

THE FIRST ESTHETIC BioACTIVE MATERIALS



C O N T E N T S / I N D E X

CONTENTS

ACTIVA™ BioACTIVE-RESTORATIVE™	12
ACTIVA™ KIDS™	13
TUFF-TEMP™ PLUS	28
SPEE-DEE [™] BUILD-UP	30
SEAL-N-SHINE™	35
SPARKLE™ DIAMOND POLISH	35
EMBRACE ESTHETIC OPAQUER	39

BASE/LINER

ACTIVA™ BioACTIVE-BASE/LINER™	14
LIME-LITE™	32

ETCHING 🛒

ETCH-RITE [™]	36	
ETCH ROYALE™	36	
PORCELAIN ETCH GEL	37	
PORCELAIN PREP KIT	38	
EMBRACE™ PFM REPAIR KIT	39	

ACTIVA™ BioACTIVE-CEMENT™	15
EMBRACE™ RESIN CEMENT	34

INDEX

ACTIVA™ BioACTIVE	12-22
Applicator Tips	52-53
Bonding Agents	35,38
Bowls, Mini	50
Brush Tips/Brush Handles	51
Calcium Hydroxide Products	42-45
Caries Detector, Snoop™	49
Cavity Liner, Lime-Lite™	32
Cements	15, 34
Code Rings	50
Core Build Up, Core Forms	30-31
DenTASTIC™ UNO™ & DUO™	35
Dentin Desensitizer	49
Diamond Polishing Paste, Sparkle™	35
Disposable Mixing Wells	55
EDTA	40-41
Embrace™ Fluoride Varnish	26
Embrace™ Pit & Fissure Sealant	24-25
Embrace™ Resin Cement	34
Embrace™ Restoration & PFM Repair	Kit 39

BONDING ()

DenTASTIC[™] UNO[™] & DUO[™]

SILANE

PREVENTION 🙀

EMBRACE™ PIT & FISSURE SEALANT	24
EMBRACE™ VARNISH	26
ORTHO-COAT™	27

HEROIC DENTISTRY

SALLY: COMPASSIONATE SMILE DESIGN 23 MARIA: 9 RESTORATIONS IN ONE VISIT 47

ENDODONTICS (

EDTA 17% SOLUTION	40
FILE-RITE™	41
PREP-RITE™ RC	41
TEMPCANAL™ ENHANCED	42
FORENDO™ PASTE	42
MULTI-CAL™	43
PULPDENT® PASTE	43
PULPDENT® ROOT CANAL SEALER	46
PULPDENT® PRESSURE SYRINGE®	46

Embrace™ Seal-n-Shine™	35
Etch-Rite™ Etching Gel	36
Etch Royale™	36
File-Rite™	41
FLECTA™ Disposable Mirrors	54
Fluoride Varnish	26
Forendo Paste	42, 44
Kool-Dam™	48
Heroic Dentistry	23, 47
Lime-Lite™	32
Mini-Bowls	50
Mirrors, Flecta™ Disposable	54
Mix Tips	53
Mixing Wells, Disposable	55
Multi-Cal™	43-44
Opaquer, Embrace™ Esthetic	39
Orange Solvent, Wonder Orange™	46
Ortho-Coat™	27
PerioCare™	50
Pic-n-Stic™	51

GENERAL DENTISTRY

WONDER ORANGE™ SOLVENT	46
KOOL-DAM™	48
SNOOP™ CARIES DETECTOR	49
DENTIN DESENSITIZER	49

PERIODONTICS

35

38

PERIOCARE™	
------------	--

50

ACCESSORIES ()

CORE FORMS	31
MINI-BOWLS	50
CODE RINGS	50
PIC-N-STIC™	51
T-BANDS	51
BRUSH TIPS & HANDLES	51
APPLICATOR TIPS	52
FLECTA DISPOSABLE MIRRORS	54
MIXING WELLS	55

Pit and Fissure Sealant	
	24, 25
Porcelain Etch Gel	37
Porcelain Prep Kit	38
Porcelain Repair Kit, Embrace™	39
Prep-Rite™ RC	41
Pressure Syringe [®] , Pulpdent [®]	46
Provisional Material, Tuff-Temp [™] Plus	28-29
Pulpdent® Paste	43-45
Root Canal Sealer, Pulpdent®	46
Seal-n-Shine™, Embrace	35
Silane Bond Enhancer	38
Snoop™ Caries Detector	49
Sparkle™ Diamond Polishing Paste	35
Spee-Dee™ Build-Up	30-31
T-Bands	51
TempCanal™ Enhanced	42-45
Temporary Crown & Bridge Material	28-29
Tuff-Temp™ Plus	28-29
UNO™, DenTASTIC™	35
Wonder Orange™Solvent	46

PULPDENT®

DENTAL INNOVATION SINCE 1947

Pulpdent's introduction of its patented ACTIVA BioACTIVE Products in 2013 is a revolutionary development in esthetic bioactive dental restorative materials. Activa unlocks nature's healing powers, mimics the physical properties of tooth structure, behaves favorably in the moist oral environment, and maximizes the potential for remineralization.



Pulpdent is a family owned dental research and manufacturing company established in 1947 to promote Pulpdent Paste, the first pre-mixed calcium hydroxide paste and first bioactive dental material, world renowned for its use in vital pulp therapy and root canal therapy. Each year Pulpdent Corporation renews its commitment to investing in research and new technologies, earning the trust of the profession, and inspiring clinicians with new ideas and materials that advance their practice of dentistry and the oral health of their patients.

2017

Pulpdent celebrates 70 years of dental innovation as the world leader in esthetic bioactive dental materials.



2016

MCP: MODIFIED CALCIUM PHOSPHATE

Development of MCP, a Modified Calcium Phosphate formula for cavity lining and pulp capping, and the introduction of ACTIVA BioACTIVE-CEMENT.





2009 TUFF-TEMP PLUS

Development of BPA-free Tuff-Temp, a dual cure provisional crown and bridge material with patented rubberized-resin chemistry that is tougher and more impact resistant than all conventional dental materials.



2 0 0 2 EMBRACETM WETBONDTM

Development of the first BPA/Bis-GMA-free hydrophilic dental resins: Embrace Pit & Fissure Sealant, Embrace Resin Cement, Embrace Seal-n-Shine, and Spee-Dee Build Up.



2013 ACTIVA BIOACTIVE

Development of the patented, hydrophilic, BPA-free ACTIVA bioactive resins, the first esthetic bioactive dental restorative materials.



2005

SAVE THAT TOOTH

Publication of *Save That Tooth* by Dr. Harold Berk, chronicling six decades of heroic dentistry.



1996

ISO certification: Pulpdent is one of the first dental manufacturers in North America to be ISO Certified.



L I N E

1989

RESIN CHEMISTRY

Development of light cure and dual cure dental resin materials: resin cement, core build up material, pit and fissure sealant and orthodontic adhesives.



1980

The company invests in chemical production and machining capabilities and focuses on the development and manufacturing of new products.



1963

PRESSURE SYRINGE / ROOT CANAL SEALER

Development of the Pulpdent Endodontic Pressure Syringe and Pulpdent Root Canal Sealer for root canal obturation of primary and permanent teeth.



1947

PULPDENT PASTE

Dr. Harold Berk and Benjamin Rower found the company and launch Pulpdent Paste, the first pre-mixed calcium hydroxideaqueous methylcellulose pulpal dressing and first bioactive dental product.

1985

PERIO CARE / TEMPCANAL

Development of PerioCare and TempCanal.





The Berk brothers assume management of the company.



1955

NATIONAL INSTITUTES OF HEALTH

Dr. Harold Berk makes important contributions to the era of pulp biology. Clinical studies are conducted at the National Institutes of Health (NIH) using Pulpdent Paste for pulp capping, vital pulpotomy and pulpal curettage.





YEARS

Today, Pulpdent remains committed to its founding principles of education, prevention, and proactive dental care so that people can live in comfort, smile with confidence, and enjoy healthier, more productive lives.

SERVICE TO DENTISTRY AND ORAL HEALTH

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THE PRODUCTS IN THIS CATALOG ARE MANUFACTURED IN WATERTOWN, MA USA. They contain no Bisphenol A (BPA), no BIS-GMA, no BIS-DMA and no BPA derivatives.



ISO 9001: 2008 Pulpdent products are available from your dental dealer. Prices are manufacturer's usgested list prices at the time of publication in US dollars. Prices are subject to change without notice. Please ask your dental dealer for further information.

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HUMANITARIAN EFFORTS



Each year, Future Smiles provides oral health care to more than 2,500 at-risk children through school-based programs and community health fairs in southern Nevada. Pulpdent has been a loyal supporter of the Future Smiles prevention program with donations of EMBRACE WetBond Pit & Fissure Sealant and EMBRACE Fluoride Varnish. Collaborating dental practitioners generously donate their time to deliver restorative care to these patients.

> In partnership with Mil Milagros, Pulpdent donates EMBRACE Varnish, 5% sodium fluoride, to communities in rural Guatemala. Mil Milagros works with rural schools to prevent malnutrition and hunger and to implement oral health care programs. The organization has trained hundreds of teachers and parents to provide oral hygiene instruction and apply fluoride varnish.

Oral Health America

Pulpdent Corporation has donated EMBRACE WetBond Pit & Fissure Sealant, ETCH-RITE etch gel, EMBRACE Fluoride Varnish and FLECTA Disposable Mirrors to Oral Health America's Smiles Across America program since 2007, when Pulpdent donated 60,000 sealants in honor of its 60th anniversary.

MIL MILAGROS

Smiles Across America supports school-based and school-linked sealant programs nationwide to provide preventive oral health services and education to children who may not have access to regular care. Through their organization World Wide Smiles, Dr. Sherwin R. Shinn and his wife, Faria Shinn, provide oral health care to underserved people around the world.

orly Wide Smile

Pulpdent Corporation has donated ACTIVA BioACTIVE-RESTORATIVE, EMBRACE WetBond Pit & Fissure Sealant, and EMBRACE Fluoride Varnish to support Dr. Shinn's mission and his efforts to alleviate suffering from dental disease, and to facilitate disease prevention and education in remote regions of the globe.

7

RECOGNITIC

ACTIVA BioACTIVE

Revolutionary Dr. Howard Glazer

Unique and unprecedented Drs. Croll TP, Berg JH, Donly KJ

> Truly impressive Dr. Josh Wren

DenTASTIC UNO

Bond strength is stronger than the cohesive strength of dentin Dr. Franklin Garcia-Godoy

Embrace Varnish, 5% Sodium Fluoride

Did not separate, did not have to be mixed . . . producing an ever increasing amount of fluoride ion over the length of the study The Dental Advisor

Embrace WetBond Pit & Fissure Sealant

It's an absolutely sensational product Dr. John D. Doykos III

Virtually undetectable margins The Dental Advisor

Bonds under adverse conditions Reality

Spee-Dee Build Up

Cuts and prepares exactly like dentin . . . without ditching, gouging or gumming up the bur Dr. George Freedman

Tuff-Temp Plus

Leaves margins crisper and easier to read First Impressions

Pulpdent Paste

Early pulp organization and consistent [dentin] bridge formation . . . medicament of choice Phaneuf RA, Frankl SN, Ruben MP

Best results were observed with Pulpdent Paste Liard-Dumtschin D, Holz J, Baume LJ

ACTIVA BioACTIVE FIVE PLUS CLINICAL RATING





ACTIVA BioACTIVE TOP BIOACTIVE PRODUCT

DR.BICUSPID ACTIVA BioACTIVE **BEST NEW RESTORATIVE PRODUCT**



ACTIVA BioACTIVE

GOLD METAL **KRAKOW, POLAND**

THE FUTURE of dentistry is now in your hands

IMITATING NATURE

Bioactive dental materials imitate nature. They contain water, interact with saliva and the tooth structure, and actively participate in the cycles of ionic exchange that regulate the natural chemistry of teeth and saliva and contribute to the maintenance of oral health.

LASTING BENEFITS

ACTIVA BioACTIVE products chemically bond to teeth, sealing them against bacterial leakage. Their continuous release and recharge of calcium, phosphate and fluoride ions provide patients with longterm benefits.

BIOMIMETIC RESIN

ACTIVA BioACTIVE products are the first dental resins that mimic the physical and chemical properties of teeth. They contain a bioactive ionic resin matrix, a shock-absorbing rubberized-resin component, and reactive ionomer glass fillers.

YOUR PATIENTS WILL THANK YOU

ACTIVA products take a pro-active approach to dentistry, anticipating oral health needs and focusing on long-term prevention. The bioactive properties of the products continue to work in patients' mouths long after they leave the dental office.

DYNAMIC "SMART" MATERIAL

ACTIVA reacts to the continuous pH changes in the oral environment to help fortify and recharge the ionic properties of saliva, teeth and the material itself. For this reason, ACTIVA is considered a "smart" material.

9

HYDROPHILIC

In 2002 Pulpdent introduced Embrace WetBond materials, the first moisture-friendly ionic dental resins.

Biochemistry only occurs in the presence of water.

The mouth is a moist environment. Saliva is the vital stream that sustains us and is rich with water and ionic components. Dentin contains approximately 15% of water and enamel approximately 4%.

Most traditional dental resins are hydrophobic, repel water and require a dry field. They are designed to be passive, do no harm, and be neutral in the mouth. This is



a negative approach that does not take advantage of the benefits and potential gains achieved by using active materials that play a dynamic role in the oral environment.*

Pulpdent has developed EMBRACE WetBond and ACTIVA BioACTIVE, moisturefriendly materials that work favorably in the moist oral environment, take advantage of the moisture naturally present in the mouth, and exhibit bioactive potential.

EMBRACE and ACTIVA are ionic resins formulated with phosphate groups. In the presence of moisture, there is an ionic interaction that binds the resin to the minerals in the tooth, forming a strong resin-hydroxyapatite complex and a positive seal against microleakage.

EMBRACE WetBond and ACTIVA BioACTIVE are hydrophilic and contain a small quantity of water, but they are durable and insoluble, and they do not degrade or wash out.

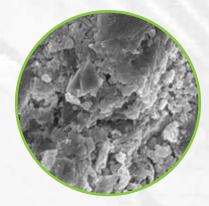
*McCabe JF, et al. Aust Dent J 2011 56 Suppl 1_3-10.



Bioactive materials stimulate the natural remineralization process. In the presence of saliva, they elicit a biological response that forms a layer of apatite and a natural bond between the material and the tooth.*

Pulpdent's research focuses on developing bioactive materials that imitate the physical and chemical properties of teeth, help neutralize conditions that cause dental caries, and maximize the potential for remineralization.

ACTIVA BioACTIVE materials behave favorably in the moist oral environment. They participate in a dynamic system of ionic exchange with saliva and tooth



In the presence of moisture, ACTIVA BioACTIVE has the ability to stimulate formation of hydroxyapatite, the primary mineral component of enamel and dentin.

structure, continuously releasing and recharging calcium, phosphate and fluoride and responding to pH changes in the mouth. When the pH is low, the demineralization process releases calcium and phosphate ions from both the teeth and ACTIVA. When the pH increases, these ions are available to combine with the fluoride ions in our saliva and precipitate onto the teeth in the form of acid-resistant fluorapatite.

The addition of a patented rubberized-resin molecule to the ACTIVA resin matrix absorbs stress and shock and delivers unprecedented toughness and fracture resistance.

ACTIVA BioACTIVE materials are strong, esthetic and durable, and offer an alternative to traditional composites, which are strong and esthetic but are passive and without bioactive potential, and to glass ionomers, that release a significant amount of fluoride but have poor esthetics and undesirable physical properties.

*Hench LL, et al. J Biomed Mater Res 1972;2:117-141. *Jeffereis SR. J Esthet Restor Dent 2014;26(1):14–26.





Natural esthetics - highly polishable

Releases/recharges calcium, phosphate and fluoride

Fracture and wear resistant

BioACTIVE-RESTORATIVE[™] ACTIVA™ is a highly esthetic, bioactive composite that delivers all the advantages of glass ionomers in a strong, resilient, resin matrix that will not chip or crumble. It chemically bonds to teeth, seals against bacterial microleakage, releases more fluoride and is more bioactive than glass ionomers, and is more durable and fracture resistant than composites. 1,2,3,4,5,17,18

Source: University testing^{1,2,3,4,5,17,18} (References: www.pulpdent.com/education-articles)

DENTAL

Advisor

BPA derivatives. The material is dual cure. Source: University testing^{1,7,9,11} (References: www.pulpdent.com/education-articles)

ACTIVA is the first bioactive composite with an ionic resin matrix,

a shock-absorbing resin component and bioactive fillers that mimic

the physical and chemical properties of natural teeth. It releases

and recharges with calcium, phosphate and fluoride ions, 1,7,9,11

delivering long-term benefits and better oral health care for your

patients. ACTIVA contains no Bisphenol A, No Bis-GMA and no



PHYSICAL PROPERTIES

Initial self-cure setting time at 37° C: Light cure setting time: Depth of light cure: Polymerization shrinkage: Fluoride release 1 day: Fluoride release 28 days (cumulative):

Flexural modulus: 2¹/₂-3 minutes 20 seconds Flexural strength: 4 mm 1.7% 230 ppm 940 ppm

Compressive strength: Diametral tensile strength: Water sorption (1 week): Reactive glass filler by weight:

4.3 GPa 102 MPa / 14,790 psi 280 MPa / 40,600 psi 42 MPa / 6090 psi 1.65% 21.8%

-17	VR*	STARTER KIT: 5mL/8gm syringe, ACTIVA-SPENSER™ * Specify Shade: A1, A2, A3 + 20 automix tips		
400	VR1*	SINGLE REFILL: 5mL/8gm syringe + 20 automix tips * Specify Shade: A1, A2, A3, A3.5		
	VR2*	VALUE REFILL: 2 x 5mL/8gm syringe + 40 automix tips * Specify Shade: A1, A2, A3, A3.5		
k	D\$05	ACTIVA SPENSER: Dispenser for 5mL automix syringes		
	A20N1	Automix Tips, clear, with bendable Automix Tips, clear, with bendable 20-gauge metal cannula – pkg of 20 Automix Tips, clear, with bendable		

BIOACTIVE HE H+++++ HE BIOACTIVE BIOACTIVE BIOACTIVE RESTORATIVE

Opaque white shade ideal for children's teeth

Stimulates apatite formation

Fracture and wear resistent

ACTIVA[™] KIDS has all the same physical and bioactive properties as ACTIVA BioACTIVE-RESTORATIVE. It is an opaque white shade ideally suited for pediatric dentistry. ACTIVA KIDS is safe for children, contains no BPA, no Bis-GMA and no BPA derivatives, and it bonds and masks silver diamine fluoride stains. ACTIVA stimulates the natural remineralization process with release and recharge of calcium, phosphate and fluoride. The patented rubberized-resin component is strong, durable and fracture resistant. ACTIVA KIDS delivers all the benefits of glass ionomers and has the esthetics, strength, and durability of composites. The material is dual cure.



ACTIVA™ IS HIGHLY ACCLAIMED BY LEADING PEDIATRIC DENTISTS:

Finally, a great pediatric restorative material that should satisfy all your needs for children's dentistry. I have been using it for years with outstanding results!

- Dr Mark Cannon

The future of dentistry is bioactive materials. Activa is one of the best materials to hit the market in years. The marginal integrity, workability and esthetics are truly impressive. - Dr Josh Wren The new [ACTIVA] products are seemingly unique and unprecedented in the dental restorative materials continuum.

Physical characteristics closely resembling the strengths and wear resistance of RBCs [resin-based composites]. White line margins . . . are conspicuously absent. No complaints of postoperative tooth sensitivity. - Croll TP, Berg JH, Donly KJ Compendium 2015; 36 (1): 60-65.

-15	VKP	STARTER KIT: 5mL/8gm syringe Pedo Shade, ACTIVA-SPENSER + 20 automix tips				
	VK1P	SINGLE REFILL: 5mL/8gm syringe Pedo Shade + 20 automix tips				
19200-18 19200-18	VK2P	VALUE REFILL: 2 x 5mL/8gm syringes Pedo Shade + 40 automix tips				
×	DS05	ACTIVA-SPENSER™: Dispenser for 5mL automix syringes				
	A20N1	Automix Tips, clear, with bendable 20-gauge metal cannula – pkg of 20 Automix Tips, clear, with bendable 20-gauge metal cannula – pkg of 50				



Seals against microleakage

Releases more calcium, phosphate and fluoride than glass ionomers

Self-etching and self-bonding

ACTIVA[™] BioACTIVE-BASE/LINER[™] delivers all the advantages of glass ionomers in a strong, resilient resin matrix that will not chip or crumble. It chemically bonds to teeth, seals against bacterial microleakage, releases more fluoride and is more bioactive than glass ionomers, and is more durable and fracture resistant than composites. Composites, glass ionomers and RMGIs.^{1,2,3,4,5,17,18} ACTIVA is the first bioactive base/liner with an ionic resin matrix, a shock-absorbing resin component and

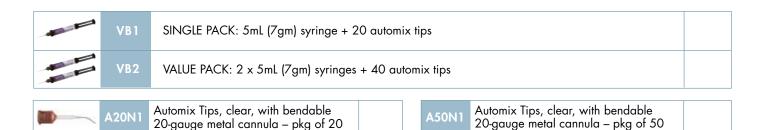
bioactive fillers that mimic the physical and chemical properties of natural teeth. It releases and recharges with calcium, phosphate and fluoride ions,^{1,7,11} delivering long-term benefits and better oral health care for your patients. ACTIVA contains no Bisphenol A, No Bis-GMA and no BPA derivatives. The material is dual cure.

 ${\it Source: University testing 1, 2, 3, 4, 5, 7, 11, 17, 18} (References: www.pulpdent.com/education-articles)$



PHYSICAL PROPERTIES

Initial self-cure setting time at 37° C: Light cure setting time: Depth of light cure: Fluoride release 1 day: Fluoride release 28 days (cumulative): Water sorption (1 week): 2½-3 minutes 20 seconds 4 mm 360 ppm 1,300 ppm 2.30% Flexural modulus:3.7 GPaFlexural strength:86 MPa / 12,470 psiCompressive strength:226 MPa / 32,770 psiDiametral tensile strength:37 MPa / 5365 psiPercentage reactive glass filler by weight:19.3%Percentage filler by weight:45%







No etching or bonding required

Stimulates remineralization at material-tooth interface

More resistant to chipping and fractures than other dental cements

ACTIVA[™] BioACTIVE-CEMENT[™] stimulates mineral apatite formation and the natural remineralization process at the materialtooth interface that knits the restoration and the tooth together, penetrates and fills micro-gaps, reduces sensitivity, guards against secondary caries, and seals margins against microleakage and failure – nature's way.

The cement is dual cure, moisture tolerant, and indicated for indirect restorations including zirconia, CAD/CAM and glass ceramic restorations, all ceramic, resin, metal/PFM, implant dentistry, and preformed stainless steel and zirconia pediatric crowns.

ACTIVA's patented rubberized-resin provides greater resistance to chipping and fracture than any other dental cement. It is durable, insoluble, and will not wash out or crumble. ACTIVA responds to pH cycles with release and recharge of significant amounts of calcium, phosphate and fluoride. These mineral components stimulate formation of a connective layer of mineral apatite that seals and protects teeth.

PHYSICAL PROPERTIES

Working time at room temperature: Light cure setting time: Self-cure anaerobic setting time at 37°C: Percentage reactive glass filler by weight: Fluoride release 1 day: Elucride release 28 days (cumulative):	90 seconds 20 seconds < 3 minutes 47% 360 ppm	Flexural modulus: Flexural strength: Compressive strength: Diametral tensile strength: Water sorption (1 week): Film thickness:	3,7 GPa 88,4 MPa / 12,800 psi 210 MPa / 30,500 psi 37 MPa / 5365 psi 2.30%
Fluoride release 28 days (cumulative):	1,300 ppm	Film thickness:	11 microns

PULPDENT A2

BIOACTIVE-CEMENT"

	VC1A2	SINGLE PACK: 5mL (7gm) syringe +	20 auto	mix tips	A2 Opaque Shade			
	VC2A2	VALUE PACK: 2 x 5mL (7gm) syringes + 40 automix tips A2 Opaque Shade						
	VCIT	SINGLE PACK: 5mL (7gm) syringe +	SINGLE PACK: 5mL (7gm) syringe + 20 automix tips Translucent Shade					
	VC2T VALUE PACK: 2 x 5mL (7gm) syringes + 40 automix tips Translucent Shade							
A2	0 Auto	omix Syringe Tips, pkg. 20	(A20N1	Automix Tips, clear, with bendable 20-gauge metal cannula – pkg of 20			

Automix Syringe Tips, pkg. 50	Ê	A50N1	Automix Tips, clear, with bendable 20-gauge metal cannula – pkg of 50	

APPLIC

CORE BUILD UP

ACTIVA - 53-MONTH RECALL

Photos courtesy of Dr. John Comisi



1A. December 2012Prepared tooth after removal of failed amalgam restoration.



1B. May 2017 53-month recall shows great esthetics, no wear or chipping, and no marginal staining.



2A. ACTIVA is used to build the core on a badly broken down molar.



2B. Tooth is ready to receive a crown.





4A. Shows Class II cavity prep.



4B. Shows tooth restored with ACTIVA BioACTIVE-RESTORATIVE.

REPAIRING CARIES UNDER CROWN MARGIN

Photos courtesy of Dr. Robert Lowe



3A. Shows minimally invasive tooth

preparation.

5A. Caries under crown margin has been removed. 10-second etch and removal of all excess moisture not shown.



3B. After 10-second etch and removal

of excess moisture, shows esthetic

ACTIVA restoration.

5B. Moisture-friendly ACTIVA bonds to tooth, metal and ceramics, and mimics the function of missing tooth structure.

REPAIRING SENSITIVE CERVICAL LESIONS Photos courtesy of Dr. C.H. Pameijer



6A. Shows cervical lesions of lower bicuspids.



6B. After etching, bonding agent was applied for added retention. ACTIVA provides esthetics, bioactivity, and patient comfort.

ACTIVA BIOACTIVE-BASE/LINER

Photos courtesy of Dr. Robert Lowe



7A. Shows prepared tooth after removing deep caries under a failed composite restoration.



7B. Shows ACTIVA BioACTIVE-BASE/ LINER placed and cured. No etching required. Note dentin shade match.

A T I O N S

REPLACEMENT OF FAILED COMPOSITE WITH ACTIVA BIOACTIVE-RESTORATIVE

Photos courtesy of Dr. Mark Cannon



8A. Shows 10-second etch. After rinsing, all excess moisture is removed.



8B. ACTIVA BioACTIVE-RESTORATIVE is placed using mixing tip with bendable metal cannula.



8C. Explorer is used to create anatomy.



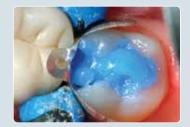
8D. Shows finished and polished restoration.

REPLACEMENT OF FAILED COMPOSITE WITH ACTIVA BIOACTIVE-BASE/LINER

9A. Prepared tooth.



9B. Shows ACTIVA BioACTIVE-BASE/ LINER after light curing.

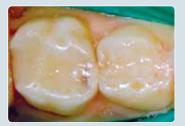


9C. Etch with Etch-Rite phosphoric acid gel.



9D. Finish restoration using composite or ACTIVA BioACTIVE-RESTORATIVE.

ACTIVA KIDS: EASY TO PLACE - OPAQUE WHITE SHADE Photos courtesy of Dr. Mark Cannon



10A. Pre-op shows secondary caries on restored molars.



10B. Prepared teeth.



10C. Teeth are etched for 10 seconds.



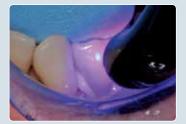
10D. Shows teeth restored with ACTIVA KIDS.

ACTIVA BIOACTIVE-CEMENT

Photos courtesy of Dr. G. Franklin Shull



11A. Tooth is prepared to receive a crown. Note retentive crown prep.



11B. Crown filled with ACTIVA BioACTIVE-CEMENT is seated and tack cured 1-2 seconds.



11C. Excess cement is easily removed.



11D. Shows finished case.

BIOACTIVE

APATITE FORMATION

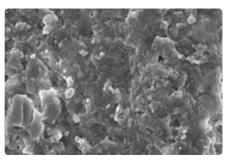
Apatite formation is the essential requirement of bioactive materials. ACTIVA stimulates mineral apatite formation and the natural remineralization process that knits the restoration and the tooth together and seals margins against microleakage, secondary caries, and failure. ACTIVA responds to pH cycles and plays an active role in maintaining oral health with release and recharge of significant

amounts of calcium, phosphate and fluoride. These mineral components stimulate formation of a protective/connective apatite layer and a natural bonded-seal at the material-tooth interface.

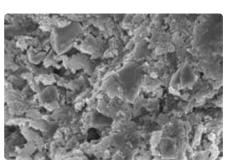
SEM Analysis of ACTIVA BioACTIVE-CEMENT after 21 Days in Saline

Compared to the no saline control, scanning electron microscope (SEM) imaging and energy-dispersive X-ray spectroscopy (EDS) after 21 days in saline shows significant increase in calcium and phosphorus ion concentrations, and decrease in carbon and silica ions, indicating that mineral apatite deposits are forming on the surface.

Source: University testing³⁵ (References: www.pulpdent.com/ education-articles)



ACTIVA BioACTIVE-CEMENT Control, no saline 3000x

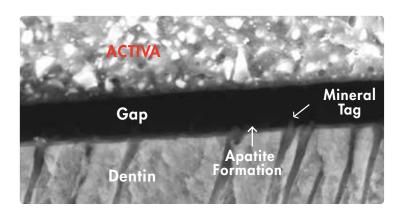


ACTIVA BioACTIVE-CEMENT 21 days in saline 3000x

SEM and EDS Analysis Verifies Bioactive Component

Scanning electron microscope (SEM) imaging and energydispersive X-ray spectroscopy (EDS) analysis of dentin discs treated with ACTIVA BioACTIVE-CEMENT and placed in phosphate buffered solution verifies the bioactive component of the material and demonstrates excellent dentinal tubule penetration. A layer of apatite formed and fused the dentin to ACTIVA. (The gap was produced when the specimen was fractured to make the SEM.)

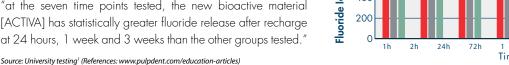
Source: University testing 41 (References: www.pulpdent.com/education-articles)



FLUORIDE RELEASE AND RECHARGE

ACTIVA releases and recharges with fluoride, providing longterm patient benefits for improved oral health care.

University testing using fluoride ion concentration gradient diffusion methodology shows the pattern of release and recharge of ACTIVA, Ketac Nano and Triage. The study concludes that "at the seven time points tested, the new bioactive material [ACTIVA] has statistically greater fluoride release after recharge at 24 hours, 1 week and 3 weeks than the other groups tested."



Release and Recharge of Fluoride Ions 1200 Fluoride Ions Released (ppm) 1000 ACTIVA 800 (Pulpdent) 600 Ketac Nano (3M ESPE) 400 Triage (GC) wk 2 wk 3 wk Time

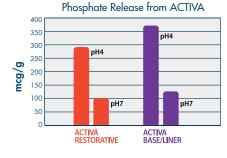
PULPDENT Corporation / 800-343-4342 / 617-926-6666 / www.pulpdent.com

P R O P E R T I E S

PHOSPHATE RELEASE

ACTIVA is a "smart" material that responds to pH cycles in the mouth. During low pH demineralization cycles, ACTIVA releases more phosphate. The phosphate ions can reside in the pellicle layer or saliva and are available to interact with calcium and fluoride ions during higher pH cycles.

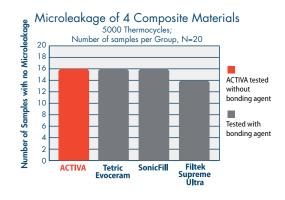
Source: Pulpdent testing^o (References: www.pulpdent.com/education-articles)



MICROLEAKAGE

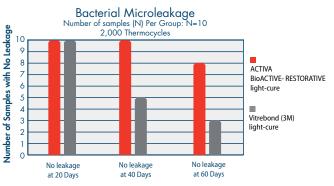
ACTIVA BioACTIVE-RESTORATIVE, when tested in vitro for microleakage *without a bonding agent*, compares favorably with leading composites tested *with a bonding agent* (Scotchbond Universal Adhesive, 3M ESPE).

Source: University testing¹⁶ (References: www.pulpdent.com/education-articles)



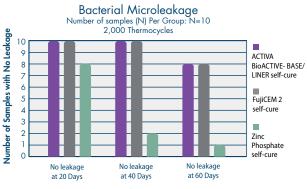
BACTERIAL MICROLEAKAGE

ACTIVA BioACTIVE-RESTORATIVE outperforms a leading RMGI when tested for bacterial microleakage in vitro after 2,000 thermocycles.



Source: University testing.³ (References: www.pulpdent.com/education-articles)

ACTIVA BioACTIVE-BASE/LINER compares favorably with a leading resin modified glass ionomer material when tested for bacterial microleakage in vitro after 2,000 thermocycles.





PHYSICAL

STRENGTH

Compressive and Diametral Tensile Strength of ACTIVA BioACTIVE-RESTORATIVE is comparable to composites and far superior to glass ionomers and RMGIs.

Filtek = Composite; ACTIVA = Bioactive Restorative; Ketac Nano = RMGI; Fuji IX = Glass lonomer Source: University testing¹⁷ (References: www.pulpdent.com/ education-articles)

Compressive and Flexural Strength of ACTIVA BioACTIVE-BASE/LINER is much greater than resin-modified base/liners and RMGIs.

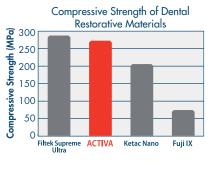
ACTIVA = Bioactive Base/Liner; Fuji Lining = RMGI; Vitrebond = RMGI; TheraCal = Resin-Modified Calcium Silicate

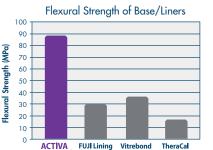
Source: University testing¹⁸ (References: www.pulpdent.com/ education-articles)

Shear bond strength of ACTIVA BioACTIVE-CEMENT compares favorably with leading cements and is superior to RMGI and calcium aluminate-glass ionomer cements tested.

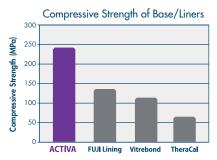
ACTIVA = Bioactive Cement; RelyX = Self-adhesive Cement; FujiCEM 2 = RMGI; Ceramir = Calcium Aluminate-GI Source: University testing¹⁸ (References: www.pulpdent.com/

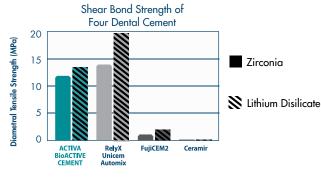
education-articles)





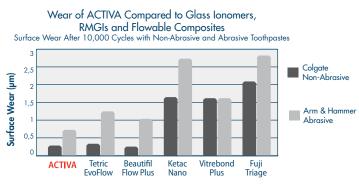
Diametral Tensile Strength of Dental Restorative Materials





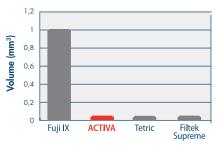
WEAR

Volume wear of ACTIVA BioACTIVE-RESTORATIVE is comparable to composites and far less than glass ionomer. When evaluated for surface wear resistance, ACTIVA BioACTIVE-RESTORATIVE performed better than all other materials tested with



ACTIVA = Bioactive Restorative; Tetric EvoFlow and Beautifil Flow Plus = Flowable Composite; Ketac Nano and Vitrebond Plus = RMGI; Fuji Triage = Glass Ionomer Source: University testing²⁷ (References: www.pulpdent.com/education-articles) abrasive toothpaste and was comparable to flowable composites with non-abrasive toothpaste.

Volume Wear of Four Restorative Materials



Fuji IX = Glass lonomer; ACTIVA = Bioactive Restorative; Tetric = Composite; Filtek Supreme = Composite Source: University testing²⁸ (References: www.pulpdent.com/ education-articles)

PROPERTIES

TOUGHNESS, FATIGUE LIMIT, DEFLECTION AT BREAK

ACTIVA's rubberized resin component provides unparalleled toughness and resilience. Toughness, measured by deflection at break using a 3-point bend test, is the ability of a strong, hard material to absorb stress, dissipate forces and resist fracture when a load is applied. Fatigue limit is determined by the incremental load required to cause fracture within a defined number of cycles. Deflection at Break of ACTIVA is 2-3 times greater than composites and 5-10 times greater than GIs and RMGIs.

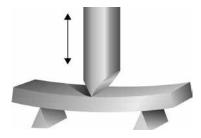


Fig 1: Illustration shows 3-point bend test

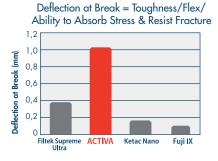


Fig 2:Filtek = Composite; ACTIVA = Bioactive Restorative; Ketac Nano = RMGI; Fuji IX = GI Source: University testing^{5,17} (References: www.pulpdent.com/ education-articles)

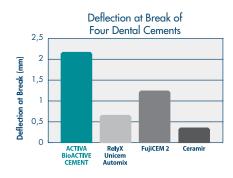
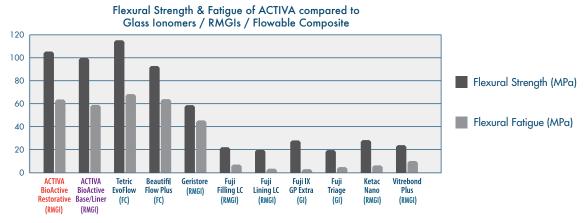


Fig 3:ACTIVA = Bioactive Cement; RelyX Unicem Automix = Self-adhesive Cement; FujiCEM 2 = RMGI; Ceramir = Calcium Aluminate-GI

Source: University testing³⁴ (References: www.pulpdent.com/ education-articles

FLEXURAL STRENGTH AND FLEXURAL FATIGUE

Flexural strength and flexural fatigue measure the amount of stress a material can withstand, measured by deflection at break, and its endurance, measured by the number of repeated cycles before failure. ACTIVA meets the requirement of ISO 4049 for occlusal restorations and demonstrates flexural strength and flexural fatigue comparable to flowable composites (FC) and significantly greater than conventional RMGIs and GIs tested.



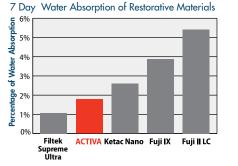
Source: University testing²⁹ (References: www.pulpdent.com/education-articles)

WATER ABSORPTION

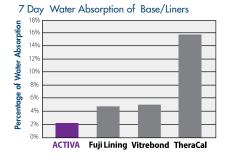
A controlled and relatively low level of water absorption is advantageous for bioactive materials, which require water to unlock their bioactive properties and potential for ionic exchange. Excessive water absorption can compromise the physical properties of restorative and base/liner materials over time. Water absorption of ACTIVA BioACTIVE-RESTORATIVE is significantly less than glass ionomers and RMGIs, and is designed to be slightly higher than composites, which are hydrophobic and not bioactive.

Water absorption of ACTIVA BioACTIVE-BASE/LINER is far less than RMGIs. Water absorption of TheraCal is 7 times greater than ACTIVA.

Water absorption of ACTIVA BioACTIVE-CEMENT compares with the leading selfadhesive cement and is far less than the RMGI and calcium aluminate-glass ionomer cements tested.

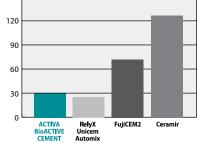


ACTIVA = Bioactive Restorative; Filtek = Composite; Ketac Nano = RMGI, Fuji IX = GI; Fuji II LC = RMGI Source: Pulpdent testing⁸ (References: www.pulpdent.com/ education-articles)



ACTIVA = BioACTIVE Base/Liner; Fuji Lining & Vitrebond = RMGI; TheraCal = Resin-Modified Calcium Silicate Source: Pulpdent testing²⁰ (References: www.pulpdent. com/education-articles)



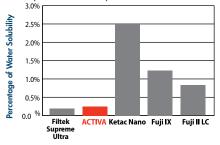


ACTIVA = Bioactive Cement; RelyX Unicem Automix = SelFadhesive Cement; FujiCEM 2 = RMGI; Ceramir = Calcium Aluminate-GI Source: University testing³⁷ (References: www.pulpdent. com/education-articles)

WATER SOLUBILITY

Low water solubility is important for ensuring the durability and longevity of a dental material. The patented resins and reactive glass fillers in ACTIVA products are balanced to deliver both bioactivity, which requires water, and durability. This unique combination of attributes, when combined with esthetics, sets ACTIVA apart from all other restorative materials. ACTIVA has remarkably low water solubility that compares favorably with leading composites and is far lower than glass ionomers and RMGIs.



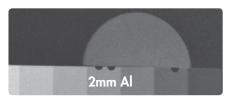


ACTIVA = Bioactive Restorative; Filtek = Composite; Ketac Nano = RMGI, Fuji IX = GI; Fuji II LC = RMGI Source: Pulpdent testing²⁰ (References: www.pulpdent.com/ education-articles)

RADIOPACITY

The radiopacity of ACTIVA is equivalent to 1.5mm of aluminum.

Filtek, Ketac, Fuji, Vitrebond, TheraCal, RelyX, Ceramir, FujiCEM, Tetric, EvoFlow, EvoCeram, Beautifil, Geristore and SonicFill are not trademarks of Pulpdent Corporation.





HEROIC DENTISTRY

SALLY: By Marc A. Johnson DDS

Compassionate Smile Rescue with ACTIVA BioACTIVE-RESTORATIVE



Pre-op photo



Shows idealized wax-up and refractory putty matrix



Shows teeth after caries removal



Same day finished case immediately post-op

Sally suffered from years of neglect, trauma, and abuse. Her teeth were a disaster, but her life was turning around, and she wanted to save her smile and regain her self-confidence. (Fig. 1)

Traditional treatment options would be full mouth reconstruction (FMR) or full mouth extractions and dentures. FMR would require numerous root canals, build-ups, and porcelain restorations, but with limited finances, this was not possible. I knew Sally during better times, and I wanted to do the right thing for her, so I ruled out extractions. I decided on a direct restorative technique using a laboratory fabricated matrix and ACTIVA BioACTIVE-RESTORATIVE. The material has the flow and adaptability required for the technique along with mineral content and bioactivity to help preserve tooth structure.

Sally started soft tissue therapy while I worked with my lab to create an idealized diagnostic wax-up and refractory putty matrix. (Fig. 2) At her pre-op hygiene visit, she presented with healthy tissue, and upon seeing the smile design wax up, she was quite emotional.

Using 3.5x loupes, caries detecting solution, and slow speed excavation, I removed massive amounts of decay throughout the arch. (Fig. 3) There were pulpal exposures in teeth # 6, 10 and 11, and I immediately performed same-day root canals.

After etching and bonding, I loaded the putty matrix with ACTIVA BioACTIVE-RESTORATIVE A1 shade, syringed some additional material in and around the prepared teeth, and seated the matrix. To mitigate polymerization stresses, I allowed it to self-cure for a couple of minutes before light curing.

After removing the matrix, I easily removed excess with a scaler. Using serrated polishing strips, I separated each of the teeth proximally, and I made occlusal adjustments to achieve perfect contacts and anterior disclusion in all excursions. The case was completed in one long visit at a comfortable pace. (Fig. 4)

From a time/cost/value perspective, this technique offers remarkable efficiencies and cost savings. Smile design cases can be completed with guides fabricated with minimal reduction and delivered with a smile matrix from the lab using ACTIVA BioACTIVE-RESTORATIVE.

Dr. Marc Johnson is cosmetic and restorative dentist in the destination town of Saratoga Springs, NY.

EMBRACE[™]WETBOND[™] PIT & FISSURE SEALANT

MOISTURE-FRIENDLY PIT AND FISSURE SEALANT



Margin-free – No chipping – No staining

Tooth integrating – Seals against microleakage

Embrace[™] is remarkable for its ability to bond to the moist tooth, its sealing ability, and its adaptation to tooth structure. The margins are undetectable, and the long-term success has been reported in the literature. Independent research shows that Embrace compares

favorably with glass ionomers, and is superior to other resin-based sealants, when evaluated for remineralization capacity.



CLINICAL PERFORMANCE

Embrace WetBond Pit & Fissure Sealant Long-term Report

Strassler HE, O'Donnell JP. A unique moisture-tolerant, resin-based pit and fissure sealant: clinical technique and research result. Inside dentistry 2008;4(9):108-110.

This study assessed the clinical performance of Embrace WetBond Pit & Fissure Sealant in a pediatric dental practice. A total of 334 teeth sealed with Embrace WetBond Pit & Fissure Sealant were evaluated over a period of four to six years. After four to six years, 299 of 334 sealants were in excellent condition. Of the remaining teeth, 32 required resealing with no evidence of occlusal caries, and only three teeth developed occlusal caries. The sealed teeth were 99% caries free.

PHYSICAL PROPERTIES

Compressive Strength: Diametral Tensile Strength: Percent Solubility: 34,800 psi / 240 MPa 6,300 psi / 43.4 MPa 0.06% Film Thickness: Percent filled (EMS, EMS3, EMSB): Percent filled, Low-Fill Formula (EMSWLF):

12 microns 36.6% 7.9%

MOISTURE FRIENDLY IONIC RESIN

Embrace WetBond is a bioactive ionic resin designed to take advantage of the moisture that is always present in the mouth. Embrace is moisture friendly, contains a small amount of water, and has attributes that mimic nature and respond to changes in the oral environment.



A drop of water is placed next to uncured Embrace resin.

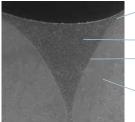


Embrace mixes with the water.

EXCEPTIONAL MARGINAL ADAPTATION

Embrace resins form an intimate association with the moist tooth. They are tooth integrating, creating a margin-free interface between the resin and the tooth that eliminates microleakage.

EMBRACE Sealant

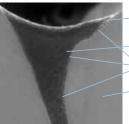


Leading Competitor

 Perfect marginal integrity
EMBRACE Sealant
Perfect adaption to tooth

Enamel

SEM shows Embrace Pit & Fissure Sealant without bonding agent. Note the smooth margin and the extraordinary adaptation of the sealant to the tooth.



 Poor marginal integrity
Traditional Sealant
Gap
Enamel SEM shows leading competitor's traditional pit and fissure sealant without bonding agent. Note the large gap between the sealant and the tooth.



Clean teeth and apply Etch-Rite™ for 15 seconds.



Rinse and lightly dry. Leave teeth slightly moist, and apply Embrace Pit & Fissure Sealant to the moist teeth.



Light cure. Embrace cures with all lights.



After curing, the margins are undetectable with an explorer.

Photography courtesy of Dr. Christopher Ramsey

	EMS	4 x 1.2mL (1.9 gm) syringes sealant + 20 tips, natural shade	STORE -	EMSW	4 x 1.2mL (1.9 gm) syringes sealant + 20, off-white shade	
	EMS3	3mL (4.72 gm) syringe, natural shade		EMS3W	3mL (4.72 gm) syringe, off-white shade	
-16-1	EMSB	20 x 1.2mL syringes, natural shade + 100 tips	- national and a second	EMSWB	20 x 1.2mL syringes, off-white shade + 100 tips	
	23R20	Red, 23 ga x 1/2″, Tips, pkg. 20	attender an	EMSWLF	4 x 1.2mL syringes Low-Fill sealant, off-white shade + 20 tips	
	22K20	Black, 22 ga x 1/2″, Tips, pkg. 20		22K100	Black, 22 ga x 1/2″, Tips, pkg. 100	

CXP = CALCIUM, XYLITOL AND PHOSPHATE

EMBRACE[™]VARNISH

5% SODIUM FLUORIDE - 22.6 mg FLUORIDE/mL



Bioavailable fluoride, calcium and phosphate with Xylitol Fills superficial, non-carious enamel lesions (white spots) Desensitizing effect

Not only does Embrace Varnish[™] release more fluoride in 4 hours, it also releases bioavailable calcium and phosphate ions, the essential building blocks of teeth. The xylitol coating prevents the calcium and phosphate salts from reacting until they come in contact with saliva. Saliva dissolves the xylitol and releases the calcium and phosphate ions, which react continuously in saliva with the fluoride ions to form protective fluorapatite on the teeth. By incorporating xylitol-coated calcium and phosphate in a permeable resin matrix that does not separate, Pulpdent has developed a sustained time-release varnish with uniform dosage that delivers 10 times more fluoride than the leading varnish brand. The pleasing taste ensures patient compliance.



Yapp R, Powers JM. Fluoride Ion Release from Several Fluoride Varnishes. Dent Advis Res Rpt 45:1, March 2012.

TOTAL CONTRACT	FV50	Box of 50 x 0.4mL (0.42 gm) packets	
	FV200	Box of 200 x 0.4mL packets	
-	FVT	Tube, 12mL (12.6 gm)	
	FVX100	100 x 0.4mL (no brush)	

26



ORTHO-COATTM

ORTHODONTIC SEALANT



Reduces or eliminates decalcification

Fluoride releasing

Prevents microleakage

Orthodontic brackets trap food and plaque. Since patients cannot clean under and around the brackets, carious lesions can form. The results can be disastrous. Ortho-coat coats the brackets and the teeth, preventing decalcification, staining and discoloration under the brackets.





Shows orthodontic bracket bonded to a tooth and coated with Ortho-Coat after immersion in saline solution for two months.



Shows the tooth stained with 0.25% methylene blue after two-month immersion in saline solution.



Shows stained tooth after removal of coated bracket. Note lack of dye penetration under bracket. The white area shows the outline of the coating, not the bracket, which has a smaller footprint.



Shows underside of the stained bracket pad. Despite intense staining of the tooth and Ortho-Coat with methylene blue, there is no dye penetration or leakage beneath the bracket.

27



2 x 5mL (6.25 gm) syringes + 20 applicator tips

20 Red, 23 ga x 1/2″, Prebent Tips, pkg. 20

PROVISIONAL VENEER, CROWN & BRIDGE RESIN - DUAL CURE

PRODUC1

201







Dual Cure – Snap Set Impact and fracture resistant Grinds and powders without softening

Add-on and Glaze included



Pulpdent has inserted a synthetic rubber molecule into a diurethane dimethacrylate monomer and synthesized a proprietary rubberized-resin that is tougher, more impact and fracture resistant, and provides greater dimensional stability and tighter fitting provisional restorations, than acrylics and bis-acrylics. Breakage and debondings are minimized or eliminated.

The material grinds and powders producing crisp and accurate margins that do not soften or distort. Finishing instruments do not gum up or clog. Tuff-Temp Plus is dual cure, and the light cure option produces a full strength restoration on demand and is ideally suited for use with a clear vinyl polysiloxane template. Tuff-Temp Plus is fluorescent under black lights.

ADD-ON AND GLAZE

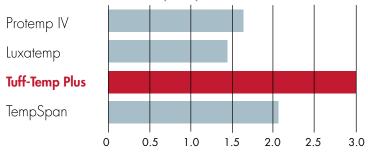
This shade-matching flowable Add-on is light cure and is formulated from the same proprietary rubberized-resin chemistry. It is ideal for making alterations and for smile design.

The light cure glaze has the same proprietary rubberized-resin chemistry that provides enhanced esthetics and patient satisfaction during temporization.

FLEXURAL STRENGTH

Tuff-Temp Plus exhibits very high flexural strength without brittleness. Its deflection at break, the key indicator of toughness, is 50% to 100% greater than bis-acrylics.

Deflection at Break (mm)



Protemp, Luxatemp and ProSpan are not trademarks Pulpdent.

PHYSICAL PROPERTIES

Working time: Light cure setting time: Initial self-cure setting time: Final self-cure setting time: Flexural strength: Compressive strength: Deflection at break: Vickers Hardness: 45 seconds 20 seconds 2 minutes from beginning of mix 4:45 minutes from beginning of mix 75 (+/- 5) MPa 200 (+/- 20) MPa 2.9 mm (+/- 0.3 mm) 514 MPa

	TTP*	50mL (76 gm) cartridge, 1.2mL Add-on, and 3mL Glaze + 20 Automix tips + 6 tips * Specify shade: A1, A2, A3, A3.5, B	
·	TTP 5 *	5mL (7.6 gm) and 3mL Glaze + 8 Automix tips * Specify shade: A1, A2, A3, A3.5, B	
	TTG	Bottle of 6mL glaze	
	FSB20	20 Automix tips for 50mL cartridge	
	A 2 0	20 Automix tips for 5mL syringe	
T	D S 5 0	Dispenser for 50mL, 1:1 Automix cartridge	



Fill matrix 3/4 full with Tuff-Temp Plus and seat in the mouth.



Removal time is 2 minutes from the beginning of the mix (approximately 75 seconds after insertion in the mouth).



Check the provisional restoration for marginal integrity.



The provisional is trimmed and polished but not yet glazed. Note the perfect margins.



The 12-unit provisional is glazed and cemented to place. The margins and esthetics are exceptional



Note the excellent tissue condition upon removal of the provisional four weeks later.

Photography courtesy of Dr. Christopher Ramsey

SPEE-DEE[™] BUILD-UP

MULTI-PURPOSE CORE & BUILD-UP RESIN



Dual Cure - Fluoride Releasing - Radiopaque

Moisture Tolerant

Cuts Like Dentin

One-step Post and Core Build-up

Spee-Dee Build-Up is specially formulated for one-step post cementation and core build up, ensuring a homogenous, onepiece internal structure. Nothing simulates tooth structure like Spee-Dee Build-Up. This material really does cut like dentin. Rotary instruments transition smoothly from dentin to Spee-Dee without ditching or gouging, cut smoothly and accurately, and do not gum up or chatter. The unique moisture tolerant chemistry has selfadhesive and self-etching properties. Etching dentin and the use of bonding agents are optional when there is retention form in the preparation. Automix cartridge with angled tips for controlled dispensing.

CLINICAL INDICATIONS

- Post and core build-up after endo
- Direct bonded core without a post
- Vital tooth build-up for crown prep
- Re-cementing loose post and core
- Base/liner under restorations

PHYSICAL PROPERTIES

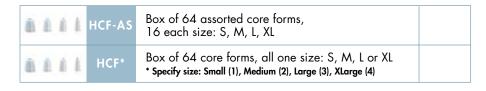
Compressive strength: Flexural strength: Self-cure intra-oral setting time at 37 ° C: Light cure setting time: Depth of cure: 40,625 psi / 280 MPa 14,065 psi / 97 MPa 3:10 minutes 20 seconds 4 mm

	SBU50	Automix cartridge of 50mL (83 gm) + 30 Automix tips	
	SBU	Automix cartridge of 25mL (41.5 gm) + 20 Automix tips	
	FD20	20 Automix tips	
1-	D\$24	Dispenser for 25mL, 1:1 Automix cartridge	
\square	D\$50	Dispenser for 50mL, 1:1 Automix cartridge	



CORE FORMS

Transparent, clear polyethylene for light cure. Will not stick to core material. Tab on top and tapered sides for easy pick up and retrieval, and reference ring for accurate trimming.





After endodontic treatment, a molar is prepared with two post holes.



Pulpdent Etch-Rite is applied to the post holes and the preparation for 15 seconds (optional step).



After rinsing thoroughly, removing excess moisture and leaving the tooth slightly moist, Spee-Dee Build-Up is dispensed into the post holes and around the preparation.



The posts are inserted with a twisting, up and down motion to ensure uniform coverage of Spee-Dee Build-Up, and then light cured for 20 seconds.



Spee-Dee Build-Up is now applied around the posts to the occlusal level.



The post and core preparation is trimmed and finished and ready for an impression or digital scan.



LIME-LITE

LIGHT CURE CAVITY LINER, CONTAINS HYDROXYAPATITE

Stimulates secondary dentin formation

Releases favorable calcium, hydroxyl, phosphate and fluoride ions Chemically bonds to adhesives and composites

Specially formulated for use with today's adhesive dentistry, Lime-Lite contains hydroxyapatite in a urethane dimethacrylate resin. It releases calcium, hydroxyl, phosphate and fluoride ions, which are known to be beneficial to tooth structure and to stimulate secondary dentin formation.





light

CURE

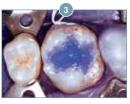
Photos courtesy of Dr. C. H. Pameijer



Place Lime-Lite in the cavity prep.



Light cure Lime-Lite 20 seconds.



Etch the cavity prep with Etch-Rite 38% phosphoric acid.



Apply DenTASTIC UNO to the moist dentin surface for light cure, or UNO + DUO for dual cure procedures.



Final restoration incrementally layered with composite.

LIME	4 x 1.2mL (1.8 gm) syringes + 8 pre-bent tips	
LIME-3	3mL syringe	
20L20	Pink, 20 ga x 1/2″, Prebent Tips, pkg. 20	

LIGHT CURE ADHESIVE WITH DUAL CURE OPTION

Single component 5th generation

Exceptional bonding strength

Wet bonding technique

DenTASTIC^m UNO^m is an effective, single-component light cure adhesive for bonding to dentin, enamel, porcelain, metal, composite and other resins.

DenTASTIC[™] DUO[™] is the dual cure catalyst for DenTASTIC UNO. Use UNO plus DUO for indirect restorations, core build ups, or whenever self-cure or dual cure capability is indicated.

Use UNO for all direct bonding light cure applications.

dental Advisor

***4



PHYSICAL PROPERTIES: SHEAR BOND STRENGTH

DenTASTIC UNO One-Step Prime & Bond 2.1 **34.2 MPa** 32.6 MPa 31.8 MPa

technique.

Testing performed at Department of Restorative Dentistry, The University of Texas Health Science Center at San Antonio. One-Step and Prime & Bond 2.1 are not trademarks of Pulpdent Corporation.

for self-cure or dual cure

applications.

UNO	2 x 6mL UNO, 5mL Etch-Rite, 20 applicator tips, 50 brush tips		UNO-R	6mL bottle UNO	
UNDO	6mL UNO, 3mL DUO, 5mL Etch-Rite, 20 applicator tips, 50 brush tips	2150	DUO	3mL bottle DUO, dual cure catalyst for UNO	

PRODUCT

SHOPPER 2007

EMBRACE[™]WETBOND[™] **RESIN CEMENT**



DURABLE MARGINAL SEAL

Eliminates microleakage

Releases phosphate and fluoride ions

Self adhesive - Moisture tolerant

Embrace Resin Cement is the first self-adhesive resin cement that bonds to the slightly moist tooth. Embrace is a hydrophilic resin, not a glass ionomer, and is formulated to be fully compatible with the moist oral environment. Embrace forms chemical bonds to dentin and enamel, precious and non-precious metals, ceramics, composites, and fiber posts. Bonding agents are not required;

however, they can be used if desired. It is not necessary to etch dentin, but etching uncut enamel surfaces is indicated. Retention value of Embrace to zirconia copings is 29.32 kg, which indicates that Embrace performs equal to or better than the leading cement brands. Embrace resin cement is dual cure, fluoride releasing, and radiopaque.

Photos courtesy of Dr. Christopher Ramsey



Prepare teeth to receive restorations. Leave teeth slightly moist. No etching, silane or bonding agents are required.



MBRACE

RESIN CEMENT

VISCOSITY

Simply dispense cement directly into the restoration from the automix syringe.



Seat the restoration, light cure 1-2 seconds and remove excess cement.



The final result.

PHYSICAL PROPERTIES

Viscosity: Compressive Strength: Diametral tensile strength:

Medium and Low 44,500 psi / 307 MPa 7,600 psi / 52 MPa

Retention value (non-threaded titanium post): Percent Solubility: Film thickness:

32 kg 0.06% 12 microns

.	EMCAR	Low Viscosity Automix Syringe Kit: 7 gm cement + 20 automix tips	EMCAR2	Low Viscosity Automix Syringe Refill: 3.5 gm cement + 10 automix tips
	EMCMR	Medium Viscosity Automix Syringe Refill: 7 gm cement + 20 automix tips	EMCMR2	Medium Viscosity Automix Syringe Refill: 3.5 gm cement + 10 automix tips
	A 2 0	Automix Syringe Tips, pkg. 20		



EMBRACE[™]WETBOND[™] SEAL-N-SHINE[™]

PENETRATING FINISH AND POLISHING RESIN

Eliminates microleakage

Cures clear - No yellow tint

Durable, long-lasting, protective finish

Embrace Seal-n-Shine[™] is a clear resin that penetrates and seals margins and the microporosities and cracks in composite restorations. It provides a smooth finish, eliminates the final polishing steps, bonds in a slightly moist field, and does not alter the anatomy or occlusion of the tooth, or discolor the restoration. It has been observed clinically and by scanning electron microscopy (SEM) that Embrace forms a close association with tooth structure

and integrates with the tooth in a way that is unique for a dental resin, resulting in a positive seal and a smooth margin that is better adapted to the anatomy of the tooth.

Photos 1A & B courtesy of Dr. C.H. Pameijer; photos 2A & B courtesy of Dr. Shradha Sharma and Dr. Gerard Kugel

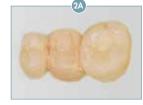


Etched enamel and composite restoration.



Search Sinne 13

Seal-n-Shine applied to etched enamel and composite and light cured.



Provisional restoration before Seal-n-Shine.





Provisional restoration after application of Seal-n-Shine.



6mL bottle, brush handle + 100 brush tips

2 x 1.2mL syringes + 40 flocked tips

SPARKLE DIAMOND POLISHING PASTE

Sparkle produces a glaze-like high luster finish on porcelain, gold, composite and metal. It does not splatter and washes off easily.





LIGHT

CURE

$ETCH-RITE^{TM}$

38% Phosphoric Acid - Washes off easily

Millions of applications each year

Etch-Rite[™] is a soft, thixotropic blue gel with handling characteristics most preferred by clinicians. It dispenses through small gauge needles, stays where placed, washes off with ease, and provides the optimal etch pattern on dentin and enamel surfaces to ensure

stch-Rite

mechanical retention of bonding agents, restorative resins and resin cements. Available in a wide variety of packaging options.



ETCH	4 x 1.2mL (1.5 gm) syringes + 8 tips		ET-24	24 x 1.2mL syringes gel	
ET50	2 x 25mL (64 gm) syringes, +5 x 3mL empty syringes + 50 tips	-	ET-50R	2 x 25mL syringes gel	
ET-6	6mL (7.7 gm) syringe gel		ET-12	12mL (15.4 gm) syringe gel	
25B20	Light Blue, 25 ga x 1/2″, pre-bent Tips, pkg. 20		ET-TWIN	2 x 3mL syringes gel + 25 tips	
25B50	Light Blue, 25 ga x 1/2″, pre-bent Tips, pkg. 50		25B100	Light Blue, 25 ga x 1/2", pre-bent Tips, pkg. 100	

$ETCH-ROYALE^{TM}$

37% Phosphoric Acid – Creamier consistency – Darker blue color

For clinicians who prefer a creamier gel that readily settles into dentin and enamel, but does not run, Etch-Royale[™] is the perfect choice. The darker blue color is easier to see in thin applications.

Etch-Royale has all the same features as Etch-Rite, but the consistency is slightly creamier than its famous sister product.





PORCELAIN ETCH GEL

SUPERIOR CERAMIC SURFACE PREPARATION

9.6% Hydrofluoric Acid

Does not stain ceramics or composites

Superior quality



Proper surface preparation enhances bonding values of resins and resin cements to porcelain. These SEMs taken before and after etching demonstrate the effectiveness of a one-minute application of Pulpdent Porcelain Etch Gel on a glazed porcelain surface.



SEM* shows glazed porcelain surface BEFORE treatment.

(Magnification 500X)

*SEM: Scanning Electron Microscopy



SEM* shows glazed porcelain surface AFTER 1-minute treatment with Pulpdent Porcelain Etch Gel. Note the microscopic tags in the porcelain surface.



This fractured PFM crown can be repaired intra-orally. Always etch porcelain surfaces of crowns, inlays and veneers prior to bonding.



Apply Pulpdent Porcelain Etch Gel to ceramic surface. The exposed metal surface should be abraded with a fine diamond. Note placement of Kool-Dam (blue) to protect soft tissue



Photos courtesy of Dr. Howard Glazer

PORCELAIN PREP KIT

ECONOMICAL KIT FOR PREPARING PORCELAIN SURFACES FOR BONDING

PORCELAIN ETCH GEL

9.6% Hydrofluoric acid gel for etching porcelain surfaces prior to bonding

SILANE

Increases the bond strength of composites and resin cements to porcelain

DRY-RITE[™]

Promotes chemical drying of etched porcelain surfaces prior to applying Silane

KOOL-DAM[™] Heatless liquid dam and block out resir





38

Kit: 1.2mL syringe each: Porcelain Etch Gel, Kool-Dam, Silane and Drying Agent + 12 tips

SILANE

FOR BONDING COMPOSITES AND RESIN CEMENT TO PORCELAIN

Coupling agent - Strengthens bond of resin to ceramic

Creates organic-inorganic bridges

This single component material increases the bond strength of organic resins, such as composites and resin cements, to porcelain. Apply silane to the etched and dried porcelain surface.

SIL	4 x 1.2mL (0.95 gm) syringes Silane + 8 applicator tips	
SIL-3	3mL (2.38 gm) syringe Silane	
22DR15	Dark Blue, 22 ga x 1/2", Prebent Red Dropper Tips, pkg. 20	

EMBRACE[™] RESTORATION & PFM REPAIR KIT

MULTI-FUNCTIONAL REPAIR KIT

EMBRACE[™] FIRST-COAT[™]

Jnique, one-step primer bonds chemically and mechanically to prepared ceramic and metal. Contains no solvents

EMBRACE[™] SEAL-N-SHINE[™]

Polishes, penetrates and seals leaving a glaze-like finish on restored surfaces

EMBRACE[™] ESTHETIC OPAQUER

Promotes chemical drying of etched porcelain surfaces prior to applying Silane

KOOL-DAM[™]

Heatless liquid dam protects soft tissue, teeth, and restorative surfaces. Remains flexible after curing

PORCELAIN ETCH GEL

Buffered 9.6% hydrofluoric acid gel

A complete repair system that primes, protects, opaques, polishes and seals. First-Coat is a resin-based primer for metal and ceramic.

- Compatible with all restorative composites.
- No solvents, no modifiers, no mixing, no mess.
- Cures with all curing lights.



Photos courtesy of Dr. Robert A. Lowe



Fractured porcelain.



Apply Kool-Dam to protect gingiva and adjacent porcelain. Microabrade exposed metal.



Apply Porcelain Etch Gel to the porcelain for one minute or according to the instruction for the ceramic substrate.

Apply Embrace First-Coat

Apply Embrace First-Coa to etched porcelain and abraded metal surface, thin lightly with air, and light cure.



Apply Embrace Esthetic Opaquer to the metal surface. Apply composite, finish, polish and apply Embrace Seal-n-Shine for perfect results.

THE A	EMPFM	1.2mL syringe each First-Coat, Seal-n-Shine, Opaquer, Porcelain Etch Gel, Kool-Dam + accessories			
EMFC 1.2mL syringe Embrace First-Coat + 10 flocked tips					
	EMO2	1.2mL syringe Embrace Opaquer, off-white shade (also available in bleach white, light yellow, pink and dark yellow)			

17% SOLUTION

FOR THE INSTRUMENTATION OF ROOT CANALS AND SMEAR LAYER REMOVAL

An effective chelating agent

Decalcifies canal walls

Buffered to a neutral pH

EDTA 17% Solution is buffered to a neutral pH and is an effective calcium binding or chelating agent used to facilitate instrumentation of root canals and for smear layer removal.

It decalcifies the canal walls making it easier to enlarge and shape the canal with files and reamers.



ž.	EDTA-30	30mL bottle	
Ê	EDTA-60	60mL bottle	
	EDTA-120	120mL bottle	
-	EDTA480	480mL bottle	

FILE-RITE[™]

LUBRICANT FOR ENDODONTICS

17% EDTA gel with lubricant

Minimizes binding and breaking of files

Decalcifies canal walls

File-Rite is an effective chelating agent for decalcifying canal walls. The semi-gel formulation contains lubricant to facilitate instrumentation of root canals and helps prevent binding and breaking of files. The convenient syringe allows direct dispensing

30F50

into canals using 30-gauge x 1" (2.5 cm) applicator tips. File-Rite rinses out easily with irrigation.

4 x 5 gm syringes + 50 each 30 ga x 1" applicator tips FILE

Orange - 30 ga x 1", straight applicator tips, pkg. 50

PREP-RITE[™] RC

FACILITATES INSTRUMENTATION OF THE ROOT CANAL

15% EDTA gel with lubricant and peroxide

Neutral pH

Prep-Rite[™] RC is a viscous EDTA paste for picking up on files or filling the access cavity using the traditional technique. It is an effective chelating agent that softens canal walls and facilitates instrumentation of the root canal. Peroxide provides an effervescing

action and lubricant helps prevent binding and breaking of files. Prep-Rite has a neutral pH and rinses out easily with irrigation.





4 x 5 gm syringes

C A L C I U M

TEMPCANAL[™] ENHANCED

TEMPORARY CALCIUM HYDROXIDE ROOT CANAL TREATMENT PASTE

Enhanced formula – will not clog 27-gauge needle

Non-drying paste - extended shelf-life - pH >12

TempCanal Enhanced[™] is easier to use, does not dry and provides the full benefits of calcium hydroxide in root canal therapy. For routine use as an intracanal dressing between office visits and for use in complicated cases involving traumatic injury and other instances where extended calcium hydroxide therapy is indicated. Flows through 27 gauge x 25 mm endodontic irrigation needles with 2-side-vents for controlled placement and uniform coating of canal walls, and with closed end to prevent overfills.





moced -	TEK3mL syringes + 20 endo irrigation needles (27-gauge x 1", 2-side-vent)			TE3	3mL syringe	
Sinced	TE4	4 x 1.2mL syringes + 20 endo irrigation needles (27-gauge x 1", 2-side-vent)	(m)	TE20N	27-gauge x 1" (0.4mm x 25mm), 2-side-vent - Pkg. of 20	

FORENDO[™] PASTE

CALCIUM HYDROXIDE WITH IODOFORM FOR ROOT CANAL THERAPY

Strong action - pH > 12 - Non-setting - Radiopaque

A calcium hydroxide paste with iodoform in a silicone oil base, Forendo Paste is a dressing for routine use between office visits and for complicated cases when extended calcium hydroxide therapy is indicated. Forendo Paste can be used to treat abscesses, periapical lesions, traumatic injuries, root resorption, fractures and perforations, pus, hemorrhage, exudation and weeping canals. Forendo Paste adds the strong action of iodoform to the benefits of the calcium hydroxide canal treatment paste.



Forendo Paste, 2.2 gm syringe + 20 applicator tips

MULTI-CAL[™]

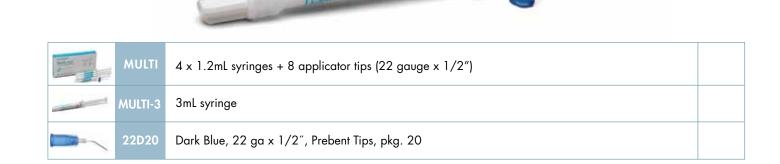
All purpose, non-setting calcium hydroxide paste

For root canal therapy and vital pulp therapy

40% (±2%) calcium hydroxide - pH > 12 - Radiopaque

Multi-Cal is a smooth, creamy calcium hydroxide preparation recommended for all clinical applications where calcium hydroxide is indicated. Multi-Cal is used for temporary and intermediate root canal therapy, direct pulp capping, pulpal curettage, pulpotomy, dentin bridge formation, cavity lining and indirect pulp capping.

Multi-Cal treats periapical abscesses and lesions, and stimulates apexification. The non- setting paste is easily removed with file and irrigation. Radiopaque.



Multi-Ca

PULPDENT® PASTE

40% (±2%) calcium hydroxide in a viscous aqueous methylcellulose paste

70 years of success

Pulpdent® Paste was the first pre-mixed calcium hydroxide pulpal dressing and the first bioactive dental product. It is a viscous, nonsetting, radiopaque paste for root canal therapy and vital pulp

therapy. Pulpdent Paste has pH > 12 and all the same indications for use as Multi-Cal.





3mL syringe + 24 applicator tips (18 ga x 1")



CALCIUM HYDROXIDE for ROOT CANAL THERAPY

For routine use as an intracanal dressing between office visits For extended calcium hydroxide therapy in complicated cases Non-surgical solution for abscessed teeth and failed root canals

- pH > 12
- Dissolves remnants of pulp tissue
- No mixing or condensing
- Easily removed with file and irrigation
- Radiopaque

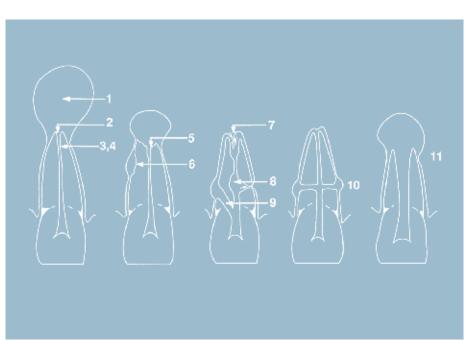
- Treats abscesses and periapical lesions
- Treats traumatic injuries, avulsed and luxated teeth
- Discourages traumatic root resorption
- Stimulates hard tissue formation.

CLINICAL USES

Pulpdent Calcium Hydroxide Pastes for Root Canal Therapy

TempCanal[™] Enhanced, Multi-Cal[™], Pulpdent[®] Paste & Forendo[™] Paste

Dr. Heithersay's original research on the use of Pulpdent Paste for root canal therapy has profoundly changed the way we treat endodontically involved teeth. Numerous other researchers have



corroborated this research, and these treatment modalities are taught at dental schools worldwide. An extensive bibliography can be found in *Save That Tooth* by Dr. Harold Berk.

> Heithersay GS. Calcium hydroxide in the treatment of pulpless teeth with associated pathology. J Brit Endo Society 1975:8(2);74-93.

- 1 Exudation control: puss, hemorrhage and weeping canals
- 2 Abscesses and periapical lesions
- 3 Antibacterial intracanal dressing
- 4 Temporary root filling
- 5 Apical inflammatory resorption
- Inflammatory resorption following trauma
- 7 Apical internal resorption
- 8 Internal-external root resorption
- **9** Root perforations
- 10 Transverse root fractures
- 11 Apexification in incompletely developed pulpless teeth

CASE 1 - TREATMENT OF ABSCESSED TEETH WITH TEMPCANAL

Four months after an auto accident in which her chin hit the steering wheel, the patient presented with painful loose lower central incisors. The case was treated immediately by removing the pulps and placing TempCanal.



Radiograph shows abscessed teeth with considerable bone loss.



Six months after root canal therapy and treatment with TempCanal, radiograph shows bone filling in and healing.



One year follow up shows healing and obturation with Pulpdent Root Canal Sealer.



Radiograph taken nine years after final filling shows long term success.

CASE 2 - REVERSING ROOT CANAL FAILURES

Six years after root canal therapy, the patient presented with a large periapical lesion. This tooth can be saved.



Pre-operative radiograph shows large periapical lesion with furcation involvement. (1979)



Six years after root canal treatment, a radiograph shows that the periapical lesion is even worse. (1985)



The crown, post and gutta percha were removed, and the canals were filled with TempCanal. Radiograph taken 9 months after treatment with TempCanal shows healing. (1986)



Radiograph taken nine years after final filling shows long term success. (1998)

CASE 3 - HARD TISSUE FORMATION WITH TEMPCANAL

The patient lost his maxillary left central incisor due to traumatic injury. There is external root resorption on the remaining central incisor.



Radiograph shows external root resorption on the mesial aspect of the maxillary right central incisor. The root canal is filled with TempCanal to promote remineralization.



Radiograph taken three months later shows remineralization of the mesial aspect of the right central incisor.

Complicated cases are routinely treated with Pulpdent calcium hydroxide pastes. To review case histories and techniques, refer to Save That Tooth by Dr. Harold Berk. Additional cases from the book appear in the education section of the Pulpdent website at www. pulpdent.com.



ROOT CANAL SEALER

ENDODONTIC FILLING MATERIAL

Tissue compatible

Modified zinc oxide-eugenol formula - radiopaque

For all permanent filling techniques

Pulpdent Root Canal Sealer meets ANSI/ADA specification 57 for endodontic filling material. The powder contains zinc oxide, zinc stearate, calcium phosphate and barium sulfate. The liquid contains eugenol and Canada balsam. A thick mix eliminates free

eugenol and ensures patient comfort. Root Canal Sealer does not shrink upon setting and resorbs with roots of deciduous teeth. It can be drilled for a post and can be removed with mechanical and hand instrumentation, if necessary.

COMPATIBLE WITH ALL PERMANENT FILLING TECHNIQUES:

- Pressure syringe technique

- Lateral condensation





Root Canal Sealer Kit: 15cc powder, 7.5mL liquid, mixing pad, scoop

PULPDENT® PRESSURE SYRINGE®

ENDODONTIC SYRINGE FILLS THE APEX FIRST

PSK

Pressure Syringe, 30 assorted needles, Pulpdent Root Canal Sealer Kit, Wonder Orange[™] Cleaning Solution PS-O



Visit www.pulpdent.com for complete information on the Pressure Syringe technique.

VONDER ORANGE™

100% NATURAL CITRUS ESSENCES - CLEANS SURFACES, INSTRUMENTS AND SKIN

For removing zinc oxide dental cements, impression materials and waxes from vinyl furniture, face and hands. Also used for cleaning

the Pulpdent Pressure Syringe. No artifical ingredients.





HEROIC DENTISTRY

MARIA: By Dr. Delfín Barquero

Quick, Effective, One-visit, Multiple-unit ACTIVA Restorations

Treatments that would normally require multiple visits can be completed in just one appointment with materials like ACTIVA BioACTIVE-RESTORATIVE.

Maria was in her early 60s when she was referred to our practice with nine posterior teeth requiring restorations. She would soon be undergoing radiation therapy for squamous



Failed amalgam restoration



Shows placement of ACTIVA BioACTIVE-RESTORATIVE



Amalgam and decay are removed and cavity prepared



Shows the completed ACTIVA restoration



Enamel is etched for 20 seconds



Bonding agent is applied



Shows several posterior teeth prepared for restoration



Final posterior restorations with ACTIVA

cell carcinoma, a common form of skin cancer, and due to concerns about infection from untreated caries, she wanted all dental restorations completed before starting cancer treatment.

Xerostomia is a typical side effect of radiation, and this leads to root caries, which is often visible within several months. This was a concern as was Maria's ability to maintain adequate oral hygiene during her radiation treatment. Time and cost were also considerations.

Materials that promote remineralization can help protect compromised teeth. I chose ACTIVA BioACTIVE because I could complete the case quickly and effectively, and the material supports the natural remineralization process and keeps the margins intact with apatite formation and a nonsoluble seal at the material-tooth interface. The release and recharge of calcium, phosphate and fluoride ions is pH sensitive and beneficial to tooth structure, and the rubberized-resin component provides a durable, fracture resistant restoration.

The teeth were prepared, etched, bonded, and restored with ACTIVA. The flowable characteristics of ACTIVA allowed me to complete each posterior restoration in eight minutes. The material adapted easily to the tooth, produced no bubbles or voids, and provided excellent results.

The grateful patient was pleased with the esthetics and impressed that all nine restorations could be placed in a single, affordable appointment.

For more than one hundred years, the tradition of dentistry has been passed down through the Barquero family in Costa Rica. Dr. Delfin Barquero continues this proud tradition bringing innovative new technologies and sciences to the practice of modern dentistry. Dr. Barquero teaches and lectures worldwide.





$KOOL-DAM^{TM}$

HEATLESS LIQUID DAM & BLOCK OUT RESIN



Does not produce heat when cured, ensuring patient comfort Remains rubber-like and flexible after curing Tear resistant - Easily removed

Kool-Dam[™] is formulated to eliminate the problems associated with light cure liquid dam materials. Apply Kool-Dam on the gingival or tooth surface and light cure prior to bleaching, sandblasting, applying porcelain etch or other procedures requiring intraoral protection. Also use Kool-Dam to block out undercuts prior to taking impressions. Kool-Dam remains cool during light curing and remains flexible when cured. It is conveniently dispensed from a syringe using small applicator tips for accurate placement, and is easily removed upon completion of the procedure.





Kool-Dam is placed to protect the gingiva. It light cures in 20 seconds.



Kool-Dam is placed to protect soft tissue prior to bleaching.



Kool-Dam is placed on the model prior to making a custom bleaching tray.





SNOOP[™]

CARIES DETECTING DYE



Q

Dark blue color provides strong contrast with dentin and the pulp

Allows accurate detection of infected dentin

Increased reliability, no error

Carious dentin is made up of two distinct layers:

• The layer of outer infected dentin is soft, discolored, non-vital, nonsensitive, cannot remineralize, should be removed and is stained by Snoop in 10 seconds.

• The layer of inner uninfected (affected) dentin is not infused with bacteria, is capable of remineralizing, should not be removed and is not stained by Snoop in 10 seconds.

Snoop[™] distinguishes between outer infected and inner affected dentin in 10 seconds. Snoop identifies infected carious dentin and helps the practitioner preserve vital dentin that should not be removed. The caries detecting dye stains the denatured collagen that is only present in the outer infected dentin. This is an important tool for conservative dentistry.





Shows obvious occlusal caries.

SNOOP



After removing obvious caries, apply SNOOP for 10 seconds.



Rinse and remove only the stained infected dentin.



Re-apply SNOOP and rinse. No further staining means no remaining infected dentin.



12mL bottle

DENTIN DESENSITIZER

FOR APPLICATION TO ALL DENTIN SURFACES

Dentin Desensitizer contains 5% glutaraldehyde in water with fluoride added to enhance stability. It is compatible with adhesives and composites as well as traditional cements, and it does not interfere with bonding.



12mL bottle



PERIOCARETM

PERIODONTAL DRESSING

Kind to the tissues

Neutral odor and taste - Patient pleasing

Metal oxide and vegetable oil base

PerioCare[™] is a two-paste, highly elastic periodontal dressing that sets resiliently hard and does not chip or fall apart in the mouth. It assists in tissue placement after periodontal surgery and provides durable protection of tissue. After mixing equal amounts of part one and part two, PerioCare is ready to pick up with wet fingers in about 45-60 seconds. It has a working time of 4-5 minutes and sets in 15 minutes.



90mL tube paste, 90mL tube gel, mixing pad

MINI-BOWLS

Non-stick silicone - For mixing acrylic

Suction cup on bottom holds bowl to the table

Sterilize by any method







===	B-MS3	Small, 8 cc, set of 3 (1" diameter)		B-ML	Large, 80 cc, one each (2.25″ diameter)	
	B-MM2	Medium, 30 cc, set of 2 (1.625" diameter)	D Ezz	B-MA	Assorted: 2 small, 1 medium, 1 large	

CODE RINGS



CR*

Pkg. of 100, all one color



CR*-50 Pkg. of 50, all one color

Specify color: * 1=white, 2=yellow, 3=blue, 4=red, 5=green, 6=black, 7=gray, 8=brown, 9=orange, 10=mauve, 11= pink, AS=assorted



A HANDLE FOR SMALL OBJECTS

The original "handle for small objects" has numerous applications from dentistry to model making to replacing hearing aid batteries. The 2" long stick is 2 mm in diameter with an adhesive tip on one end. Apply light pressure to pick up small items for easier handling and placement. The adhesive does not transfer to the item. To release, simply twist the stick gently.





Embrace Resin Cement is placed on an inlay seated on a Pic-n-Stic.



Pic-n-Stic assists in placement of the inlay.



Pic-n-Stic is used to place an orthodontic bracket.



Box of 60

BRUSH TIPS AND HANDLES

APPLICATION ACCESSORIES







MATRIX BANDS

These self-contained matrix bands do not require matrix retainers. "T"- Bands are made of soft, adaptable brass or stainless steel matrix material (.002"/.05mm thick) and are available straight, curved, narrow (5/32"), wide (1/4") and in assortments. "T"- Bands are especially popular for use in pediatric dentistry.

-	BTBS/N	Brass Straight /Narrow (5/32") Box of 100	BTBC/N	Brass Curved/Narrow (5/32") Box of 100	
_	BTSS/N	Stainless Straight /Narrow (5/32") Box of 100	BTSS/N	Stainless Curved/Narrow (5/32") Box of 100	

FILE-RITE™	ETCH-RITE™ ETCH ROYALE™ PORCELAIN ETCH GEL™	EMBRACE [™] WETBOND PIT & FISSURE SEALANT [™] ORTHO-COAT [™]	MULTI-CAL [™]	EMBRACE [™] WETBOND PIT & FISSURE SEALANT [™]
Orange. 30 ga x 1″, Straight Tips	Light Blue, 25 ga x 1/2″, Prebent Tips	Red, 23 ga x 1/2", Prebent Tips	Dark Blue, 22 ga x 1/2″, Prebent Tips	Black, 22 ga x 1/2″, Prebent Tips
30F50 - pkg 50	25B20 - pkg 20	23R20 - pkg 20	22D20 - pkg 20	22K20 - pkg 20
30F100 - pkg 100	25B50 - pkg 50	23R100 - pkg 100	22D100 - pkg 100	22K100 pkg 100
	25B100 - pkg 100			



SILANE™

Dark Blue, 22 ga x 1/2″, Prebent Red Dropper Tips

22DR15 - pkg 15 **22DR75** - pkg 75



KOOL-DAM[™] LIME-LITE[™]

Pink, 20 ga x 1/2″, Prebent Tips

20L20 - pkg 20

20L100 - pkg 100



KOOL-DAM[™]

Black, 19 ga x 1/2", Prebent Tips

19K20 - pkg 20

19K100 - pkg 100



KLEER-VENEER[™] KOOL-DAM[™]

Green, 18 ga x 1/2", Prebent Tips

18G20 - pkg 20

18G100 - pkg 100



TEMPCANAL ENHANCED[™]

27-gauge x 1" (0.4mm x 25mm), 2-side-vent TE20N - pkg 20 TE50N - pkg 50 TE100N - pkg 100



EMBRACE[™] SEAL-N-SHINE[™] EMBRACE[™] FIRST-COAT[™]

Dark Blue, 25 ga x 1/2", All Plastic Flocked Tips

P2520 - pkg 20

P25100 - pkg 100



SPEE-DEE BUILD-UP™

Automix Cartridge Tip +

Intra-Oral Tips

FD20 - pkg 20

TUFF-TEMP PLUS™



Automix Tips

FSB20 - pkg 20



TUFF-TEMP PLUS™ EMBRACE™ RESIN CEMENT ACTIVA BioACTIVE CEMENT™

Automix Syringe Tips

A20 - pkg 20

A50 - pkg 50



ACTIVA BioACTIVE RESTORATIVE™ ACTIVA BioACTIVE BASE/LINER ™ ACTIVA BioACTIVE CEMENT™

Automix Tips, clear, with bendable 20-gauge metal cannula

A20N1 - pkg 20

A50N1 - pkg 50



ACTIVA BioACTIVE RESTORATIVE™

Automix Tips, clear + short intraoral tips (IOT) AD20T - pkg 20

AD50T - pkg 50



ACTIVA BioACTIVE RESTORATIVE™

Automix Tips, clear + long, narrow intraoral tips (IOR) AD20R - pkg 20 AD50R - pkg 50



ACTIVA BioACTIVE RESTORATIVE™

Automix Tips, clear, straight, tapered

AS20 - pkg 20

AS50 - pkg 50

FLECTATM

DISPOSABLE MIRRORS

Highest quality single-use mirror

40% larger viewing surface

Made in Watertown, Massachusetts USA

The innovative Flecta design has many advantages. The unbeatable, low single-use price allows you to have a shiny new mirror for every patient - no more scratches and blotches. The highest quality disposable mirror available, Flecta's elongated shape has a 40% larger viewing surface. The pull tab easily removes the protective film from the mirror surface. The mirrors are double-sided with back side light reflector. The light weight comfort handle reduces stress and fatigue and the offset handle design is a better tongue guard and cheek retractor. Flecta mirrors can be given to patients as take-home gifts.

THE ADVANTAGES OF FLECTA DISPOSABLE MIRRORS ARE CLEARLY VISIBLE



40% More Viewing Area. No more scratches and blotches.



Expanded posterior view using the Flecta Disposable Mirror.



Flecta, Box of 200

MIXING WELLS

FOR USE WITH ALL DENTAL MATERIALS

Available in two-well and four-well configurations

Perforated sheets for convenient handling and storage

Made from a high molecular weight polymer

These convenient disposable mixing wells are compatible with all solvents, bonding agents, and dental materials.

AVAILABLE IN ECONOMICAL BULK PACKS





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