactional) dentine: used in contact with or in near proximity to non-gangrenous pulp it may actually stimulate such formation.

INDICATION

As neutralizing agent or << Cushion >> protecting dentine against chemical or thermal reaction.

DIRECTION FOR USE

As cavity base:

Remove the plastic tip cover from the syringe. Fix the applicator needles on the syringe. Push the handle of the syringe to the forward-until the paste just emerges, then quickly pushy back the handle a little to prevent any excess flow. Wipe off paste from the needle into the cavity dotting the base with pinpointsof the emerging paste exuded and use the needles end as an applicator to spread it over the cavity base.

Only a very minute quantity of cal excel is necessary to cover the cavity base. When a half dozen or so dots paste have been smeared over the paste so applied.

This will spread it in a uniformly thin layer over the base surface which will then dry in a matter of seconds.

Any excess of paste will be blown onto sidewalls of cavity without harm. For rapid drying in a uniformly thin layer. When dried cement or other filling may be applied directly over the Cal Excel layer.

As a base deep cavities:

Where removal of considerable decay and softens dentine has resulted in cavity of considerable depti cal excel provide thermal insulation under the filling material.

When such a protective cushion is needed several thin layers of Cal excel should be applied alternative! Taking care each layer has first dried before applying the next one. Use the technique described above to spread each indivisual layer evenly. Each such thin layer will dried in matter of seconds. Build up this Cal Excel < Cushion >> to desired thickness to provide an affective thermal insulation of the pulp as well as its chemic; protection.

ENDODONTIC: As a temporary filling material of root canal Cal Excel should be applied with rotary past filler.

PRESENTATION

In syringe with applicator needle

Important note after each use of syringe use disinfecting solution and small cotton pad to thoroughly clean needle applicator. The needle should then at once be plunged back into plastic cap from which it was originally withdrawn.

2 gm each tube with 4 applicator tips.

CAUTION

Do not expose to air for long time-the TIP MAY DRY.

If dries, Clean it with a sharp needle and plunge back into plastic cap.

Dental Material for the use by Dental Professional in the practice of dentistry.

Not for medicinal use.



CALFORM-RC

Calcium Hydroxide & Iodoform Paste *Radiopaque*



INGREDIENTS:

Calcium Hydroxide, Iodoform, Barium Sulphate: ad Excepiet to make

DESCRIPTION:

Apply **CALFORM RC** as temporary filling material of root canal. And to exposed pulp in pulp capping and pulpotomy, leaking canal, treatment of external resumption, Apexification and **CALFORM RC** apart from the bactericidal properties helps to form secondary dentine in contact with pulp. Because of the high pH of the paste acts as a neutralizing agent with acids of the cements & mouth.

DIRECTION FOR USE:

Calform should be applied with rotary paste filler or with the needles provided. Replace the cap of the Tube immediately after every use.

Store in cool place and keep the caps always closed to prevent drying and phase separation of the material.

CONTENT:

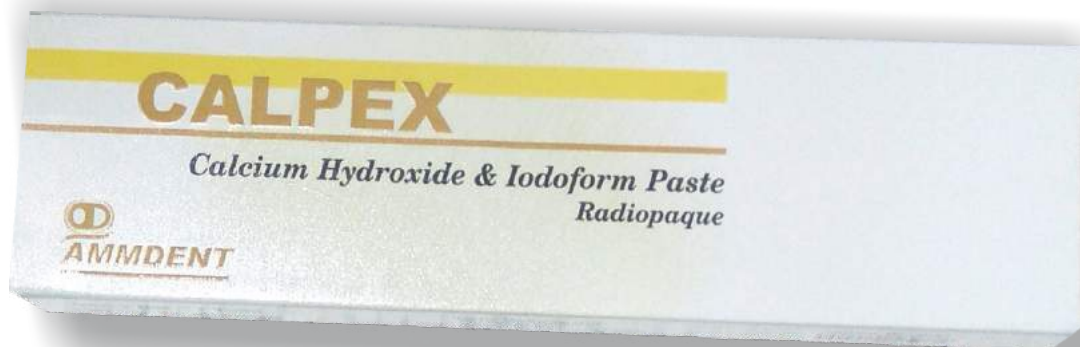
4gm each tube with 4 applicator tips.

**Dental Material for the use by Dental Professional in the practice of dentistry.
Not for medicinal use.**



CALPEX

Calcium Hydroxide & Iodoform Paste *Radiopaque*



INGREDIENTS:

Calcium Hydroxide, Iodoform, Barium Sulphate: ad Excepiet to make

DESCRIPTION:

Apply **CALPEX** as temporary filling material of root canal. And to exposed pulp in pulp capping and pulpotomy, leaking canal, treatment of external resumption, Apexification and **CALPEX** apart from the bactericidal properties helps to form secondary dentine in contact with pulp. Because of the high pH of the paste acts as a neutralizing agent with acids of the cements & mouth.

DIRECTION FOR USE:

Calpex should be applied with rotary paste filler or with the needles provided. Replace the cap of the Tube immediately after every use.

Store in cool place and keep the caps always closed to prevent drying and phase separation of the material.

CONTENT:

2gm tube with 10 applicator tips & 1 cap.

**Dental Material for the use by Dental Professional in the practice of dentistry.
Not for medicinal use.**





CAVLAQ

Cavity Varnish



PRODUCT DESCRIPTION:

Cavlaq is copal gum based protective Dental varnish for the institution of the exposed dentine. Reduces presentation of fluids into the tooth and the subsequent placed restoration. Alleviates thermal sensitivity. Needs no thinners.

APPLICATIONS:

Cavlaq is the ideal cavity liner and dentinal tubule sealer. It assures perfect Protections to the exposed surface of dentine in teeth prepared for permanent fillings or restoration and is useful as an intermediary varnish prior to the insertion of amalgams, cements or composites.

Composition

Copalgum, isopropylalcohol, ad Excepients

METHOD OF USE

Prepare the cavity, put small quantity of cavity varnish on a small cotton pellet and apply on the inner walls of cavity. Allow to dry for 40 seconds. Reapply another layer if necessary. Use a new cotton pellet for each application. It is recommended that two thin layers be applied instead of one thick layer.

Storage & Shelflife:

Cavlaq is volatile and inflammable and therefore keep container away from heat & fire. Always close the lid immediately after use to avoid contamination and evaporation of the solvent.

Shelflife: 3 years under proper storage conditions.

Presentation: 30ml glass bottle in individual box.

Dental Material for the use by Dental Professional in the practice of dentistry.

Not for medicinal use.





CAVITEMP

Temporary Filling Material



DISCRIPTION:

Cavitemp is a temporary filling material self-curing under humidity of temporary filling of cavities. The material is impermeable to drugs.

COMPOSITION:

Zinc oxide, Calcium Sulphate, Zinc Sulphate, ad excepiet to make.

APPLICATION:

Use an instrument to fill the required quantity into the wet cavity. The hardening process starts after a few minutes. Avoid any exposure to chewing pressure for about 2 hours after applications.

Deep cavities need not be filled completely. If the material is used to close up a drug, pressure-free, application is recommended. Use rotary instrument to remove the temporary filling. Remove the cavitemp filling with a stiff probe.

Note: Due to sensitivity to moisture, close the jar immediately after removing the material required.

Contents: 30gm.

Dental Material for the use by
Dental Professional in the practice of dentistry.

Not for Medicinal use.





CANALSOLVE

Root Canal Filling Remover



DISCRIPTION:

Canal solve is an Excellent root canal filling remover of eugenates and contains tetrachloroethylene. Clean the pulp chamber and apply on cavity floor. Removes canal filling with a probe and subsequently use a broach. Instrument used should be dipped in **Canal solve** before each application. Before new restoration is placed tooth should be carefully dried and **Canal solve** be removed carefully.

CONTENTS

Bottle of 13ml.

Store in a cool dry place.

CAUTION:

Keep the cap always closed.

Dental Material for the use by
Dental Professional in the practice of dentistry.

Not for medicinal use.





CANALSOLVE-R

Root Canal Filling Remover

for Resin Base Sealer



DISCRIPTION:

CANALSOLVE-R is an excellent root canal filling remover of phenolic epoxy based sealers and contains formamid.

DIRECTION FOR USE

Clean the pulp chamber and apply on cavity floor. Remove canal filling with a prob and subsequently use a broach. Instruments used should be dipped in Canalsolve-R befor each application.

CAUTION:

Before new restoration is placed tooth should be carefully dried and Canalsolve-R be removed carefully. Replace the cap affter every use.

CONTENTS:

Canalsolve-R is available in a bottle of 13 ml.
Hygroscopic Material

Store in a cool & dry place.

Dental Material for the use by Dental Professional
in the practice of dentistry.

Not for Medicinal Use.
For use in Dentistry.





CANALARGE

Chelating Agent

for the chemical reaming of root canal



COMPOSITION:

Disodium Edetate 17% W/V, Excipients q.s. ad 100ml.

DESCRIPTION:

Canalarge is a neutral EDTA solution which enters a chemical reaction with the mineral components.

Canalarge is a chelating agent containing a quaternary ammonium salt.

Canalarge has a very low surface tension so it easily penetrates without mechanical aid even the narrowest of root canal.

Canalarge is neither toxic nor caustic, entirely harmless, for the peri-apex and easy to use. It cleans out devitalized residual pulp and dentine so efficiently that mechanical reaming with broaches or files is facilitated in the narrowest of canal.

DIRECTION FOR USE:

Introduce Canalarge into the cavity and force into the root canal using a fine explorer.

Mechanical reaming may begin at once. Repeat the operation several times and rinse the water.

CONTENTS:

Bottle of 60ml.

Dental Material for the use by Dental Professional in the practice of dentistry.

Not for medicinal use.



CRESOLVE

Solution for Disinfecting Dental Cavities & Canal



Uses : Root canal disinfectant before filling.

Instructions:

After avulsion of the gangrened pulp and a through reaming, a wick moistened with the solution will be inserted into the canal after being wrung out carefully so as to avoid any excess of product.

Provisionally seal with a non compressive and light cement. Leave in place for 3 to 5 days. If necessary renew the operation after deriding and reaming the root canal using the usual methods.

Methods and route of administration:

Stick local use.

Over dosage:

In case of overdosage or misuse in dentistry, it may cause an excessive perapical inflammation and periodontitis.

Special warnings:

In case of contact with the mucosa, rinse thoroughly with water.

Precautions for use:

Do not ingest.

Do not impregnate the cotton pellet to excess.

Do not apply onto exposed pulp.





CITOCID

10% Citric Acid



Citric Acid 10%, a root canal cleanser, is intended to etch root canal walls just prior to obturation to allow an optimum seal.

Description:

Citric Acid 10% is a slightly thickened, water-soluble solution. It is tinted slightly orange for easy identification and is provided in a 30ml IndiSpense® Syringe.

Preparation:

1. An empty 1.2ml or 5ml syringe is attached to the end of the large, no -waste IndiSpense syringe by turning the luer lock of the unit dose syringe snugly onto the male thread of the IndiSpense
2. With palm grasp the plunger of the IndiSpense syringe is depressed while the unit dose syringe is stabilized at the plunger with the nondominant hand. Slightly pull out on plunger of unit dose syringe to facilitate loading. Do not express contents of unit dose syringe back into IndiSpense syringe. To prevent cross -contamination, a used syringe should never be attached to the IndiSpense syringe.
3. Remove luer lock cap from syringe. Twist a NaviFX® Tip or NaviTip® firmly onto syringe. Gauge NaviFX Tip with the rubber stop at least 2mm short of the root terminus.

Procedure:

Warning: Do not follow Citric Acid rinse with sodium hypochlorite or vice versa, as this can lead to the production of chlorine gas. Always rinse with clean, bacteria-free water between Citric Acid and sodium hypochlorite irrigation.

1. Make sure NaviFX Tip is loose in canal and at least 2mm short of terminus. Gently deliver the Citric Acid with NaviFX Tip. Move brush tip up and down to agitate and brush solution, cleaning walls to dissolve and remove calcium hydroxide with Citric Acid as shown in Fig. 4. Do not express Citric Acid when canula tip is at full length or if it fits tightly against the canal walls.
2. Flush out canal with clean, bacteria -free water, followed by copious sodium hypochlorite (e.g. ChlorCid®). When Citric Acid is used in lieu of EDTA liquid to remove smear layer, let Citric Acid dwell in canal for 3minutes. Perform a final rinse with clean, bacteria - free water, plain EDTA or local anesthetic. Quick and effective removal of most of the Citric Acid solution or other irrigants is facilitated by using a Luer Vacuum Adapter with a Capillary Tip or 10mm Micro Capillary Tip.
3. One or two paper points are usually all that are required for final drying of canals if canals are first vacuumed out as described in step 2 above.
4. Fit master cone, then obturate. Ultradent recommends the EndoREZ® Obturation System including EndoREZ root canal sealer, EndoREZ resin-coated gutta percha points, and specially designed delivery systems.

Warnings:

Do not follow Citric Acid rinse with sodium hypochlorite or vice versa, as this can lead to the production of chlorine gas. Always rinse with clean, bacteria-free water between Citric Acid and sodium hypochlorite irrigation.

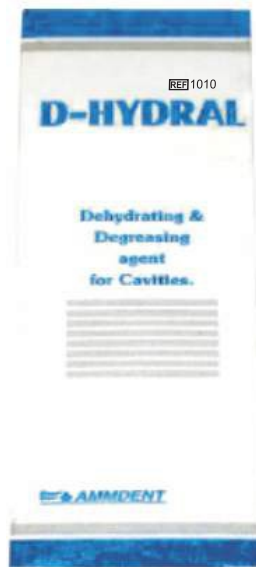
Precautions:

1. Always use a rubber dam for endodontic therapy. Prevent ingestion of Citric Acid solution.
2. Prevent getting solution in the eyes or leaving it on the soft tissues for an extended period of time.
3. Do not extend tip past the root apex or express Citric Acid past the apex.
4. Do not express Citric Acid from the canula tip at the root terminus or if the tip fits tightly against the canal walls. This may force solution past the apex.
5. Do not use this product on patients with a known sensitivity to Citric Acid.
6. The tips and delivery syringes are disposable and intended for single use.



D-HYDRAL

Dehydrating & Degreasing agent



Formulation

Acetone
Ethyl Acetate
Excipients qs ad 100ml.

D-hydral removes moisture and all traces of grease.
D-hydral can be used with any kind of filling or lining material.

Direction for use

Dab the area to be dried with a cotton ball soaked in D-hydral.
Wait a few seconds for the complete evaporation of the fluid.

Caution

Before using a self hardening temporary filling material or even a permanent filling of acrylic resin type complete drying out of cavity before proceeding with the filling is necessary.

Highly inflammable.

Contents

Bottle of 30ml.

Dental Material.

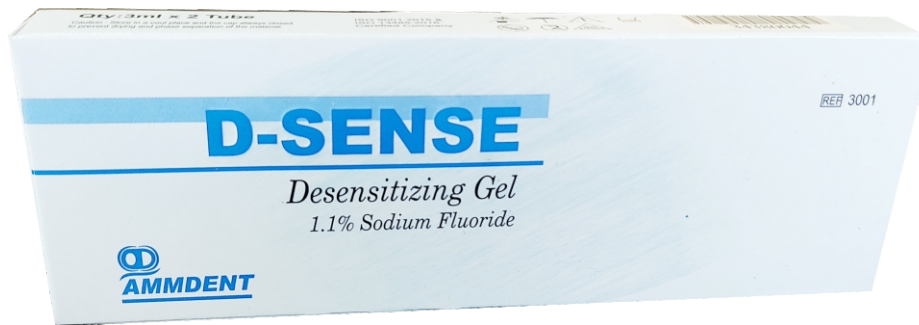
Not for medicinal use.





D-SENSE

Desensitizing Gel



FLURO SOLVE

Prevention of Dental Caries

Treatment of Hypersensitive Dentine

Fluoro Solve which has all the specific activities of the fluorides acts in two ways

- (a) Its inhibiting action on microbial growth considerably reduces the film of flora on the dental crown. This action is particularly interesting when one considers the group of “Lactobacillae” since these producers of acid, are particularly formidable
- (b) This reaction is doubled by the action of fluoride on the enamel which involves a transformation of its crystalline structure and an increase, as far as its sensitivity is concerned, of its resistance to chemical attack.

INDICATIONS:

Prevention of dental caries,

Directions for use

A) Prevention of Dental Caries

Remove all tartar

Isolate teeth with cotton wool rolls and dry the surfaces to be treated with warm air, particularly the accural and proximal areas.

Apply fluorosolve several times for a period of seven or eight minutes using a narrow strip of cotton wool impregnated with the material.

Leave the band in place for at least three minutes, keeping it in place for at least three minutes, keeping it in place with cotton wool rolls. Introduce Flurosolve between the teeth using an explorer. After treatment remove bands and rolls, & ask the patient to rinse his mouth several times very carefully.

Renew this treatment every three months.

b) Dental hypersensitivity

Protecting it from saliva, dry the tooth to be treated. Take a pledget of cotton wool soaked in flurosolve and apply it for a minute to the affected part. Rinse the mouth. Repeat two or three times.

Presentation

Bottle containing 13ml.

Dental Material.

Not for medicinal use.



D-PULP

Pulp Devitalising Paste



COMPOSITION:

D-Pulp contains Paraformaldehyde as a major ingredient in a thick paste consistency.

INDICATION

Devitalisation of dental pulp.

DOSE:

Apply a well pellet (about 10mg of paste) to the pulp, after having removed the carious dentine and exposed pulp. Seal with a cement and open again after 7 to 10 days.

Then if necessary repeat the treatment.

After extirpation of the pulp and treatment of the canals, the tooth can be filled permanently.

The product is used to be only twice at the most at the above mentioned dose, in the treatment of any one tooth.

Contra Indication:

D-pulp should not be used in patients with a history of allergic reaction to amide.

Precaution for use:

Following the application of D-Pulp, the cavity must be carefully sealed with a cement to prevent any leaching of the product.

Leaching can cause local destruction of the periodontium and necrosis of bone. It may also cause transitory but painful mucosal ulcers. Content should be used within one year of opening. The cap should always be replaced immediately after use and the jar kept in a cool dry place.

CONTENTS: 7.5gm Paste

Dental Material for the use by

Dental Professional in the practice of dentistry.

Not for Medicinal use.

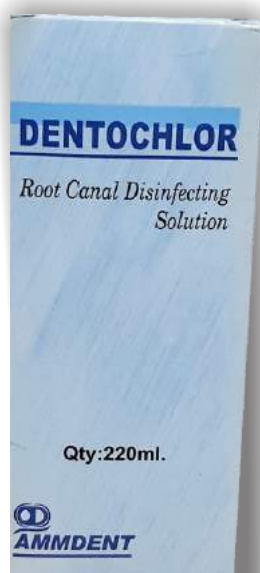




AMMDENT

DENTOCHLOR

Root Canal Disinfecting Solution



DISCRIPTION:

dentochlor is a solution for irrigating and disinfecting the cavity and root canal. It is the most potent agent with its antifungal property and is effective on both vegetative and spore forms.

dentochlor is a solution for irrigating and disinfecting the cavity and root canal. It is the most potent agent with its antifungal property and is effective on both vegetative and spore forms.

Indication : Root canal irrigation and disinfection.

Direction for use:

Ream and rinse root canal followed by irrigation with Dento-chlor by means of irrigation syringe and needles. 1-2ml of Dento-chlor is enough for irrigating of root canal. In peridontics it is used to wash the site before suturing.

Precautions:

Do not mix sodium hypochlorite solution, some precipitation is observed if mixed or used in same syringe.

Warnings: Keep container tightly closed.

Pack Size:

Bottle of 220ml.

Dental Material for the use by

Dental Professional in the practice of dentistry.

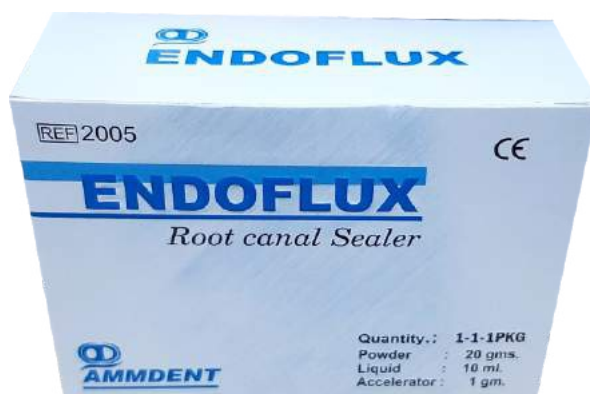
Not for medicinal use.





ENDOFLUX

Root Canal Sealer



Endoflux is an endodontic filling material with Zinc Oxide and Eugenol

CHARACTERISTICS:-

1. Endoflux is hydrophilic:- It can safely be used in mildly humid canals.
- 2 Endoflux firmly adheres to the surface of the root canal, providing an ideal sealing.
3. By preparing a less consistent mixture of Endoflux it can be forced to fill hard-to-reach areas such as in the case of crooked teeth, delta apical roots, accessory ducts etc.
4. Because of its therapeutic properties Endoflux generates a "Long Range" action permanently emanating bactericidal agents, which makes it effective even in the case of incomplete filling, when for some reason, the apical opening can not be reached.
5. Endoflux has broad spectrum bacterial properties.
6. Reasonable over obturation is not a problem when using ENDOFLUX because its components are biocompatible and phagocytosable > A slight initial inflammatory reaction may result, easily controlled by analgesic and anti-inflammatory therapy.

FILLING TECHNIQUE

Take an X-ray Open & Prepare the canal following your personal technique

24 hours before the final filling, place a cotton ball soaked in form cresol to prepare the operatory field Seal the cavity.

24 hours later open the cavity, withdrawal the cotton ball this will prevent post operator pain.

Prepare Endoflux just like a dental cement mixing the powder with the liquid consistency should be that which the dentist considers most suitable for the case under treatment.

Fill the canal following your personal technique.

The paste can be pressed using a widener wrapped in cotton, or lentules, if the mixture is more fluid.

DEEP CAVITIES

In the case of deep cavities Endoflux acts as a pulper isolating material for pulper add a few grains of the Accelerator to obtain setting in a very short time.

Components :

Zinc oxide , calcium hydroxide, Barium Sulphate, Iodoform, Eugenol,

Dental Material.

Not for medicinal use.





EASY STAT

Viscous 20 % Ferric Sulphate



INGREDIENTS

Ferric sulfate, solvents and resins.

APPLICATIONS

Retractor cord combine with “ Easy Stat in the gingival retraction technique to facilitate impressions. This allows the exposition of gingival termination, for a right sight, Also it can be use in cementation proceeding because it inhibits secular fluid.

INDICATIONS FOR USE

Apply gel directly in the zone to treat with the tube . The gel will stay in the zone. If there is a hemorrhage, rub the zone with a cotton pellet. If required, apply a smooth air/ water spray to eliminate possible coagulates. Then insert carefully the retractor cord in the secular gingival with an appropriate instrument. After that, wash with a firm air/ spray. After minutes, it will obtain gingival retraction and will be possible to remove cord from secular before making impression or denture cementation.

STORAGE

Keep syringe tightly closed and avoid exposition to direct sunlight. Store in a cool and dry place.

PRECAUTIONS

Avoid contact with skin and eyes.

CONTRAINDICATIONS

For topical use only. Do not inject. Do not ingest. Do not use in patients with know allergy to ferric sulfate or patients with chemical hypersensitivities.

PRESENTATION

A tube containing 3ml of product, plus accessories tips.

Dental Material.

Not for medicinal use.





EUGENOL PURE



Eugenol reacts with zinc oxide to form a temporary cementation and as a sedative dental dressing or lining under a non-composite resin restoration. Eugenol is used as an obtudent for the relief of minor dental pain.

Composition:

Oil of Eugenol.

Method of use:

Place of drop on a cotton bud and gently apply do the inflamed area. Mix with zinc oxide to form a thick paste and place into a tooth cavity either as a dressing on a painful tooth or as a lining under a non composite resin restoration. For cementation, make a thick paste mixing with inc Oxide and place in the cavity and press.

Storage & shelf life:

Stored in cool & dry environment. Always close the lid immediately after use.
Shelf life: 3 Years under proper storage.

Presentation:

100ml glass bottle





FLOWABLE

Nano Optimized Light cure composite



Base in class I and II cavities, Cavity lining under direct restorative materials in class I and II cavities. Small, non occlusal stress bearing class I restorations according to minimally invasive filling therapy. Class III and V restorations Extended fissure sealing Undercut block out repair of small enamel defects repair of small defects in a esthetic indirect restoration repair of temporary C & B materials Core build-up.
Presentation: 2gm.







FLUOROSOLVE

AMMDENT

Prevention of dental caries & Treatment of hypersensitivity dentine



FLURO SOLVE

Prevention of Dental Caries

Treatment of Hypersensitive Dentine

Fluro Solve which has all the specific activities of the fluorides acts in two ways

- (a) Its inhibiting action on microbial growth considerably reduces the film of flora on the dental crown. This action is particularly interesting when one considers the group of "Lactobacillae" since these producers of acid, are particularly formidable
- (b) This reaction is doubled by the action of fluoride on the enamel which involves a transformation of its crystalline structure and an increase, as far as its sensitivity is concerned, of its resistance to chemical attack.

INDICATIONS:

Prevention of dental caries,

Directions for use

A) Prevention of Dental Caries

Remove all tartar

Isolate teeth with cotton wool rolls and dry the surfaces to be treated with warm air, particularly the accual and proximal areas.

Apply fluorosolve several times for a period of seven or eight minutes using a narrow strip of cotton wool impregnated with the material.

Leave the band in place for at least three minutes, keeping it in place for at least three minutes, keeping it in place with cotton wool rolls. Introduce Flurosolve between the teeth using an explorer. After treatment remove bands and rolls, & ask the patient to rinse his mouth several times very carefully.

Renew this treatment every three months.

b) Dental hypersensitivity

Protecting it from saliva, dry the tooth to be treated. Take a pledget of cotton wool soaked in fluoro solve and apply it for a minute to the affected part. Rinse the mouth. Repeat two or three times.

Presentation = Bottle containing 13ml.

Dental Material.

Not for medicinal use.







FROST

Etching Gel

37% Phosphoric Acid



Product description:

Frost (etching gel) is a blue tinted viscous gel of 37% phosphoric acid for etching tooth enamel & dentine, cleaning porcelain, metal or composite surfaces prior to the bonding of any composites, sealants or bonding adhesives.

Applications:

Used for conditioning both dental enamel and dentine surfaces prior to the placement of an adhesive restoration.

Composition:

Phosphoric acid, methylene blue dye, benzalkonium chloride, purified water and thickening agent.

Method of use:

Clean the area to be etched, rinse and dry thoroughly place the tip against the surface to be etched and slowly dispense the gel on to etched allow the gel to stay for 10-15 seconds and rinse thoroughly with water spray dry etched tooth surface with clean, dry air.

Precautions:

The product contains phosphoric acid. It can burn and cause irritation to the tissues and therefore confine the use to the areas to be etched the product contains 2% benzalkonium chloride. Do not use the product on patient with any known sensitivity to benzalkonium chloride. Fix the applicator tip to the syringe and check the flow of gel before applying on the etching surface. Avoid contact with eyes and prolonged contact with skin.

Storage & shelf life:

Store in a cool and dry environment. Always close the immediately after use.

Presentation:

3.5gms.x 1syringe with applicator tips .
Dental Material Not For Medicinal Use.



Premium **GI LUTING** Glass Ionomer Luting Cement Type I



This is a glass ionomer cement glass polyalkanoate cement for luting. **GI Luting (Glass Ionomer Luting Cement)** has a low solubility in the mouth and a low acidity.

Fields of application:

For attaching crowns, bridges, inlays, onlays, pins, posts and orthodontic bands.

Method of use:

Clean enamel, dentine and metal surfaces thoroughly and dry completely. Make sure not to leave any traces of other materials which could impair the properties of **GI Luting (Glass Ionomer Luting Cement)**. Temporary work should be attached with an eugenol- free Cement. Before attachment clean the core, rinse (e. g. with H₂O₂) and dry.

When using **GI Luting (Glass Ionomer Luting Cement)** for the first time, remove cap from bottle and fit the pipette attachment supplied.

Shake the powder well before use!

The working temperature should be 150C-230C.

Use one drop of liquid for one level measuring scoop of powder (powder/liquid ratio=3.0:1 g/g).

Put powder and liquid on a suitable glass plate or a suitable mixing pad.

When dispensing the liquid, hold the dropper bottle vertically. It is recommended to divide the powder in 3 portions and to mix it portion by portion into the liquid, using a solid plastic spatula or another abrasion- resistant spatula.

Mixing time	Working time	Setting time
30 s	3 min	5-7 min

Application:

GI Luting (Glass Ionomer Luting Cement) has a working time of approx. 3 min and sets after 5-7 min (3-5 min in the mouth). Higher temperatures shorten the working time, low temperatures prolong it.

The correct consistency is achieved when **GI Luting (Glass Ionomer Luting Cement)** is applicable to the core with a hard brush. It is essential to avoid contact with water and saliva during application and setting.

Indications and Precautions:

Excess material can be removed after 10-15 min, preferably with an explorer. Desensitize strongly ground and sensitive sores prior to a temporary attachment.

Remaining varnish and other substances (e.g. isolating agent) can affect the adhesion and should be removed completely before using **GI Luting**. Do not apply the cement excessively and maintain sufficient dentine thickness to avoid pulp irritations. If necessary, pulp protection should be applied in the proximity of the pulp or a core build – up should be carried out, if indicated.

Rinse instruments with cold water immediately after use and before the setting of the cement residues. After removal of orthodontic bands, cement residues can be removed gently and rapidly with an ultrasonic scaler.

GI Luting contains polyacrylic acid, fluoro-silicate and parabens. Do not use GI Luting in cases of hyper sensitivities against these ingredients.

Storage information: Close powder container immediately after use, in order to avoid infiltration of humidity which may result in a loss of compressive strength. Store at temperatures 40C-230C.

Presentation : 10 gm. powder, 6gm liquid

Our preparations are developed for use in dentistry. As far as the application of the products delivered by us is concerned, our verbal and / or written information has been given to the best of our knowledge and without obligation. Our information and/or advice do not relieve you from examining the materials delivered by us as to their suitability for the intended purposes of application. As the application of our preparations is beyond our control, the user is fully responsible for the application. Of course, we guarantee the quality of our preparations in accordance with the existing standards and corresponding to the conditions as stipulated on our general terms of Sale and delivery.

Dental Material.

Not for medicinal use.



Regular **GI FILL**



Glass Ionomer Cement Type II



INTRODUCTION

GI fill is excellent for restoring cervical erosion areas, root caries, or for other indicated restorative uses. It can also be used as a line in conjunction with composite restoration. Its index of refraction matches that of tooth structure, preventing the shine-through or mat-white effect resulting from the use of other opaque glass ionomer liners with composites.

MIXING RATIO

The mixing ratio is 1 scoop powder to 1 drop of liquid (1:1), with a minimum of 2 scoops of powder to 2 drops of liquid. For larger mixes, the 1:1 ratio must be maintained.

OPTIMUM RATIO

2.50-2.63gm powder per 1g liquid at 23°C and 50% RH.

MIXING DIRECTIONS

1. Before each use, fluff powder by inverting bottle several times.
2. Scoop powder from powder bottle with measuring scoop, and place level scoop of powder onto mixing pad. Repeat for as many scoops of powder as required.
3. Divide powder into 3 equal portions on mixing pad.
4. To ensure dispensing of uniform sized drops of liquid bottle in a vertical position, squeeze bottle gently and release pressure after each drop separates from bottle. Any residual liquid on tip of liquid dispenser should be removed by wiping a damp napkin to prevent clogging of nozzle.
5. Dispense required number of liquid drops onto mixing pad.
6. Using a plastic spatula, incorporate one of the three portions of powder into the liquid. Mix in successive portions until the material reaches a homogenous, composite-like consistency.
7. Mixing should be complete in 30 seconds.
8. Follow appropriate application techniques.
9. Immediately after placement, cover all exposed surfaces of GI fill with DCL Varnish.

MIXING AND SETTING TIMES

(23°C and 50% R.H.)

Mix Time.....30 seconds, Working time.....2 minutes, Initial Setting time....4 minutes, Polishable time.....7 minutes
Finishing and polishing can be accomplished after 7 minutes. Mixing on a cold glass slab will prolong working and setting time.

TECHNIQUE INSTRUCTIONS

1. Excavate decay and for prepare and clean stained area to be restored with pumice or oil-free paste (oil containing formulation or prophylactic paste will interfere with bonding.)
- Note:** Rubber dam or retractor should be used to prevent moisture contamination from oral or cervical fluids.
2. Place Calcium hydroxide over all pulpal or near pulpal exposure areas only.
 3. Apply Conditioner (Glass Ionomer Conditioner) or other polyacrylic acid liquid with cotton pledget for 10 seconds.
 4. If present Acid etch enamel area for one minute: rinse and dry (optional).
 5. Mix GI Fill according to instruction.
 6. Place and contour as required over the previously prepared decayed or eroded areas. this procedure is similar to the use of composites and silicates.
Where stainless steel matrix band is used this should be very lightly closed with Vaseline, plastic material strips can also be used. The initial setting time for GI FILL is 4 minutes 30 seconds.
 7. Immediately cover placed GI Fill with glass Ionomer Varnish.
 8. Wait 10 minutes from the time of placement before finishing and polishing with fine diamond or other rotary type instrument.
 9. Re-cover with Glass Ionomer Varnish.

EROSION/ABRASION

LESSONS

All stain is removed by polishing with prophylactic paste and if caries is present it should be excavated and lined. The conditioner is applied via a cotton pledget for 30 seconds. The cavity is then washed and dried ready to receive restoration.

FISSURE FILLING

The fissures are opened to a depth of 2mm. Remove caries etc. Washed and dry, then carry out fissure filling as normal using the mix recommended over the page.

Presentation:

Powder: 10gm., Liquid: 7ml.

Dental Material.

Not for medicinal use.



Premium GI FILL



Glass Ionomer Filling Cement Type II



Instructions for use

This is a radiopaque glass polyalkenoate restorative cement with chemical adhesion to enamel and dentine. GI Fill (Glass Ionomer Filling Cement) is available in the shades A1, A3 and B3 and has an enamel-like translucency.

Fields of application:

- 1) For restoration of deciduous teeth (especially class I)
- 2) Repair of V-shaped defects and enamel as well as well root erosions in cervical area incl. Class V fillings
- 3) Cavities with carious lesions
- 4) Fillings of class III and small fillings of class I (incl. Extended fissure sealing) as well as build-up fillings for crowns, linings

Method of use:

Creation of retention generally is not necessary because of the good adhesion of GI Fill (Glass Ionomer Filling Cement) to the dentine. However undercuts provide additional hold to the filling. Layer thickness of the fillings should not be less than 1mm.

In case of carious defects prepare and clean cavity (for instance with a 3% hydrogen peroxide) and then rinse carefully with water and dry.

In case of a remaining dentine thickness of more than 1-1.5 mm an additional lining is not necessary. A pulp protection with calcium hydroxide is recommended if dentine thickness is less than 1.5mm.

GI Fill (Glass Ionomer Filling Cement Liquid):

Change the lock against the pipette before use.

Before using GI Fill (Glass Ionomer Filling Cement) for the first time, remove cap from bottle and replace it with the enclosed dropper.

Shake powder well before use.

Put powder and liquid on a glass plate or a suitable mixing pad and work the powder into the liquid a little at a time to begin with, then in larger quantities. Use 1 drop of liquid for 1 level measuring scoop of powder (mixing ratio: 4.7-5.6g of powder: 1g of liquid). When dispensing the liquid, hold the dropper bottle absolutely vertically! By pressing the flexible plastic pipette dispense drop by drop.

A strong plastic spatula should be used for mixing.

Mixing time	Working time	Setting time
30-40 s	2 1/2-3 1/2 min	5-6 min.

The mixing time is 30-40 s (it should not exceed 1 min).

The working time after mixing is 2-3min (the temperature should be 15-23°C).

After having inserted the material in the cavity, the setting time is approximately 2 1/2 min.

During the filling procedure make sure that working area is kept dry.

Class V cavities should be at least 1 mm deep.

Avoid application, glass ionomer cements are sensitive to humidity (breath, saliva) respectively drying-out

Therefore, if possible, apply immediately with a protective varnish (see instructions for use).

After setting of GI Filling (Glass Ionomer Filling Cement), but not before 5-6 min after application (depending on mixing temperature and mixing ratio) the excess may be removed with a sharp instrument and contouring can be carried out (flexible disks). Then cover again with varnish. The best results for final polishing can be obtained about 24 h after the filling has been inserted.

Precautions:

In the proximity of the pulp (closer than 1-1.5 mm) use pulp protection to avoid irritations. Close powder and liquid thoroughly after use in order to keep out humidity and to maintain the solid consistency. Avoid contact to the mucosa and the eyes.

GI Filling (Glass Ionomer Filling Cement) contains fluorosilicate glass, polyacrylic acid and PHB-Ester. Do not use in case of sensitivities against these ingredients, after expiry date or when the powder forms lumpy. Do not use insulating materials on dentine to maintain full adhesion (except for pulp protection).

Presentation:

Set: 10gm powder (shades A1, A3, B3.)

6gm liquid

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Dental Material NOT FOR MEDICINAL USE



GI CORE

Glass Ionomer Filling Cement Type IX



This is a radiopaque Glass Core build up cement with chemical adhesion to enamel and dentine.

Fields of application:

- 1) For restoration of deciduous teeth (especially class 1)
- 2) Repair of V-shaped defects and enamel as well as well root erosions in cervical area incl. Class V fillings
- 3) Cavities with carious lesions
- 4) Fillings of class III and small fillings of class I (incl. Extended fissure sealing) as well as Core build-up, fillings for crowns, linings

GI Core (Glass Ionomer Cement Liquid:

Change the lock against the pipette before use.

Before using GI Core build-up (Glass Ionomer Cement) for the first time, remove cap from bottle and replace it with the enclosed dropper.

Shake powder well before use.

Put powder and liquid on a glass plate or a suitable mixing pad and work the powder into the liquid a little at a time to begin with, then in larger quantities. Use 1 drop of liquid for 1 level measuring scoop of powder (mixing ratio: 4.7-5.6g of powder: 1g of liquid). When dispensing the liquid, hold the dropper bottle absolutely vertically! By pressing the flexible plastic pipette dispense drop by drop.

A strong plastic spatula should be used for mixing.

Mixing time	Working time	Setting time
30-40 s	2 1/2-3 1/2 min.	5-6 min.

The mixing time is 30-40 s (it should not exceed 1 min).

The working time after mixing is 2-3min (the temperature should be 15-23°C).

During the Working procedure make sure that working area is kept dry.

Class V cavities should be at least 1 mm deep.

Avoid application, glass ionomer cements are sensitive to humidity (breath, saliva) respectively drying-out

Therefore, if possible, apply immediately with a protective varnish (see instructions for use).

After setting of GI Core build-up (Glass Ionomer Filling Cement), but not before 5-6 min after application (depending on mixing temperature and mixing ratio) the excess may be removed with a sharp instrument and contouring can be carried out (flexible disks). Then cover again with varnish. The best results for final polishing can be obtained about 24 h after the filling has been inserted.

Precautions:

In the proximity of the pulp (closer than 1-1.5 mm) use pulp protection to avoid irritations. Close powder and liquid thoroughly after use in order to keep out humidity and to maintain the solid consistency. Avoid contact to the mucosa and the eyes.

GI Core build-up (Glass Ionomer Filling Cement) contains fluorosilicate glass, polyacrylic acid and PHB-Ester. Do not use in case of sensitivities against these ingredients, after expiry date or when the powder forms lumpy. Do not use insulating materials on dentine to maintain full adhesion (except for pulp protection).

Presentation:

Set: 10gm powder
6gm liquid

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Dental Material.

Not for medicinal use.



GI SILVER

Glass Ionomer Silver Reinforced Restorative



Product Description : GI Silver is Pre Mixed silver alloy Glass Ionomer Cement for Restoration of primary teeth, core build up, restoration of class I, limited class II cavities and as a base and liner material. GI silver which is reinforced with spherical silver alloy has high compressive and adhesion to the tooth. It has excellent tooth adhesion, sustained fluoride release and high compressive strength.

Composition :

Powder : Fluoro Alumino Silicate Glass Powder and Silver-Tin Alloy Spherical Powder.

Liquid : Polyacrylic Acid Solution.

Indications :

1. Core build-up.
2. Restoration of primary teeth.
3. As a base or liner.
4. Class I, limited Class II (low stress bearing areas), temporary fillings, etc.
5. Intermediate restoratives and base material for class I and II cavities using the sandwich technique.
6. Class V restorations in non-aesthetic situations.
7. Restorative in the field using the ART technique.

Instructions for use : As the product is pre mixed silver alloy glass ionomer cement so no need to add alloy separately

1. POWDER AND LIQUID DISPENSING :

a) The recommended powder to liquid ratio is 2 level scoops of powder to 2 - 3 drops of liquid.

2. MIXING : Dispense powder and liquid onto pad or glass slab. Divide the powder into 2 equal parts. Mix the first portion with all of liquid for 15 - 20 seconds. Incorporate the remaining portion and mix the whole thoroughly for 20 seconds.

Note : A heavy consistency is recommended.

3. RESTORATIVE TECHNIQUE :

a) Prepare tooth using standard techniques. Extensive mechanical retention is not necessary. For pulp capping, use Light Cure Calcium Hydroxide Paste as a base or liner.

b) Wash and dry the prepared tooth structure but do not dessicate.

c) Mix the required amount of cement. Working time is 1min. 30 seconds at 23°C (73.4°F). Higher temperatures will shorten working time.

d) Remove surface moisture but

e) Setting time is 5'00" to 5'30" from start of mixing.

Contraindications :

1. In rare cases, the product may cause sensitivity to some persons. If such reactions are experienced, discontinue the use of product and refer to a physician.

Warning :

Avoid prolonged or repeated contact with skin (allergic contact dermatitis), and eyes. Avoid prolonged inhalation. Do not take internally. Contact with the skin may cause irritation, burns or hypersensitivity. If contact with skin occurs immediately wipe off thoroughly with cotton and alcohol and then wash well with soap and water. If skin rash and sensitization or other allergic reaction occurs discontinue use and seek medical attention. If the product comes into contact with the eyes, rinse thoroughly with fresh water and consult a physician. It should not be used with patients who have a history of severe allergic reaction to any of the components.

Storage Conditions :

Store at temperature between 10°C to 34°C. Close the cap carefully after use. Keep away from moisture. Shelf life not affected after opening if stored in a cool dry place.

Packing :

Powder : 10gm, Liquid : 4ml



NANO FILL



Nano hybrid light cure composite

Single Syringe 4.5 gms



Complete kit set of 6 shade
one etching gel syringe 3.5 gm.
one bonding agent 6gm.

INSTRUCTION:

CLEANING:

Since cleaning and etching may cause distinct changes in the natural colour of the tooth the selection of the appropriate colour should be done prior to the cleaning and etching of the tooth. Perform a prophylaxis upon surface of the enamel to be etched, using water and pumice. You should use a prophylactic paste that contains no acid or fluorides. The soft portions of dentine and all decay should be removed. Isolate the tooth with a rubber dam or a roll of cotton. Put a protective base of varnish or calcium hydroxide

ETCHING

Apply the etching solution over the prepared area of the enamel for a minute using a brush or pledget of cotton. In addition to the walls of the enamel, at least 2mm of all adjacent surfaces should be etched. Apply the etching generously with a dabbing motion rather than with a rubbing motion during the total etching time to produce a visible coat of etching. If the cleaning is correct, the etched area should have a white opaque appearance. If the opacity is not observed the above etching procedure should be repeated. A matrix strip is convenient, always rinse and dry thoroughly after etching.

BONDING

Apply a fine layer of the bonding agent over the etched enamel using a brush holder and a new brush. Place the nano hybrid light cure composite in the cavity.

RESTORATION

Withdraw a suitable quantity of composite; apply the composite in layers of no more than 2mm thick. To thicken and cure the composites expose to a visible light source, continue this procedure until the desired thickness is obtained, ensure that each layer is cured separately, expose the total restoration to a further 60 seconds of light. High intensity light will require less time to cure the material so you should test to find the exposure time suitable for your type of light.

FINISHING.

A smooth surface can be obtained by using strips of aluminum oxide paper and disc ranging from course to super fine. You can polish using the conventional method for acrylics.

PRECAUTION.

The etching solution contains a 37% Phosphoric acid solution, which can be harmful to skin and eyes. In case of contact, rinse the eyes or skin immediately in plenty of water and seek medical assistance for appropriate treatment.

Dental Material.

Not for medicinal use.



ORTHODONTIC ADHESIVE SYSTEM



Visible light cure composite



INTENDED USE: Cementation of orthodontic bracket.

COMPOSITION: Crystalline and fumed silicon dioxide Bisg-ma Stabilizer Photo initiators

INSTRUCTIONS FOR USE:

TOOTH PREPARATION 1. PROPHY the enamel surfaces to be bonded with plain pumice. Do not use prophy pastes which contain oil or fluoride. Rinse thoroughly and dry teeth with oil and moisture-free compressed air. Do not allow patient to rinse.
2. ISOLATE the cleaned teeth. A clean, dry surface is desirable for a good etch.
3. DISPENSE 1 to 2 drops of etching solution/Gel on to the dispensing pad. Use a cotton pledget or brush and apply etching solution with a DABBING motion to the prophed teeth to be bonded. DO NOT RUB, as rubbing breaks the exposed enamel rods, which will result in a weak bond. Continuous application of etching solution for 60 seconds will provide the most desirable etch. Fluoridated and deciduous teeth may require a longer etch period of an additional 30 seconds.

4. RINSE thoroughly with water. At this point, do not allow patient to rinse or contaminate the enamel surface. Re-isolate and dry tooth thoroughly. The etched area should appear frosty white. ETCHED ENAMEL MUST NOT BE CONTAMINATED BY SALIVA. IF CONTAMINATION DOES OCCUR, RE-ETCH FOR 20-30 SECONDS, DRY AND REISOLATE.

APPLICATION OF ADHESIVE BRACKET PLACEMENT.

1. Apply a thin coat primer to each etched, dry tooth in the area to which the bracket is to be bonded, and the underside of each bracket base using a small disposable primer brush. This brush may be used for all teeth of a single patient, provided it is NOT contaminated with saliva or ADHESIVE PASTE. For PLASTIC brackets, allow approximately 45 seconds prior to application of ADHESIVE PASTE. This conditions the plastic brackets for a strong chemical bond with the adhesive.

2. Apply a small quantity of adhesive paste to the underside of the bracket base and place on tooth.

3. Place the bracket on the prepared tooth, you have the time that you require to do the correct collocation of the bracket, once the bracket is in place, active the composite adhesive with the curing lamp all around the bracket and behind the tooth for at least 90 seconds. Do not move bracket once adhesive hardens. A thin layer is essential to a strong bond. Excess adhesive can be easily removed from the periphery of the bracket base after all brackets are in place.

4. Approximately 5 minutes after placement of last bracket, check for loose bonds, starting with the first bracket bonded. Follow removal procedures and repeat the complete bonding procedures for any loose brackets. An active archwire can be inserted 5 minutes after complete bracket placement. **BRACKET & ADHESIVE REMOVAL**

1. To remove bonded bracket/base use a ligature cutter to grab the adhesive at the enamel adhesive interface and slowly peel the bracket/base of the tooth. Avoid a shearing or twisting force.

2. Surfaces may be cleaned with a sealing instrument, and polished with pumice.

WARNING: - Do not leave at reach of children. - In case of any change on the original function of the product, stop using it and contact the manufacturer.

For Professional Dental use only

NOT FOR MEDICINAL USE



PIT & FISSURE SEALANT

Visible light cure



It is highly recommended that sealant application be performed as a two person procedure. when the patient is an adult, isolation and application are difficult with just one dental clinician

Prior to the application of a tooth conditioner, the tooth surface should be cleaned by air polishing, polishing with non-fluoridated pumice paste, hydrogen peroxide, or enameloplasty. All heavy stains, deposits, debris and plaque should be removed. After cleaning the occlusal surface, dry the tooth thoroughly.

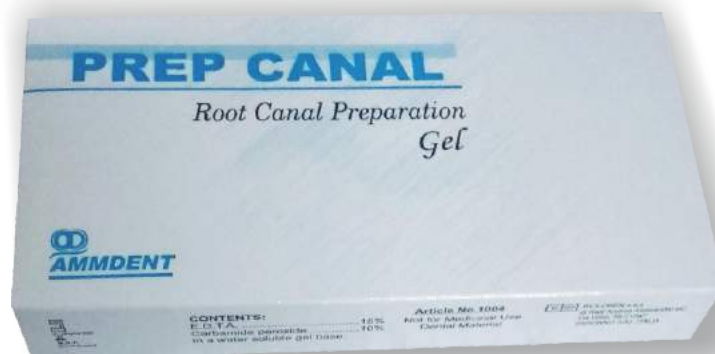
Presentation: 2gm.





PREP CANAL

Root Canal Prepration Gel



INGREDIENTS: EDTA 15% W/v
Cabamide peroxide 10% W/v
In a water Soluble Gel Base

DIRECTION FOR USE:

The tooth to be treated should be isolated with a rubber dam. The pulp chamber is opened in the usual manner. The chamber contents are removed with burs and excavators and then flushed with sodium Hypochlorite solution. The pulp chamber is then filled with **PREP CANAL**. The sodium Hypochlorite solution will react with the peroxide and the bubbling will help open the orifices of the canal. A fine instrument, reamer or file, is then introduced into the canal, mixing motion will enhance the bubbling and float out debris. The first instrument should not be placed more than half the way down the canal. This action is then followed by gentle irrigation with sodium Hypochlorite solution. The procedure is repeated adding **PREP CANAL** to the pulp chamber. This time, the instrument is carried to approximately 3/4 the distance of the canal. The mild rotation of the instrument will encourage more debris to be floated from the canal. When a vital pulp is present, it is not unusual to see the entire pulp float to the surface or be removed with the file. After gentle irrigation, the instrument is again inserted to approximately one mm. Short of the radiographic apex and an x-ray film taken to confirm the measurement. This measurement should be recorded and/or corrections made. Using this technique reduces the likelihood of inoculating the periapical tissues with the inflamed or infected contents of the canal. It helps reduce post operative discomforts and helps prevent flare ups. In teeth with two or more roots, the effervescent activity will tend to cleanse the pulp chamber and open the orifices of the canals, making it easier to find the entrance and easier to insert the root canal instruments. Never proceed to the next size instrument until the previous instrument passes freely to the desired position in the canal. The **PREP CANAL** is used in the chamber and canals only with the first two or three sizes of instruments. The canals should be further prepared using sodium hypochlorite solution only with the next one or two instruments sizes. There is usually enough residual activity of the **Prep Canal** to lift out the remaining pulp tissue and debris. Sodium Hypochlorite solution should be used in the canals and repeatedly instrumented into the canals until all evidence of bubbling has ceased. The canals can be dried with absorbent points and the medicaments of choice sealed into the canals and chamber in the hope of opening calcified canals. Residual organic tissues might react with the peroxide and cause pressure and discomfort. Always irrigate the canals and chamber with sodium Hypochlorite solution until all evidence of bubbling has ceased.

FOR CHEMO-MECHANICAL PREPARATION OF ROOT CANALS

- Facilitate Cleansing and Shaping of the Root Canal. The EDTA helps remove calcium salts from the calcifications and from the canal surface permitting the reamers and files to more rapidly cleanse and shape the canal.
- Pulp Tissue- Vital and/ or necrotic more easily removed from the canal when irrigated with Hypochlorite solution, the oxygen bubbles released from the urea peroxide float up the pulp tissue, shavings and other debris.
- Helps brighten the tooth if discolored in addition to its ability of digesting pulp tissue. This process is enhanced by the oxygen liberated from the urea peroxide.
- Enhances the penetration of medicaments throughout the root canal system by its ability to more completely clean the canal & open the dentinal tubules.

Prep Canal is available in a packing of
2 tube × 3.5 gm each tube with applicator tips

**Dental Material for the use by Dental professional in the practice of dentistry.
Not for medicinal use.**



PROVAR

Dental Varnish



PRODUCT DESCRIPTION:

Provar dental varnish is copal gum based protective Dental varnish for the institution of the exposed dentine. Reduces presentation of fluids into the tooth and the subsequent placed restoration. Alleviates thermal sensitivity. Needs no thinners.

APPLICATIONS:

Provar dental varnish is the ideal cavity liner and dentinal tubule sealer. It assures perfect Protections to the exposed surface of dentine in teeth prepared for permanent fillings or restoration and is useful as an intermediary varnish prior to the insertion of amalgams, cements or composites.

Composition

Copal gum, Acetone, and Excipients

METHOD OF USE

Prepare the cavity, put small quantity of cavity varnish on a small cotton pellet and apply on the inner walls of cavity. Allow to dry for 40 seconds. Reapply another layer if necessary. Use a new cotton pellet for each application. It is recommended that two thin layers be applied instead of one thick layer.

Storage & Shelflife:

Provar dental varnish is volatile and inflammable and therefore keep container away from heat & fire. Always close the lid immediately after use to avoid contamination and evaporation of the solvent.

Shelflife: 3 years under proper storage conditions.

Presentation: 30ml glass bottle.

Dental Material for the use by Dental Professional in the practice of dentistry.

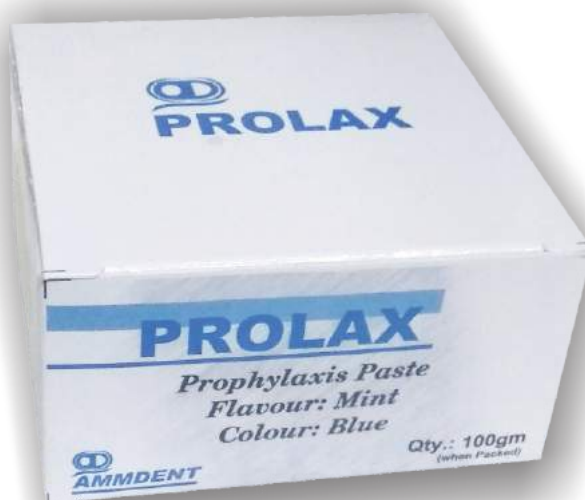
Not for medicinal use.





PROLAX

Prophylaxis Paste



PRODUCT DESCRIPTION:

Prolax is a coarse and medium pumice based paste is ideal for the removal of plaque, calculus and stains caused by e.g. coffee, tea white our distinctive fine and x-fine silica base prophylaxis paste offers a gentle and safe paste for the polishing of implants, porcelain crowns, composite restorations and after scaling of teeth.

Instruction for use:

Take Prolax into a suitable container. Use polishing cup with Prolax. Before starting hand piece, carry Prolax to field of operation and deposit the small amount on each tooth.

Precaution:

All tooth surface should be thoroughly scaled to remove calculus. Necessary examination and radiographs should be taken prior to Prophylaxis with Prolax. During use Prolax wear protective glasses and gloves.

Presentation: 100.gms and 210gms.

Dental Material
Not For Medicinal Use





RESINO SEAL



Root Canal Sealing & Filling Material Resin Based



Resino-Seal: Powder and liquid are mixed to produce a root canal filling material of excellent sealing capacity. **Resino-Seal** allows tightly sealing root canal obturation of excellent tissue compatibility.

COMPOSITION

Resino Seal powder : Bismuth oxide, Methenamine, Titanium dioxide

Resino Seal Liquid : Epoxy resin

INDICATIONS

Permanent obturation of root canals of teeth of the secondary dentition with or without the aid of obturation points.

CONTRAINDICATION

Hypersensitivity against epoxy resins or other components of the root canal filling materials.

PRECAUTIONS

Do not use **Resino Seal** in persons allergic to epoxy resins.

Avoid contact of powder or resin and unset paste with skin or oral mucosa.

After incidental contact, wash and rinse with plenty of water.

Wear protective gloves and glasses.

INTERACTIONS WITH OTHER DENTAL MATERIALS

Resino Seal may react with hydrogen peroxide if left in the root canal after irrigation.

ADVERSE REACTIONS

With sealers containing epoxy resins, the following adverse reactions were reported:

- Reversible acute inflammation of the oral mucosa after contact with the unset paste.
- In individual cases, local and systemic allergic reactions have been reported.

PREPARATION OF THE ROOT CANAL

Thoroughly dry the root canal with sterile paper points.

DOSAGE AND MIXING

Powder and liquid are mixed on a glass slab using a metal spatula. 2 to 3 volume units of powder are mixed with 1 volume unit of resin. Mix to a homogeneous consistency which breaks when lifted 1.5 to 2.5 cm (1/2 to 1 inch) above the glass slab.

If a particularly fluid mix is required, the glass slab with the cement mixture may be carefully warmed over an alcohol flame.

INSTRUCTIONS

Apply the mixed cement onto the tip of a Lentulo spiral. To avoid the formation of air bubbles in the material and overfilling of the canal, advance the lentulo spiral slowly to the apex running at very low speed. Withdraw Lentulo very slowly still running at low speed.

If **Resino seal** is used in combination with gutta-percha points or other cores and if there is the risk of overfilling, use reamers to apply **Resino seal** into the canal. Choose a reamer of the size of the last instrument used during apical root canal preparation. Place **Resino seal** by a pumping action of the reamer with simultaneous rotary movement in a counterclock direction. It is only necessary to apply a light coating of **Resino Seal**.

Dip the disinfected and dry master point into **Resino seal** and with pumping motions slowly push it into the canals. Additional gutta-percha points and lateral or vertical condensation methods can be applied.

CLEANING OF INSTRUMENTS

Spatulas, mixing slabs and instruments should be cleaned immediately after use with alcohol or **acetone**.

SETTING TIME

The setting time according ISO 6867:1986 (E) ranges between 9 and 15 hours at 37 °C.

STORAGE

Store at room temperature.

Keep powder bottle and resin bottle tightly closed.

Dental Material for the use by Dental Professional in the practice of dentistry.

Not for medicinal use.



ROOT+PLUS MTA

Mineral Trioxide Aggregate Endodontic repair Cement



Instruction for Use

ROOT+PLUS is an endodontic repair cement. ROOT+PLUS powder is consisting of very fine hydrophilic particles of several mineral oxides. After contact with ROOT+PLUS liquid it forms a gel that hardens to an impermeable barrier.

1. Indications

· Repair of root perforations during root canal therapy. Root end filling (retrograde). Pulp capping. Root end filling (orthograde)

2. Contraindications: Not known, 3. Side effects: Not known,

4. Dispensing and Mixing

The powder/liquid ratio is 2.6/1.0. This can be obtained by mixing 1 level scoop of powder and 2 drops of liquid.

If a thinner or firmer consistency is desired, the mixing ratio can be modified slightly:

For root end filling (orthograde) (see 5.4) the recommended mixing ratio is 2:1 (by weight). This can be obtained by mixing 3 level scoops of powder and 8 drops of liquid. The mixed material gives a sufficient amount for apexification that can be applied optimally with a suitable application device into the root canal.

For mixing of ROOT+PLUS use a mixing pad that is impervious to water or a glass block of suitable dimension.

For accurate dispensing of ROOT+PLUS powder shake the bottle to loosen the powder. Overfill the spoon with the powder, level the powder with the mixing spatula and carry it onto the mixing pad.

For dispensing of ROOT+PLUS liquid turn the bottle vertically with the tip about 5cm above the mixing pad. Steady your hand and squeeze the bottle gently to dispense one drop at a time. If any bubbles are present, lightly tap the bottle with the fingers holding it. Discount under-sized drops that contain bubbles and are obviously not full-sized. Discount over-sized drops, usually resulting from holding the bottle too close to the mixing pad or squeezing the bottle too hard and/or for too long.

Application

5.1. Repair of root perforations

Place rubber dam and clean the root canal system using intra-canal instruments and irrigate with NaOCl. Dry the root canal with paper points and isolate the perforation. Fill the apical canal space up to the perforation completely with a suitable root canal filling material.

Presentation: Powder 1gm, Liquid 3ml.



SODIUM Hypochlorite



DISCRIPTION

Sodium hypochlorite is both an oxidizing and hydrolyzing agent. It is bactericidal and proteolytic. Sodium hypochlorite solution have been used as endodontic irrigant. Its use as an infant sanitizer is nearly universal. Irrigation of root canals with sodium hypochlorite solution

DIRECTION FOR USE:

The pulp chamber is opened in the usual manner. The chamber contents are removed with burs and excavators and then flushed with sodium Hypochlorite solution. The sodium Hypochlorite solution will react with the peroxide and the bubbling will help open the orifices of the canal. A fine instrument, reamer or file, is then introduced into the canal, mixing motion will enhance the bubbling and float out debris. The first instrument should not be placed more than half the way down the canal. This action is then followed by gentle irrigation with sodium Hypochlorite solution.

Presentation:500ml bott.

Dental Material for the use by Dental Professional
in the practic of dentistry.





TEMP-TING

Non Eugenol Hydraulic Temporary Luting Material Single Paste System



Discription:

TEMPTING is a Non Eugenol temporary Luting material self-curing under humidity for temporary fixation of crowns, bridges, inlay and onlays. it is a single paste system and no mixing is required. The material is impermeable to drugs.

COMPOSTION:

Zinc Oxide, Zinc Sulphate, Barium Sulphate and excipient to make.

APPLICATION:

Clean enamel, dentine and metal surfaces thoroughly and do not dry completely. make sure not to leave any trace of other materials which could impair the properties of Tempting. Take required amount of Tempting in the wet crown/bridge. The abutment tooth should also be wet. Remember Tempting sets in contact with moisture. So keep abutment and crown/bridge wet while Tempting is very to remove. Remove excess Tempting with a stiff cementing. probe and wash off with 3 way syringe water jet. The hardening process starts after a minute. Avoid any exposure to chewing pressure for about 30 minutes after application.

Presenation: 1tube X6.7 gms

Note:

Due to sensitivity to moisture, close the tube immediately after removing the material required.

DO NOT USE WET INSTRUMENT:

Dental Material for the use by Dental Professional in the practice of dentistry.

Not for medicinal use.
For use in Dentistry.





URC

Universal resin cement *Dual cure resin composit*



URC is the first moist-bonding resin cement. It is formulated with an advanced, hydrophilic, Resin Acid-Integrating Network (R.A.I.N) that is unique. The material bonds in a slightly moist field.

URC is self-adhesive, forming chemical bonds to dentine and enamel, Precious metals, ceramics, composites and fiber posts. Bonding agents are not required; however, they may be used if desired. Etching untreated enamel surfaces is indicated, but it is not necessary to etch dentine.

URC is indicated for cementation of PFM, gold Cerec and all-ceramic and all-ceramic crowns; inlays; gold, metal, titanium and fiber posts; Maryland Bridges and veneers; and for bonding stainless steel and nylon splinting materials. The viscosity of the cement is ideally suited for luting applications. It is filled with both sub-micron and micron sized particles. The film thickness is 14 microns. Oxygen Inhibiting Gel can be placed over the margins to prevent the formation of an oxygen-inhibited layer.

HOW TO USE THE AUTOMIX SYRINGE

Remove cap and place a mixing tip on the automix syringe. To ensure an even mix of base and catalyst, dispense a small drop (2-3mm) of the premixed portion of the cement onto a pad and discard. Dispense mixed cement directly onto tooth or into the restoration. Discard mixing tip. Recap syringe. Do not cross-contaminate base and catalyst.

Universal Resin Cement Instruction for use

Slightly moist surfaces exhibit neither dryness and pooling of water. Remove excess water with compressed air or cotton pellet. Surfaces should be shiny or glossy. Overly wet surfaces will result in decreased bond strength.

For Post Cementation

Prepare the post hole. Rinse and remove excess water with a short blast of air or paper points. Leave dentine slightly moist. Etching and bonding agents are not required. Automix **URC** by placing a mixing tip on the double barrel syringe and dispensing material. If using standard syringes, dispense equal amounts of base and catalyst on a mixing pad and mix completely with a suitable spatula for 20 seconds. Carefully recap syringes. Do not cross-contaminate base and catalyst. Place cement into canal and without creating voids. Seat post. Remove excess cement. Light cure 40 seconds. Cement will continue to auto-cure for 7-8 minutes. Treatment can be completed once the cure is completed.

For Inlays and onlays

Rinse tooth preparation and remove excess water. Leave tooth surfaces slightly moist. Automix **URC** by placing a mixing tip on the double barrel syringe and dispensing material. If using standard syringes, dispense equal amounts of base and catalyst on a mixing pad and mix completely with a suitable spatula for 20 seconds. Carefully recap syringes. Do not cross-contaminate base and catalyst. Place cement into the preparation and seat the restoration. Remove excess cement with dental floss while maintaining positive pressure on the inlay or onlay. Cement may bond to adjacent tooth if excess is not removed. Apply oxygen inhibiting gel on the margins to eliminate the air-inhibited layer. Light cure 20-30 seconds. **URC** will continue to auto-cure for 7-8 minutes until curing is complete.

Caution

Uncured material may cause eye or skin irritation on contact. Dental professional should wear safety glasses and surgical gloves. Storage and Handling: Store tightly sealed in original container at cool room temperature. Avoid direct light, extremes of temperature, contamination and source of ignition. Shelf life of unopened product: 3 Years from date of manufacture.

Dental Material.

Not for medicinal use.



ULTRA WHITE

Professional tooth whitening system



- ✓ Thoroughly brush teeth & floss before treatment.
 - ✓ Each Tube has four treatment doses (Containing 2.2ml. Gel), use approximately 0.6ml.per custom made tray.
 - ✓ Express the contents evenly in each tooth compartment into the deepest portion of the custom made tray. Do not over fill the tray.
 - ✓ Seat the tray with gel firmly over the teeth with the care not to push all of the gel out.
 - ✓ Wipe off any excess whitening gel to remove all gel from gums or gum line.
 - ✓ Wear the filled tray for the treatment period as instructed by Dentist.
 - ✓ After treatment remove the tray, brush and rinse the gel from your teeth and tray.
-
- ⤴ 10% Carbamide peroxide gel:- 4-8hours for 4-6times.
 - ⤴ 16% Carbamide peroxide gel:- 2-4hours for 4-6times.
 - ⤴ 22% Carbamide peroxide gel:- 1-3hours for 4-6times
 - ⤴ 35% Carbamide peroxide gel:- 30minutes – 1hour for 2-3times.
 - ⤴ Treatment should be given minimum at the interval of 1 day.

Please do not.....

- Do not smoke while bleaching.
- Do not use while pregnant.
- Do not eat while treatment.
- Do not expose the tube to heat and sunlight.
- Do not Freeze the tube.

Please follow the directions carefully, if you have more than mild tooth Sensitivity, cease the treatment and contact your dentist.

ULTRA WHITE is a professional tooth whitening System
& Should be used Strictly by/ Under the instruction of a professional Dental Surgeon

DENTAL MATERIAL
NOT MEDICINAL USE





ZINC OXIDE



Zinc oxide powder reacts with Eugenol to form a temporary cement or lining under a non composite resin restoration.

Applications:

Zinc oxide is used for temporary cementation of cavities. May be mixed with Eugenol for the presentation of temporary cement

Composition:

Pure zinc oxide dental grade.

Method of use:

Mix with eugenol to form a thick paste and place into a tooth cavity as a cement on a tooth cavity or as a lining under a non composite resin restoration.

Precautions:

Avoid contact with eye. Inhibits the polymerization of composite resins when used with and should not be used as a dressing prior to composite resin restoration.

Storage & shelf life:

Store in as cool and dry environment. Always close the lid immediately after use. Shelf life : 3 years under proper storage.

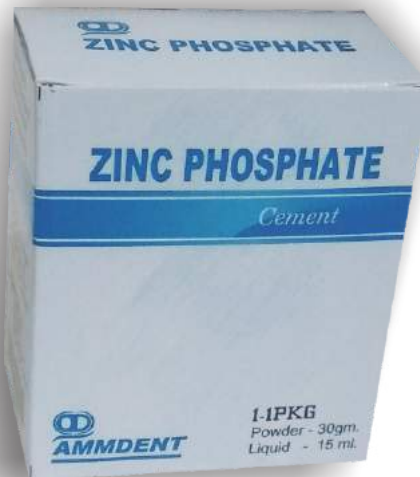
Packaging:

100 gm plastic jars.

Dental Material for the use by Dental Professional in the practice of dentistry.



ZINC PHOSPHATE CEMENT



1.General

Zinc Phosphate cement is used for luting permanent metal restorations and as a base.....

It has low initial pH, it may cause pulpol irritation, especially where only a thin layers of dentine exist between the pulp; thus it is important to follow the correct procedures and precautions when using zinc phosphate cement.

2.Procedure

- One clean, dry glass mixing slab or paper at room temperature (22-24C and humidity of 50±10%).
- A non corrosive spatula free from dust, set cement and moisture.
- **Powder and liquid ratio:**
For use as a cement : 1.0-1.3g:0.5ml
For use as a base: 1.2-1.5g:0.5ml.
- **Mixing technique:** Place powder on the slab and divide into there portions:3/6/, 2/6. Add 1/6 of powder into placed liquid and mix them, then add remaining positions one by one and mix well till plastic consistency is obtained. The mixing time is about 90 seconds.

3. Mixing time: 1.5minutes

- **Setting time:** 2.5-8minutes for cement; 2-6 minutes for base.
- **C.Strength:** (24hours after mixing)3 70Mpa.

4.

Pack Size: 30gm Powder, 15ml liquid

5. Expiry: 3 years from the date of manufacturing.

Dental Material for the use by

Dental Professional in the practice of dentistry.

Not for Medicinal use.



ZINOGEN

Zink Oxide Eugenol Cement

**Product description:**

Zinogen is a quick set ZOE reinforced easy mix zinc-oxide-eugenol composition for the thermal insulation and temporary restoration.

Applications:

Cavity lining
Temporary restoration
Temporary cement for crowns
Cavity liner under most restorative materials.

Composition:

Zinogen is a powder liquid composition of zinc-oxide, eugenol, zinc acetate and excipients.

Method of use:

Mix powder and liquid in a ratio of 2.5 gms to 1 ml for about 1 minute to obtain putty consistency place the putty into the cavity and remove excess of the product immediately.
Allow hardening for 3-4 minutes trim the restoration with
A tungsten carbide bur.

Precautions:

Zinogen is a eugenol based composition and therefore it should not be used as a liner under resin based filling materials.
Avoid contact with eyes.

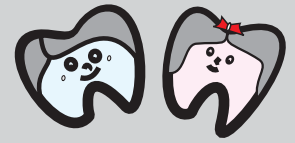
Storage & shelf life:

The product should be stored in cool & dry environment.
Replace cap tightly after use.
Shelf life: 3 Years under proper storage.

Presentation:

Each pack contains: 20 gms powder & 10ml liquid, spoon and mixing pad.

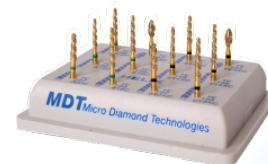
Dental Material for the use by Dental Professional in the practice of dentistry.
Not for medicinal use



Dr. Clear® Multi-Use Diamonds



Spirals



Quality Certificates ISO 13485:2016 CE

For further information

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Bigger
Smiles

