

Anterior Bridge - Instructions of Use



1) Initial situation.



2) Clean and prepare the abutment teeth.



3) Measure the required length of the Dentapreg strip by using dental wax, wedjets, dental floss etc. The Dentapreg strip should cover approx. 2/3 of the abutment teeth's crown.*



4) Ensure a dry working area. Use of a rubber dam is highly recommended.



5) Lightly prepare the abutment tooth surface with a diamond bur.



6) Apply an ortho-phosphoric etching gel on the prepared teeth areas following the manufacturer's instructions.



7) Rinse thoroughly and dry.



8) Apply an adhesive system on the prepared teeth areas.



9) Light cure the adhesive according to the manufacturer's instructions.



10) Apply a thin layer of flowable composite (approx. 0.5 mm) on the prepared teeth areas. DO NOT CURE!



11) Remove the strip from the blister and cut it with regular scissors to the required length. Remove the protective foil and paper. Do not touch the unprotected strip with bare hands. The use of powder-free latex gloves is recommended. Return the remaining part of the strip to the blister and place the blister in the supplied light save box. Store in a dark place, preferentially in a refrigerator. You can store it for up to 2 weeks without deteriorating the properties of the strip significantly.



12) Place the strip in the flowable composite and adapt it. The strip in the pontic position is designed to go along the middle of the future pontic in the lingual-labial direction. Do not place the strip too close to the gingiva, to allow space to properly clean the area under the bridge.



13) Light cure the adapted Dentapreg strip for 40 seconds.



14) Cover the entire strip with flowable composite including the interproximal areas. Light cure the flowable composite according to the manufacturer's instructions.



15) Build the pontic by layering the C&B or flowable composite according to the manufacturer's instructions. Remember to keep the cleaning spaces free.



14) Finish the bridge and adjust the occlusion.

* The following steps describe the chair side procedure. You can work indirectly on the model using the following procedure:

Take an impression of the clinical situation using an alginate impressions create a poured model. Prepare the bridge on this model. The procedure is the same as the chair side version. Once the bridge is ready, cement it to the prepared teeth using adhesive resin cement. Working on a model is more comfortable and easier than directly chair side and the final result will be more precise and esthetic.