ESSENTIAL
DENTAL
SYSTEMS

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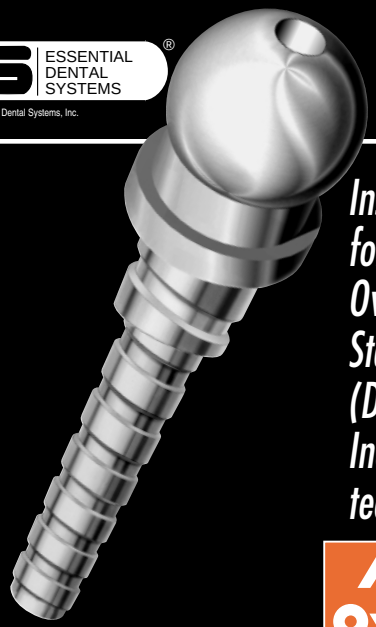

IMPORTANT:
Read pages 7 through 17 for technique instructions first.

Instruction Booklet for EDS' AccessPost™ Overdenture Stainless Steel Posts (Direct/non-coping & Indirect/coping techniques).

AccessPost™ Overdenture

Like the original EDS' AccessPost, the patented EDS AccessPost Overdenture system is a passive post that provides the necessary strength, retention and stability a restoration requires. EDS'AccessPost Overdenture also gives you exactly what the name says: access to the periapical tissues if they become infected after the root canal is completed and the post has long since been cemented. Without sacrificing the post's retention,EDS' AccessPost Overdenture gives you the one option you may need to conservatively treat an apical infection - easy post removal without widening the original canal. Retreatment of a failed root canal is possible as a routine and predictable in-office, non-surgical service for every practitioner. This is accomplished by using the special retreatment drills that are available in a separate, optional EDS AccessPost Retreatment Kit (Cat. No. 570-0-570-04)

Note: Only the EDS'AccessPost retreatment drills should be used. No other drills will perform the task.

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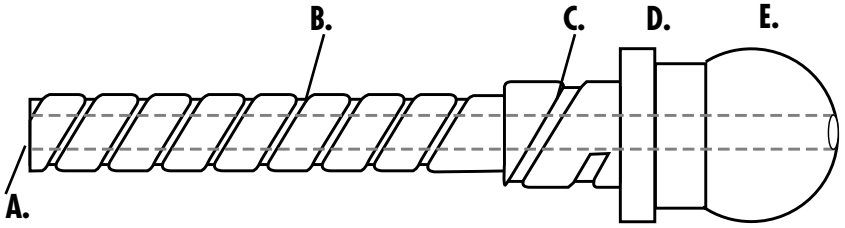
EDS' AccessPost Overdenture Characteristics



A. THE THICK-WALLED, HOLLOW TUBE DESIGN

The thick-walled, hollow tube design releases internal hydrostatic pressure upon cementation.
It also allows for easy removal of the post and retreatment of infected apical areas.

B. REVERSE-GROOVED SHANK

The post has a grooved shank for increased retention and aids in the post's removal when retreatment drills are used.

C. THE SECOND TIER OF THE POST

increases the intimacy of fit between the post and the natural point at which the canal widens, thereby reducing destructive lever arms.

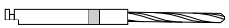
D. THE FLANGE, when used in the direct technique (non-coping), provides greater stability for the post and better distribution of masticatory stresses to the root.

When used in the indirect technique (with coping), it accomplishes the same, while providing a positive seal with the cast coping.

E. THE EDS ACCESSPOST OVERDENTURE HEAD

is a ball, allowing the denture to rotate, alleviating functional stresses and the need for parallelism. All post sizes have the same size head for use with either the enclosed standard nylon caps or the optional EZ-Change attachment (Cat. No. 550-00).

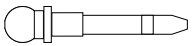
Components and Their Uses



Primary Reamer - Used to create the primary post-hole after use of the Peeso or Gates Glidden reamers (Essential Gates Glidden drills are recommended.) The Primary reamer is self limiting within each size.

Secondary Drill - Used to create the space for the second tier. The second tier of the post allows better adaptation of the post to the normal anatomic flare of the post-hole. Used when doing indirect/coping technique.

OVD Countersink Drill/Root Facer - Used to create the preparation for the second tier and the flange of the head of the post, in one operation. Used when doing direct/non-coping technique.



Transfer Stud - Used in the laboratory technique for incorporating the attachment cap and forming a coping.

Attachment Cap - Incorporated within the denture to retain the denture to the overdenture attachments.

May Be Purchased Separately

EZ-Change® (Cat. No. 550-00) A patented keeper and cap insert system that allows for "quick & easy" cap insert replacement. When worn, this cap insert may be easily replaced in seconds.

EDS' AccessPost Retention Kit (Cat. No. 560-00) This kit contains a special drill to groove the post-hole walls for added post retention. It also contains 9 gm of catalyst & 9 gm of base of patented Flexi-Flow fluoride releasing composite cement.

EDS' AccessPost Overdenture Facts

The EDS' AccessPost Overdenture attachments are color-coded and come in three different sizes. While the head of the posts are of a constant diameter, the length and width of the shanks vary. Because you can shorten the EDS AccessPost Overdenture attachment to accommodate varying root lengths, they will satisfy practically all of your overdenture needs.

Post Number	1	2	3
Color Code	RED	BLUE	GREEN
Length of Head	3.20mm	3.20mm	3.20mm
Length of Shaft	9.00mm	10.00mm	12.00mm
Total length of Post	12.20mm	13.20mm	15.20mm
Height of Head With Attachment Cap	4.00mm	4.00mm	4.00mm
Diameter of Shaft	1.10mm	1.35mm	1.60mm
Diameter of Primary Reamer	1.20mm	1.45mm	1.70mm
Length of Primary Reamer	11.00mm	12.00mm	14.50mm

Please Note: Your Introductory Kit contains sizes 1&2. Refill Kits are available in sizes 1,2 & 3.

Recommended Uses for EDS' AccessPost Overdenture

It is recommended that the attachments not be placed for 3 to 4 weeks after the denture insertion, to allow for complete settling of the tissue bearing areas.

#1 (Red)

- normal to large roots of maxillary first premolars
- average roots of lower anteriors
- thin roots of premolars
- average roots of maxillary laterals

#2 (Blue)

- average roots of maxillary centrals and canines
- average roots of premolars

#3 (Green)

- large roots of maxillary centrals and cuspids.

Technique: ***Post Selection***

Post selection is best done by placing a post in a hemostat and holding it over an undistorted x-ray. If there is a minimum of approximately 0.5mm of lateral root structure at the most apical placement of the post, there is sufficient root structure for placement. *The second tier and flange of the post must always be fully seated*. *If the direct technique is used the dentist must fully seat the second tier and flange of the post*. If a complete seat does not exist, there is an increased chance of the post loosening over time. The flange should either seat within the countersink preparation (direct/non-coping technique), or on the coping (indirect technique.)

Post Hole Preparation

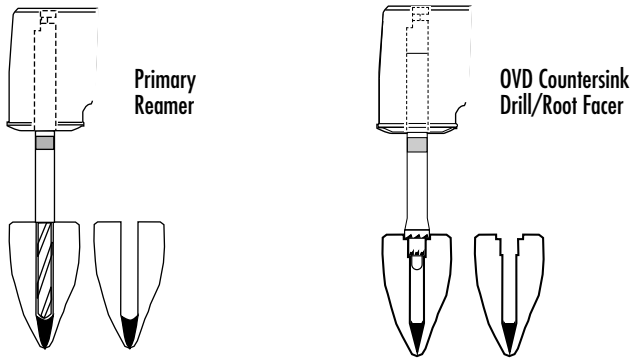
The post-hole preparation begins with the removal of the root filling material and the preliminary sizing of the canal using either a Peeso or Gates Glidden reamer (*EDS' Gates Glidden Drills are recommended, Cat. No. 160-00*). Refer to the chart below for the appropriate Gates Glidden reamer.

Peeso		Gates Glidden		EDS Gates Glidden	EDS' AccessPost Overdenture Primary Reamer
3	or	4	or	red	then 1 (red)
4	or	5	or	blue	then 2 (blue)
5	or	6	or	green	then 3 (green)

When 100% of the post-hole length and 90% of the width have been achieved, the primary reamer is used. Since the EDS AccessPost Overdenture will fit optimally if a more concentric hole is maintained, *the number of entries into the post-hole with the primary reamer should be limited*. It is much easier to prepare the post-hole when the canal is lubricated with either water or an anesthetic solution, or with any suitable wetting agent.

Direct/Non-Coping Technique

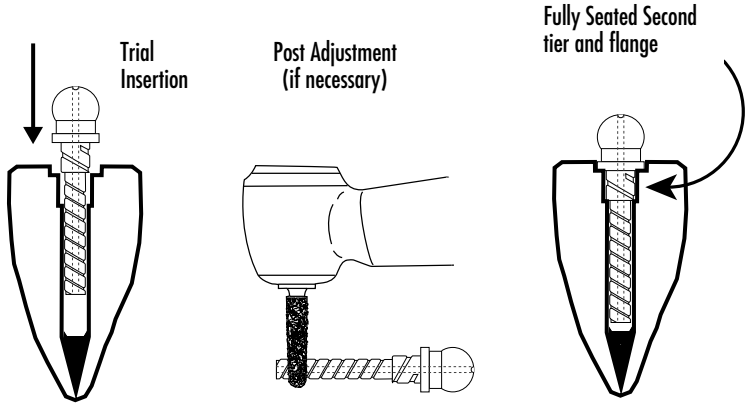
After using the primary reamer, the countersink drill is used to cut 2 preparations in one operation. It prepares the seat for the second tier, as well as the seat for the flange of the post. The smooth extension on the drill is simply a lead to facilitate parallelism between the primary post-hole, second tier, and flange. The post *must always fully seat*. You can determine full seating of the post by the flush fit of the flange within its preparation. A full flush fit may not occur if the root is broken down on the buccal for example. To assure a full flush fit, deepen the countersink/root faced surface enough to create a full 360° preparation within the root. There is no danger in countersinking the post too much. *If on the other hand, the dentist does not seat the post completely, EDS' AccessPost Overdenture's retention and stability is reduced, increasing the chances of the post loosening or fracturing under function.* To achieve a complete seating in post-hole preparations *shorten* the length of the shank of the post to be placed, *the dentist must remove enough apical post length* to allow full seating of the post's second tier and flange.



Post Insertion

Trial insert the EDS' AccessPost Overdenture post. It is extremely important to note that *the flange and second tier must always fully seat.* Therefore, if the flange is not seated within the preparation, shorten the *apical* end until the post is fully seated.

Note, the countersink drill does *not* have a stop. If you find there is not enough occlusal room, you may countersink deeper into the root to provide more clearance for the overdenture post and nylon cap (or EZ-Change attachment Cat. No. 550-00).

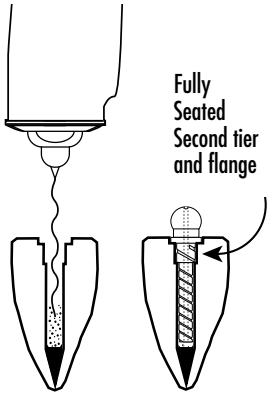


NOTE: Cementing the EDS AccessPost Overdenture,

A. Use composite cement only in a canal that has been either etched or grooved (for canal grooving EDS recommends EDS grooving drills Cat. No. 593-0 & Cat. No. 593-123) and has had all remnants of any eugenol containing temporary cements or root canal pastes removed.

B. Do NOT use glass ionomer cements, due to their brittle nature.

When you are sure that the second tier and flange are fully seated within their preparation, remove the post and cement it with the cement of your choice *(Flexi-Flow® Cat. No. 850-00 or Flexi-Flow Natural® Cat. No. 860-00 fluoride releasing composite cement from EDS is recommended)*. Cement is now placed in the post-hole and on the post. The post is inserted into the post-hole. Special care must be taken to make sure the flange is completely seated. Excess cement is now removed.



For highest retention, use the EDS AccessPost Retention Kit (Cat. No. 560-00). This kit contains a special drill to groove the post-hole walls for added post retention. It also contains 9 gm of catalyst & base of patented Flexi-Flow fluoride releasing composite cement. Flexi-Flow locks into the undercuts of the post and the grooves in the dentin, to maximize the EDS AccessPost Overdenture retention.

Incorporation of the Attachment Cap (These techniques may also be used with the EZ-Change® attachment cap system, Cat. No. 550-00)

Once the overdenture attachment is placed, the dentist has two choices.

1) AT CHAIRSIDE, the dentist can use a direct one-visit technique.
2) OR THE LABORATORY can place the attachment cap within the denture.

1. CHAIRSIDE TECHNIQUE - Place the attachment cap on the post and mark the cap with marking paste. Place the denture over the ridge and remove. The marker tells you where to relieve acrylic in the denture. Repeat this procedure until the denture fits passively over the cap. Now place cold cure acrylic into the relieved portion of the denture and place over the ridge, and let set. *Make sure the rubber band is covering the height of contour of the head of the post. If not, there is a risk that the cold cured acrylic could lock in under the head, making removal of the denture difficult.*

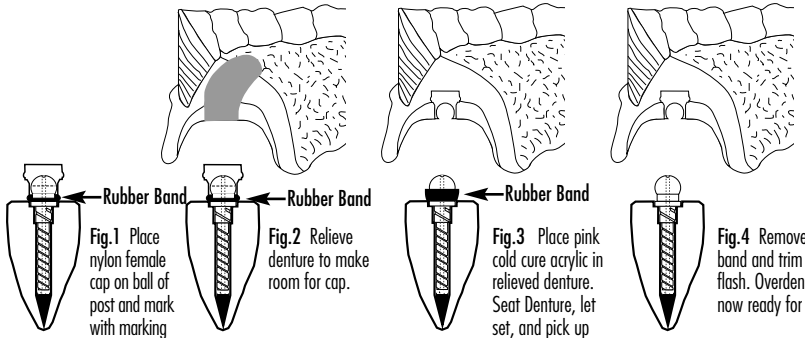


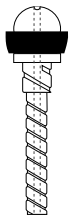
Fig.1 Place nylon female cap on ball of post and mark with marking paste.

Fig.2 Relieve denture to make room for cap.

Fig.3 Place pink cold cure acrylic in relieved denture. Seat Denture, let set, and pick up attachment cap.

Fig.4 Remove rubber band and trim the flash. Overdenture is now ready for use.

Use a *natural pink* self curing acrylic in case there is any perforation of the denture. Remove the denture when set. Remove rubber band on post and discard. It is no longer needed. (See Figures 1-4 on page 12).



Caution!! Again, do not remove the rubber band around the base of the overdenture attachment until *after* the attachment cap is incorporated into the denture. If you do, the acrylic could lock into the undercut of the ball and prevent removal of the denture from the mouth. The rubber band prevents this from occurring (Fig. 5).

The attachment cap should always have a little clearance from the root when seated onto the ball of the post. If not, the attachment cap will not be able to rotate on the ball. If necessary, remove a small amount of nylon on the lip of the cap to create this space (Fig. 6).

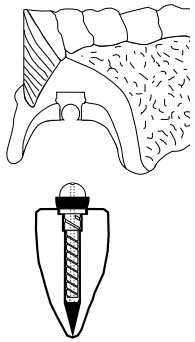
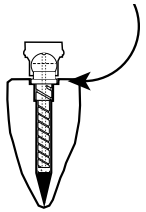


Fig.5 Cap Incorporation

Fig.6 Cap Adjustment



2. LAB TECHNIQUE -

a) Cement the EDS AccessPost Overdenture attachment, and remove the rubber band.
b) Take a rubber base or silicon impression.
c) Send the impression, attachment cap (or optional EZ-Change® attachment cap system, Cat. No. 550-00) and brass transfer stud to the laboratory.
d) The lab places the transfer stud into the impression and pours a stone model.
e) The lab can now heat cure the cap into the denture.
f) The denture is returned to you with the cap already incorporated within it.

Indirect/Coping Technique *(DO NOT USE THE POST FOR TAKING THE IMPRESSION)*

See page 7 for "Post Hole Preparation."

After using the primary reamer, the secondary drill is used to create the second tier preparation in the coronal post-hole preparation. The smooth extension on the drill is simply a lead to facilitate parallelism between the primary post-hole and the second tier.

When doing the indirect/coping technique, a 0.25mm of space is needed between the flange of the post and the coronal tooth structure for the coping to be placed. This is achieved by placing the corresponding size brass transfer stud into the fully prepared, two tier post hole preparation (Fig.1). To achieve the 0.25mm of space, seat the post completely, remembering to shorten the post apically if needed to achieve a complete seating. When full seating is completed, remove the post and seat *the corresponding size brass transfer stud* making sure there is a 0.25mm space between the flange and the coronal tooth structure for the coping to be placed (Fig. 1).

Note: The number of rings on the brass transfer stud = size of post

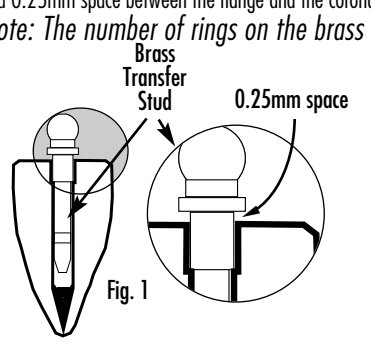


Fig. 1

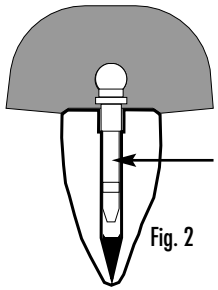


Fig. 2

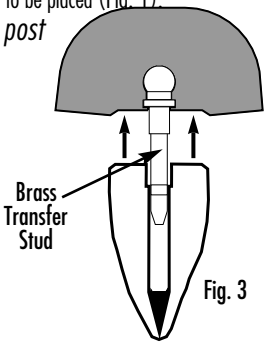


Fig. 3

1. After seating the corresponding size brass transfer stud, take an impression of the brass transfer stud (Fig. 2).
2. Remove the impression with the transfer stud from the canal (Fig. 3), and temporarily seal the canal.
3. Send the impression and brass transfer stud to the laboratory (Fig. 4).
4. The laboratory pours up the transfer stud and impression in stone or plaster (Fig. 5).
5. The laboratory then waxes up and casts the coping (Fig. 6).

LABORATORY PROCEDURE:

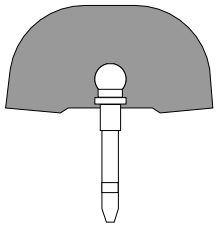


Fig. 4

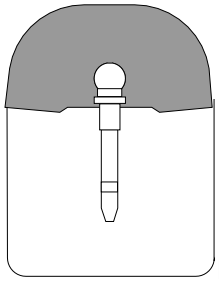


Fig. 5

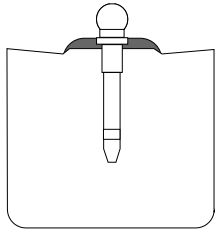


Fig. 6

NOTE: Cementing the EDS AccessPost Overdenture,

A. Use composite cement only in a canal that has been either etched or grooved (for canal grooving, EDS recommends EDS grooving drills Cat. No. 593-0 & Cat. No. 593-123) and has had all remnants of any eugenol containing temporary cements or root canal pastes removed.

B. Do NOT use glass ionomer cements, due to their brittle nature.

7. The dentist then cements the coping (Fig. 7). *Flexi-Flow® Cat. No. 850-00 or Flexi-Flow Natural® Cat. No. 860-00 fluoride releasing composite cement from EDS is recommended.* After the coping is cemented (and while the cement is still wet), the EDS AccessPost Overdenture is cemented into place (Fig. 8). The insertion stops when the flange is fully seated within the coping. (Fig. 9)

The dentist is now ready to insert the female cap (or optional EZ-Change attachment) into the overdenture. (Please see "Incorporation of the Attachment Cap" on page 12 for the details of this procedure.)

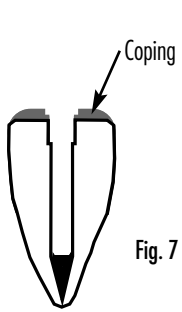


Fig. 7

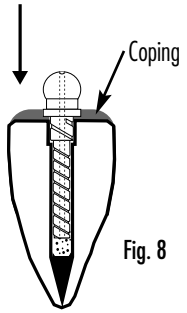


Fig. 8

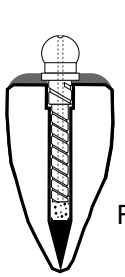


Fig. 9

EDS' AccessPost Overdenture Kits & Their Contents

To order EDS' AccessPost Overdenture and EDS'AccessPost Overdenture accessories contact your authorized EDS dealer, or call **1-800-22-FLEXI**.

Introductory Kits:

Direct Introductory Kit
(4 posts each of sizes 1, 2, & accessories) Cat. No. 510-00

Indirect Introductory Kit
(4 posts each of sizes 1, 2, & accessories) Cat. No. 515-00

Refills:

Direct Refill Kits
(6 posts, reamer, countersink)
#1 . . . . . Cat. No. 520-01
#2 . . . . . Cat. No. 520-02
#3 . . . . . Cat. No. 520-03

Indirect Refill Kits
(6 posts, studs reamer, drill)
#1 . . . . . Cat. No. 525-01
#2 . . . . . Cat. No. 525-02
#3 . . . . . Cat. No. 525-03

Accessories:

Grooving Drill
(For grooving of the canal, post sizes 1, 2, & 3)
Cat. No. 593-123

Retention Kit
(For maximum post retention. Includes Flexi-Flow® cement, grooving drills, and accessories)
Cat. No. 560-00

Nylon Attachment Caps
(6 female overdenture caps, w/ rubber bands. For use in direct & indirect techniques)
Cat. No. 580-01

EZ-Change®:

Introductory Kit
(2 Keepers, 2 cap inserts, 2 rubber bands, EZ-Change wrench)
Cat. No. 550-00

Keeper & Cap Inserts
(2 Keepers, 2 cap inserts, 2 rubber bands)
Cat. No. 550-01

Cap Inserts
(6 cap inserts) . . . . . Cat. No. 550-02

EZ-Change Wrench . . . . . .Cat. No. 550-03

Also Available For The EDS AccessPost Overdenture:

EZ-Change® (Cat. No. 550-00) A patented keeper and cap insert system that allows for "quick & easy" nylon cap insert replacement. When worn, this cap insert may be easily replaced in seconds.

EDS' AccessPost™ Retention Kit (Cat. No. 560-00) Grooving drills & Flexi-Flow® fluoride releasing composite cement for maximum post retention.

EDS' AccessPost™ Retreatment Kits (Cat. No. 570-0 - 570-04) To gain access for retreatment of the canal by removal of the post.

Flexi-Flow®& Flexi-Flow Natural® (Cat. No. 850-00 & 860-00) Patented, titanium and lanthanide reinforced, fluoride releasing, self curing, multi-purpose composite cements.

Other Essential Dental Products:

EDS' AccessPost™ (Cat. No. 500-00 & Cat. No. 500-12) The thick-walled, hollow tube design and the undercuts of EDS' AccessPost's head and shank offer . . . Strength, Retention, and Stability . . . with the added insurance policy of Retreatability.

Flexi-Post® (Cat. No. 110-00 & 115-00) Patented prefabricated split shank post. Provides maximum retention with minimal insertional and functional stress.

Flexi-Flange® (Cat. No. 410-00 & 415-00) A patented prefabricated post designed to reduce the incidence of root and post fractures significantly - especially where there is little or no coronal dentin.

Flexi-Overdenture® (Cat. No. 210-00 & 215-00) Based upon a patented split shank post, the ball and socket attachment delivers all the benefits of the Flexi-Post® for highest retention of full and partial dentures.

Ti-Core® & Ti-Core® Natural (Cat. No. 800-00 & 810-00) Patented, titanium and lanthanide metal reinforced, fluoride releasing, self curing, composite core build-up materials.

Glove'n Care® Hand Cream (Cat. No. 1200-00 & Cat. No. 1204-00) A specially formulated hypoallergenic hand cream for the care and relief of dry, irritated hands caused by wearing latex gloves. Formulated with minerals mined from the Dead Sea.

For information call:

ESSENTIAL DENTAL SYSTEMS®

1-800-22-FLEXI

Or contact your local
Essential Dental Systems, Inc. dealer.

Essential Dental Systems, Inc.
89 Leuning Street, S. Hackensack, NJ 07606
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