OralSurgerySource

Always the Best Products, Always the Best Price

13343 SHERMAN WAY
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CATALOG 47

ORTHOdontic IMPLANTS - A MUSTHAVE MODEL!

Demonstrates some possible ortho implant placements:

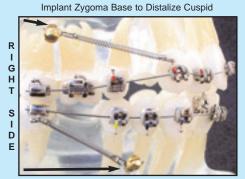
- · Retraction of anterior teeth.
- Distalization without taxing anchorage.
- Anterior movement of posterior teeth
- Implant as molar anchorage to distalize bicuspid.
- Atraumatic placement of implants.

Cat. No. 840-125 \$ 255.00

Spectacular Articulated
Orthodontic Implant Model
presents the advantages of
Implants in Orthodontics



Implant Zygoma Base to Distalize Cuspid



Implant Buccal Plate of Mandible to Mesialize Molar



Ortho Implant ModeL - Anterior View



Implant Posterior Mandible to Distalize Bicuspid

Gold Mesh disks - Perfect for Light and self cure Bonding!



Gold Mesh Disk Cat. No. 248-065

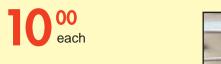
as low as

5

CONTROL: Tips of Mini Tweezer fit into eyelet for complete control of attachment. Swivel allows chain to rotate full



ADHESIVE: With open Gold Mesh you can see resin locked into attachment guaranteeing bond to cuspid.



See page 3 for quantity pricing



SHAPE: Wire cutter can trim Gold Mesh to fit any required surface. Mesh is easily bent to adapt to contour of any surface.



PLACEMENT: With tweezer control, ideal attachment shape, and adhesive in mesh, your bonding will be a success.

We will help you get into Light Cure CUSPID Bonding!

Light Cure Unit LIST \$399



Light Cure Cuspid



- Bonds attachment in Wet or Dry Field
- Rapid and Complete CurinG in 20 seconds through mesh.

SUPERSPE-CIAL LIGHT & Resin list \$464

• Fan prevents bulb

times.

• Available 110 V or 220 V

Rapid and Complete

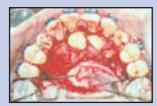
CurinG in 20 seconds.

Beep tone for curing

Autoclavable light guide turns 360°.

TREATMENT FLOW FOR CUSPID BONDING

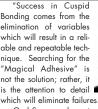
Pre-Bonding Initial Steps are the same for Self-Cure or Light-Cure



1. PREPARATION. Tie the flap as far away from the surgical field as possible. Post-operative pain usually comes from traumatized tissue and its resulting swelling.



2.. ETCHING. Use Green Etch as a hemostatic. Flood the entire operative field for 30 seconds and then suction away the green etch, Reflood for an additional 30 seconds and suction away. Keep repeating this procedure several more times until the green etch stays bright green around the edges and does not turn black (the black areas are active bleeding sites.).





Oral Surgeons by nature and training work quickly. Bonding is a meticulous technique where each step must be completed totally and in proper sequence. Without proper Retraction, Hemostasis is almost impossible; and without Hemostasis, Drying is impossible. Without a bone dry field (for Self Cure) or relatively dry field (for Light Cure which is a wet or dry field bonding adhesive and can tolerate moderate moisture) produced by using a hair drier, bonding may be compromised.

Dr. Lloyd R. Taylor



3. DRYING. Suction away the bulk etch, wash gently with water, and carefully dry with air, avoiding splattering any fluids back onto the cleaned tooth surface. Then using a hair dryer on "Low," wave the drier back and forth over the tooth for a full 5 seconds. This eliminates all the micro-moisture that might interfere with bonding.

Self-Cure System



Self Cure SuperBond Instant Kit Cat. No. 557-764

Light-Cure System



Light Cure CuspidBond Kit Cat. No. 557-754

4. SELECT ATTACHMENT. Any attachmnet is acceptable with Self Cure adhesives. Orthodontists are used to Gold Buttons with Chain. Either of the Swivels - Eyelet or Disk - will also be excellent and eliminate the need to check for a path of insertion.



5. PRIMER. Apply 1/2 drop to the center of the bonding area and spread with the needle tip. Leave a dry area - a 2 mm circle or "moat" - around the Primer to avoid contamination by fluids in the sulcus or by fluids in the follicle behind the tooth. Apply another 1/2 drop of Primer to the back or attachment and spread with needle tip.



6. ADHESIVE. Apply Adhesive to the back of the attachment. Immediately place attachment over Primer area on tooth. Press center of attachment firmly against tooth with tweezer for 10 seconds.







4. SELECT ATTACHMENT. Only the Gold Mesh Disk should be used with a Light Cure system in order for the light to cure all the resin. If a solid attachment is chosen, the only cured material will be that plastic extruded around the attachment.



5. PRIMER. Apply 1/2 drop to the center of the bonding area and spread with the needle tip. Leave a dry area - a 2 mm circle or "moat" - around the Primer to avoid contamination by fluids in the sulcus or from fluids in the follicle behind the impacted tooth.



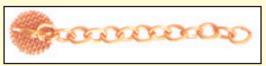
6. ADHESIVE. Apply Adhesive to the back of the attachment. Immediately place attachment over Primer area on tooth. Press center of Gold Disk Attachment firmly against tooth with tweezer; you will see that the Adhesive will flow into Mesh of Gold Disk in several areas. Immediately light cure for 10 seconds.

GOLD CUSPID ATTACHMENTS with CHAIN

Gold Swivels with Chain

The Gold Swivel allows the chain to rotate a full 360° around the attachment, eliminating the need to plan a path of insertion before bond placement. No matter where the Swivel is placed, the Gold Chain can be tied wherever desired.

The Gold Swivel also facilitates easy attachment placement. The Micro Tweezer tip will fit securely into the Swivel giving total control of the attachment.



Gold Mesh Disk Cat. No. 248-065

The Gold Mesh Disk is the only attachment appropriate to use with a light cure system. The bonding resin will be totally cured since the curing light will reach all the adhesive. If a solid bond is used with a light cure system, the resin under the bond will never cure. In addition the Gold Mesh Disk can easily be cut or bent to fit any size surface add the retention of bonding to a proximal edge.



Gold Eyelet Cat. No. 248-075

The Gold Eyelet is the perfect attachment for use with Self Cure systems. The Swivel provides 360° rotation of the Gold Chain while the light weight pad pas provides superb bonding retention and will stay exactly where placed as the resin self cures.

GOLD CUSPID ATTACHMENTS with CHAIN

as low as

\$ 10 00 each

1 to 4 - \$15.00 each 5 to 9 - \$14.00 each 10 to 19 - \$13.00 each 20 to 49 - \$12.00 each 50 plus - \$10.00 each

MIX STYLES FOR QUANTITY PRICE



SWIVEL - allows the chain to rotate a full 360° around the bond eliminating the need to identify a path of insertion before bond placement. Micro Tweezer tip fits into Swivel to give accurate placement control.



GOLD MESH PAD - can easily be cut to any fit any available bonding surface with a wire cutter or strong scissors. The Mesh can also be adapted to any curvature or even bent over a proximal edge.

STANDARD 5 mm GOLD BUTTON - This attachment has been preferrred

by orthodontists for over 20 years. The Button is the ideal size for the lingual surface of most impacted cuspids and

is easy to place using the Mini

MINI 4 mm GOLD BUTTON - This attachment is excellent in limited spaces providing adequate bonding surface for the adhesive. The Mini

Tweezer fits under the Button and pro-

vides secure control.

Tweezeer.

Gold Buttons and Cleat with Chain



Standard 5 mm Gold Button Cat. No. 248-025

The Standard 5 mm Gold Button with Chain has been the most requested cuspid attachment by orthodontists for over 20 years. The 5 mm Button is the ideal size for 95% of all impacted teeth.



Mini 4 mm Gold Button Cat. No. 248-055

The Mini 4 mm Gold Button with Chain is needed for those teeth where the entire lingual or labial surface can not be exposed. While the base is only 65% of the bonding surface of a 5 mm Button, the 4 mm Button is adequate for cuspid traction.



Gold Cleat Cat. No. 248-015

The Gold Cleat was the original cuspid attachment and is still reuested.

GOLD CLEAT - was the first attachment used for impacted cuspids and is still is use today. Orthodontists like the high cleat wings which a re easy to tie for final extrusion.

200 DE 100 DE 10

GOLD "V" MESH with Chain has been cut and contoured to fit over the barely visible incisal cusp tip of an impacted cuspid. Although the labial area is tiny, the combined surfaces of the entire tip is sufficient for bonding and subsequent traction. Here the chainhas been tied with elastic thread for eruption and distalization.

Gold "V" Mesh with Chain



Gold "V" Mesh Cat. No. 248-035

The Gold "V" Mesh is an extra heavy mesh which can be cut to any size or shape and will retain that shape. Although usable in every situation, it is ideal for bonding to incisal tips or proximal edges.

CUSPIDBOND SYSTEM

Light Cure CuspidBond Adhesive System

GOLD MESH DISKS - Perfect for Light Cure and Self Cure Systems

Gold Mesh Disks are ideal for light cure bonding since the open mesh provides for total light curing of the resin, resulting in maximum bond strength. Buttons or brackets made of solid metal prevent the light curing of all the resin under the attachment. The only cured light cure resin with a solid attachment is the extruded resin around the edges, rarely sufficient to retain the attachment. Gold Mesh Disks have the following advantages:

- a. Size the 5 mm disk is the ideal size for almost all bonding procedures.
- Curing the open mesh allows tor the total light curing of the adhesive. Mesh Disks also work well with self-cure systems like SuperBond Instant.
- Adaptation Using a plier, the Gold Mesh Disk can be bent over proximal tooth edges to increase bonding retention.
- Trimming the mesh can be cut with a heavy wire cutter to fit the shape of any available bonding surface
- 360° Rotation the gold chain can rotate a full 360°, eliminating the concern about chain direction.
- Eyelet the eyelet has the perfect opening to fit in the tip of a Mini Bonding Tweezer tip for secure grip and perfect placement.



Gold Mesh Disk

Cat. No. 248-065

1 to 4 - \$15.00 each

5 to 9 - \$14.00 each

10 to 19 - \$13.00 each

20 to 49 - \$12.00 each

50 plus - \$10.00 each

2. CuspidBond PRIMER - Wet or Dry Field

CuspidBond Primer can be applied to wet or dry etched enamel surfaces. If the enamel is dry, apply the Primer and immediately place the Gold Mesh Disk with CuspidBond Adhesive, and then light cure. If the enamel is wet, the Primer will mix with and evaporate any remaining moisture, leav-

ing a dry surface for the adhesive. With the blue applicator tip, try to place the Primer exactly where the bonding will take place. Do not allow excess Primer to flow into the sulcus or behind the tooth where excess moisture may be present and will track along the Primer back onto the etched enamel surface. If the surface is obviously wet, allow 5 to 15 seconds for the Primer to remove the moisture before placing the Adhesive. NOTE:



Any residual blood on the etched enamel surface will prevent the Primer from entering the enamel prisms and prevent locking and curing into the under cut surface. Blood is not a "wet surface," but instead a contaminant. All blood must be removed from the bonding surface.

We strongly recommend using the Mini Dryer, even after air drying the etched enamel, in order to remove all possible residual moisture. While this step is critical in the use of self-cure adhesive systems such as SuperBond Instant, it certainly does no harm even with a system like CuspidBond that is not moisture sensitive. Driving away any peripheral moisture with the Mini Dryer will eliminate another failure variable.

100% Bonding Success

- Highest Bond Strength
 - Wet or Dry Field

FFATURES:

- 1. Ideal mesh for light cure and self cure.
- 2. Full 360° rotation of chain.
- 3. Perfect pick-up through eyelet.
- 4. Easily trimmed to any size.
- 5. Can be bent over proximal edges.



Tweezer fits into eyelet for total control of attachment.

FEATURES:

- 1. Eliminates all residual moisture.
- 2. Easy to use needle applicators.



Applicator allows easy placement of Primer in any location.

3. CuspidBond ADHESIVE

Using the white applicator tip, extrude the CuspidBond Adhesive over the entire surface of the Gold Mesh Disk. Using the tip of the needle, press the adhesive into the mesh all around the edges. Try to avoid pushing adhesive through the center where it might cover the attachment of the chain to the disk. The Adhesive is

moisture sensitive and can only be placed on the tooth surface after the Primer has removed all residual moisture

C supplet B and

The Adhesive on the back of the Gold Mesh Disk can be prepared in advance in order to reduce operatory time. While holding the Gold Mesh Disk with a Mini Bonding Tweezer in the eyelet, extrude the Adhesive onto the back of the mesh and push the adhesive through the mesh as desired. Turn the Tweezer and Mesh Disk with the Adhesive upside down on the bracket table and cover with a piece of black paper or plastic. The will prevent the polymerization of the light sensitive resin until you are ready to place the attachment.

FEATURES:

- 1. Strongest bonding composite.
- 2. Easy to use needle applicators.
- 3. No-mix light cure system.



Adhesive flows onto and locks into Mesh Disk



Light Cure CuspidBond Kit Cat. No. 557-754

CuspidBond Kit - Primer, Adhesive & Applicators

Cat. No. 557-754

1 or 2 - \$65.00 each

3 or 4 - \$60.00 each

5 plus - \$55.00 each

Cuspid Bond Primer only - Cat. No. 557-755 - \$35.00 each

CuspidBond Adhesive only - Cat. No. 557-756 - \$35.00 each

CuspidBond Kits with Gold Mesh Disks and Accessories

1. Introductory Kit: A sample kit to get started

Cat. No. 557-751

- 1 CuspidBond kit
- CuspidBond Primer Syringe
- 1 CuspidBond Adhesive Syringe
- 10 Primer Applicators
- 10 Adhesive Applicators
- Green Syringe Etch & 25 tips
- 6 Gold Mesh Disks with Gold Chain

Value \$172.00

Price \$135.00

20% Savings

Kits offer substantial discounts over item pricing 2. Office Kit: An adequate supply of items

Cat. No. 557-752

- 1 CuspidBond kit
- 10 Primer Applicators
- 10 Adhesive Applicators
- 2 Green Syringe Etch & 25 tips 18 Gold Mesh Disks with Gold Chain
- Long Mini Bonding Tweezer
- Curved 45° Mini Bonding Tweezer Clear Elastic Thread 25 ft.(7.5m)
- Adult Lip Retractor
- Tonque Block set

Value \$389.00

Price \$295.00

Complete Start-Up Kit - Everything needed. Cat. No. 557-753

- 2 CuspidBond kits
- 20 Primer Applicators
- 20 Adhesive Applicators
- 4 Green Etch Syringes & 25 tips
- 30 Gold Mesh Disks with Gold Chain
- Short Mini Bonding Tweezer
- Long Mini Bonding Tweezer
- Angled 30° Tweezer
- Curved 45° Mini Bonding Tweezer

30% Savings

- Bayonet Mini Bonding Tweezer Clear Elastic Thread 50 ft (15m)
- Adult Lip Retractor
- Tonque Block set

Value \$727.00

Price \$499.00

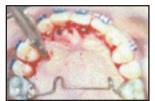
CUSPIDBOND TECHNIQUE

Light Cure CUSPID BOND TECHNIQUE SUGGESTIONS

- Uncovering Slow and meticulous technique in raising the palatal flap and tying it back will be rewarded with minimal post-operative discomfort for the patioent.
- 2. Hemostasis Green Phosphoric Acid Etch is the easiest and most effective way to achieve hemostasis. Flood the entire operative field tooth, bone, soft tissue with Green Etch which is the best color for contrast. Note that the edges of the etch turn black where bleeding is continuing. Leave etch for 30 seconds and then suction away the etch. Repeat this procedure over and over until the etch margins remain green, proof that hemostasis is complete.
- Washing Suction away the etch and then gently wash away any residual etch with water. Do not wash away the large amount of etch, since this will only splatter the etch all over.
- 4. Drying Place the tip of the air syringe directly on the etched enamel surface and gently release the air to dry the tooth. Air released from a distance results in splatter on the tooth surface. Even though
- CuspidBond is a "wet field" adhesive system, we still strongly recommend drying the enamel with a Mini Dryer prior to bonding.
- 5. Primer Place 1 drop of liquid in the center of the bonding area and spread it around with the needle tip. Try to leave a "moat" of at least 1 to 2 mm of dry tooth between the Primer and the sulcus. If the Primer flows into the sulcus, it will serve as a conduit for all the fluid in the sulcus and perhaps in the follicle beneath the tooth!
- 6. Adhesive Cover the entire back of the Gold Mesh Disk with Adhesive and press it into the mesh with the applicator tip. Place the attachment on the tooth surface and seat firmly against the tooth. "Tack cure" the adhesive for 5 seconds with the light, remove tweezer, then complete 20 to 40 seconds of light cure depending on the strength of your light..



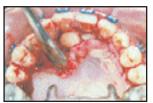
 Pre-Surgery. Both impacted cuspids can be palpated palatal to the maxillary centrals.



2. Incision. A full thickness flap is incised 2 teeth distal to both deciduous cuspids.



3. Elevation. Use the fine point of a periosteal elevator to lift the flap without tearing.



4. Elevation. Use the large end of the periosteal elevator to raise the periosteum cleanly off the entire palate.



5. Retraction. Tie back the flap on both sides to the molars to eliminate retraction



6. Bulk Etch. Apply green phosphoric acid etch to the entire surgical field as a cauterizing hemostatic.



7. Suction Etch. Leave etch for 30 seconds, suction away, and reapply until hemostasis is complete.



8. Wash. Use gentle water to remove residual etch. Be caraeful not to restart bleeding.



 Air Drying. Place tip of air syringe directly on enamel and gently release air in order to dry, but not splatter.



10. Mini Dryer. On "Low," move Mini Dryer over tooth to be bonded for 5 seconds to eliminate all moisture.



11. Primer. Using needle applicator, apply one drop of Primer and spread it over entire surface to be bonded.



12. Pick Up. Tip of Mini Tweezer fits into eyelet of Gold Mesh Disk, providing precise control for placement and bonding.



13. Adhesive. Determine path of insertion and apply adhesive with needle applicator pushing adhesive into mesh.



14. Placement. Press Mesh Disk firmly against enamel surface; adhesive should extrude around and through mesh.



15. Light Cure. "Tack Cure" for 5 seconds, remove Micro Tweezer, then complete light cure for 20 to 40 seconds.



16. Bonded. The Gold Mesh Disk is firmly bonded to the tooth surface. The gold chain swivels on the eyelet.



17. Re-etch. The enamel surface of the second cuspid may have been contaminated by fluids and must be re-etched.



18. Trimming. The second cuspid has a very small area for bonding and therefire 1/2 the Mesh Disk is cut away.



19. Insertion. 45° Mini Tweezer provides the best access to the path of insertion for the 1/2 Gold Mesh Disk



20. Adhesive. Holding trimmed Mesh Disk with the Mini Tweezer, the CuspidBond Adhesive is applied.



21. Positioning. Place the Mesh Disk exactly where desired, cure for 5 seconds, remove tweezer, and final cure.



22. Completion. Now when bleeding is of no consequence, remove teeth and cut eruption channels if desired.



23. Tie Chain. Cut chain to reach arch wire and tie to bond with silk suture.



24. Suture. Reposition palatal flap and place interproximal sutures.

SUPERBOND INSTANT SYSTEM

SuperBond Instant Self Cure Adhesive System

1. ADHESIVE - 10 Second Contact Bonding

SuperBond Instant 10 Second Contact is the only adhesive specifically formulated to bond attachments to impacted teeth. It will out perform all composites, glass ionomer and light cure for working time, strength, ease of mixing and a simple rapid delivery system. **SuperBond**'s initial set (working time) is only 10 seconds which is even more remarkable when compared to 60 seconds for One-Steps, 104 seconds for Glass lonomer and 120 seconds for Two Step Composites. Once you try it and appreciate its unique features, you will never use any other product for bonding attachments to impacted teeth.

After applying the SuperBond Instant Activator and Adhesive Paste, just hold the attachment firmly against the tooth for the 10 second working time and it is bonded! This rapid working time will help you avoid the bleeding that often interferes with bonding procedures. With a Bonding Strength to Enamel of over 1100 psi (70.3 kg/cm2), SuperBond Instant is stronger than all products on the market and will hold attachments in place against all traction forces. After a final set of 3 minutes, you are ready to tie in the attachment before your sutures are



SuperBond Instant out performs all products for strength and ease of application Cat. No. 557-764

kit - \$ 65.00 each 3 kits - \$ 60.00 each

Makes Bonding to Impacted Cuspids an Easy, Consistent and **Profitable Part of Your Practice**

"As both an Oral Surgeon and Orthodontist, impacted teeth have been a major interest of mine for many years. My surgery and orthodontics must be perfect since I have no one to blame but myself if things do not work out exactly as planned! These excellent products help to guarantee success for us.



OrthoSource has developed the adhesive, gold attachments and supplies to help you solve these dif ficult problems. **SuperBond** Instant is the perfect adhesive for these procedures - an amazingly fast 10 second initial set strong enough to support any elastic traction and in an easy to use delivery system. The three types of gold attachments with and without gold chain cover all bonding possibilities. And there is also an entire line of instruments and accessories. I am pleased to share my techniques with you and welcome your omments "

Dr. Lloyd R. Taylor

DELIVERY SYSTEM - Easy To Apply Needle Applicators

The needle applicators allow you to quickly and accurately place the materials exactly where you want them. But before applying SuperBond Instant, hold attachment to be bonded in the Mini Tweezer of your choice exactly how you will place it on the tooth. It is best to practice placement at least once before applying bonding adhesives to be certain that the attachment will fit, that there is a path of insertion, and that the chain faces in the correct direction - you will only have 10 seconds of working time after they are applied! Apply Activator to the etched and dried tooth surface and also to the mesh of the attachment, quickly followed by Adhesive to the mesh surface. Press attachment firmly in place for 10 seconds amd you are done!



1.Extrude a very small amount of Activator. Using the applicator tip, spread over the exact area to be bonded.



2. Using the needle tip, spread a small amount of Activator over mesh of the



Extrude Adhesive over previously applied Activator on back of mesh pad and immediately place attachment



4. Press attachment firmly into place and hold motionless for 10 seconds. Chain link can be tied in 3 minutes.



Select the attachment with the largest bonding surface for the tooth

GOLD ATTACHMENTS - A Specific Size For Each Bonding Situation

Gold attachments with gold chain are both well-tolerated by tissues and attractive. The three attachments - Cleat. Button and Screen Mesh with or with out gold chain - will cover all surgical situations. The Cleat is 4 mm in diameter. The Mini Button is 4 mm in diameter and the Standard Button is 5 mm in diameter. For a single labial or palatal tooth surface, select the largest attachment possible allowing for at least a 1 mm border of clear tooth structure around the attachment to prevent sulcus moisture contamination. The chain link opening is the ideal size for elastic thread.

Gold Screen Mesh with or without gold chain is perfect for cases where only small proximal surfaces are available for bonding and a Cleat or Button would be too large. The Gold Screen can be trimmed to any size with the Optima Wire Cutter (879-184) and adapted to fit and even wrap around these small corners and edges

GOLD SCREEN TECHNIQUE



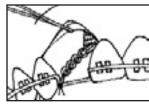
1. Maxillary Right Cuspid with only 2 mm of exposed labial and lingual bond ing surface.



Removing additional bone over the labial surface would harm the lateral.



3. Trim Gold Screen into "V" shape to cover available labial and palatal sur-



4. Gold Screen with Gold Chain bonded to cuspid is tied with elastic thread for distalization

ACCESSORIES - To Facilitate Hemostasis and Bond Placement

OrthoSource manufactures all the chemicals, instruments and products you require for these techniques such as Green Syringe Etch for maximum visibility in a surgical field as well as producing hemostasis. Mini Tweezers in many styles for the placement of all attachments.The Optima Wire Cutter will efficiently trim the Gold Screen and cut the Gold Chain links. Elastic Thread which exactly fits the gold chain links for easy tying. All chemicals, attachments and supplies are available in kits or refill quantities.



DR. TAYLOR'S SUGGESTIONS TO PREVENT BONDING FAILURE

- 1. Hemostasis Flood operative field for 30 seconds and then suction away Green Phosphoric Acid Etch. Total hemostasis is when etch remains entirely green for 30 second interval without any black areas.
- "Bone Dry" Enamel After etching, suctioning, washing, and air drying, use the Mini Drier. Wave the Mini Drier back and forth across the tooth to be bonded for 5 seconds to eliminate all micro-moisture.
- Selection Use the largest attachment possible, but allow at least 1 mm, and preferably 2 mm, of clear space around it. This area serves as a moat to block sulcular fluids which interfere with adhesion.
- 4. Planning Plan and practice the path of insertion for the attachment before actually using the adhesive. After the Adhesive touches the Activator on the attachment, you have 10 seconds of Working Time.
- Pressure Place the attachment with the Micro Tweezer and then push the attachment tighly against the tooth for 10 seconds to extrude any excess. The thinner the adhesive layer, the stronger the bond.
- Resin Tags Should the bond fail, lightly polish the enamel surface with a bur to remove resin tags that might interfere with the next bonding. Re-etch, suction, wash, dry and bond again.
- Failed Attachments Do not reuse an attachment that has failed. The mesh surface has been contaminated with fluid, blood, and resin which will only lead to another failure.

SUPERBOND INSTANT TECHNIQUE

TAYLOR TECHNIQUE

GENERAL SUGGESTIONS FOR PLANNING IMPACTED CUSPID PROCEDURES:

- Locate the impacted tooth with several x-ray views and by palpation if possible. Since accurate location is 90% of the struggle, be certain before you start.
- Explain the procedure to the patient. Present any possible problems in writing for the patient's approval.
- 3. Plan surgical access with other professionals involved in the care of the patient. You may be more comfortable with orthodontic wires and anchorage supporting appliances removed. If they are in your way during surgery, do not hesitate to remove them yourself; they can always be remade or replaced later. Be ready for all possible problems you may need to place intra-coronal pins or control excessive bleeding.
- 4. Prepare for every step in the procedure. Practice extruding the chemicals and be certain that you are holding the attachment exactly as it will be placed. You only have 10 seconds to place the attachment and that goes rather quickly!!
- Once you have achieved hemostasis, you must work rapidly and efficiently to bond the attachment before bleeding reoccurs. Time is always your enemy!
- Be certain to have adequate materials extra adhesive, applicators, etch and attachments. Even your favorite courier service can not deliver to your office in 15 minutes!
- Calculate the maximum amount of time required for the procedure and all possible problems double this
 time on your schedule!

1. Gold Cleat with Gold Chain

The treatment sequence is: (1) location; (2) exposure; (3) uncovering; (4) selecting attachment; (5) etching and hemostasis; (6) washing and drying; (7) applying Activator and Adhesive; (8) holding attachment 10 seconds; (9) tying attachment; and (10) final hemostasis and suturing.

The 4 mm diameter Gold Cleat was selected as the attachment. Because a 1 mm border of tooth structure around the attachment was required, the Gold Button would have been too large. The Gold Screen was not needed since the available labial surface was relatively large.

An attachment with Gold Chain was necessary since soft tissues will be sutured over the Gold Cleat. Elastic thread will be tied through the last link and the chain cut and retied every three weeks until the tooth is in place.

If possible, have several of each attachment available and extra chemicals on hand. If an attachment becomes covered with blood or resin, you certainly do not want to waste valuable time cleaning it.



1. Pre-Surgery. The impacted cuspid can be palpated labially between #9 and 10 above the attached gingiva.



2. Incision. A full thickness flap is incised 2 teeth on either side of the impacted tooth.



3. Elevation. Use the fine point of a periosteal elevator to lift the flap without tearing.



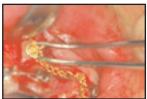
4. Elevation. Use the large end of the periosteal elevator to raise the periosteum cleanly off the maxilla.



5. Exposure. While retracting the tissue, expose the impacted tooth by removing overlying bone and soft tissue.



6. Visualization. A lip retractor and tongue shield not only make the procedure easier for doctor and patient but also reduce the post-operative sequelae.



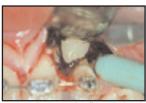
7. Selection. Determine the maximum size attachment for the tooth. Here a 4 mm Gold Cleat is ideal. Wash and dry the attachment before bonding.



8. Etch. The Green Syringe Etch contrasts with the tissue. Use a disposable tip for accurate placement.



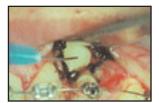
9. Suction. Remove etch with suction tip before washing to prevent etch splatter. Repeat etch as needed for hemostasis.



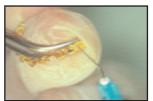
 Washing. Wash off residual etch with a minimal amount of water and continuous suction.



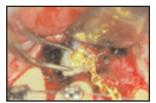
11. Drying. Dry labial surface with gentle direct air, placing tip on enamel to avoid splatter. Note total hemostasis.



 Activator. Apply small amount of activator to center of etched dry labial surface with needle applicator.



13. Adhesive. Holding attachment exactly as it will be placed, apply minimal amount of Activator and small amount of Adhesive Paste.



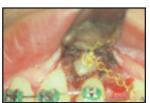
14. Bonding. Press attachment tightly against labial surface for 10 seconds. Allow three minutes for final set of adhesive.



 Elastic. Place elastic thread through chain about 2 chain link distance from archwire.



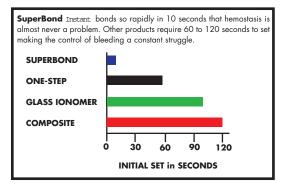
16. Chain. Hold end of chain with hemostat and cut excess chain links with Optima Wire Cutter.



17. Tied. Tie elastic thread to archwire to begin traction in the desired direction.



18. Suture. Carefully suture soft tissues to presurgical positions. Gold Chain exits flap and is tied to archwire with elastic thread.



SUPERBOND INSTANT TECHNIQUE

2. Gold Screen with Gold Chain

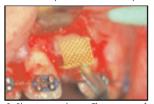
It is no longer necessary to remove large amounts of soft tissue and bone to expose the tooth surface of impacted teeth for bonding attachments. The Gold Screen Mesh can be trimmed to fit any available small tooth surface and then bent to fit and be bonded to an additional adjacent surface forming a "V" for maximum strength. Here the attachment is trimmed to fit as much of the labial surface as available plus an additional 1 mm across the incisal onto the palatal surface forming a "V" for optimal retention. The hook for tying the elastic traction is easily positioned on the palatal side of the tooth to avoid any soft tissue interference after the flap is sutured back into place.



1. Pre-op. The impacted maxillary left central incisor was located both on x-ray and palpated labially.



2. Uncovered. Using the usual 2 tooth extension on either side, the tooth was exposed labially and incisally.



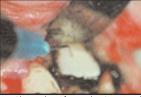
3. Planning attachment. The trimming of the Gold Screen Mesh was planned to cover both labial and incisal surfaces.



4. Trimming. The Optima Wire Cutter is the ideal instrument to trim the Gold Screen Mesh



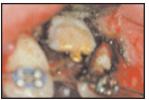
5.Checking. The attachment is checked to be certain that 1 mm of margin is clear around and that the incisal is also covered



6. Chemicals. After etch, SuperBond Instant Activator is placed with the needle applicator followed by the Adhesive



7. Reverse Tweezer. Using the Reverse Tweezer, the attachment is held tightly against the tooth for 10 seconds and then released.



8. Bonded. The adhesive has locked into the Gold Mesh and bonded to the etched tooth surface.



9. Measuring Coil. An open coil spring is placed to both open the space and to serve as an area for tying the elastic



10. Tied-in. The flap has been sutured in place and immediate traction is begun with the elastic thread.

3 Gold Button with Gold Chain

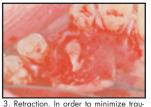
Impacted palatal cuspids are the most commonly encountered cases. They can be difficult to bond due to problems of access and hemostasis and orthodontically often must be dragged over relatively large distances. SuperBond Instant's features such as its rapid 10 second initial set will help you avoid the bleeding which will prevent bonding and its amazing strength will hold attachments in place while the tooth is moved for many months. Always select the largest attachment that will fit and be certain to have the option to return at a subsequent appointment to rebond if required by leaving a window. Hemostasis during and after the procedure is critical.



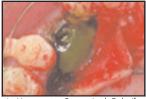
1. Pre-op. Location of impacted maxillary cuspid has been determined by several x-ray views.



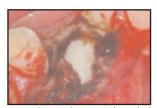
2. Incision. A full thickness palatal flap is made at least 2 teeth mesial and distal to the impacted cuspid.



ma to the soft tissue, the flap is tied to the opposite arch.



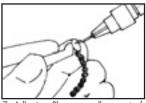
4. Hemostasis. Green Acid Etch (for contrast) is used to control bleeding. Repeat as needed



5. Washing and Drying. The etched tooth surface is washed and meticulously dried prior to bonding.



Activator. Appy the SuperBond Instant Activator to the dried tooth and mesh of attachment



Adhesive. Place a small amount of SuperBond Adhesive Paste on mesh of attachment on top of Activator.



8. Bonding. Hold for 10 seconds and then wait 3 minutes to tie to archwire



9. Palatal Window. In case rebonding is required, the palatal tissue over the impacted tooth is removed for later access



10. Sutures. The flap has been sutured in place after total hemostasis is secured.

SuperBond Instant Kits with Gold Attachments and Accessories

1. Introductory: A sample kit to get started

Cat No. 557-771

- 1 SuperBond Instant kit
- 10 Applicators
- 1 Green Syringe Etch & 25 tips
- 6 Gold Attachments with Chain 4 Gold Standard 5 mm Button with Chain

 - 2 Gold Mini 4 mm Button with Chain

Value \$172.00

Price \$135.00

20% Savings

Kits offer substantial discounts over item pricing 2. Operatory: An adequate supply of items

Cat. No. 557-772

- SuperBond Instant kit
- 20 Applicators
- 2 Green Syringe Etch & 25 tips
- 18 Gold Attachments with Chain
 - 12 Gold Standard 5 mm Button with Chain
 - 6 Gold Mini 4 mm Button with Chain
- Clear Elastic Thread 25 ft.(7.5m) Optima Wire Cutter Plier
- Adult Lip Retractor
- 1 Tongue Block set

Value \$392.50

3. Surgery office: For all large practices Cat. No. 557-773

- 2 SuperBond Instant kits
- 40 Applicators
- 6 Green Etcfh Syringes & 50 tips
- 45 Gold Attachments:
 - 30 Gold Standard 5 mm Button with Chain 12 Gold Mini 4 mm Button with Chain
 - 3 Gold Screen Mesh with Chain
- 2 Clear Elastic Thread 25 ft (7.5m)
- Optima Wire Cutter Plier
- 2 Adult Lip Retractor Child Lip Retractor
- 1 Tongue Block set

Value \$857.00

Price \$590.00

25% Savings

Price \$295.00

CUSPID BONDING SUPPLIES

SuperBond Instant - Self Cure

- Self Cure bonds attachments to impacted teeth in 10 seconds.
- Kit includes 1.2cc Activator syringe and 1.2 cc Adhesive syringe.
- 10 applicator needles.
- Instructions included. Cat. No. 557-764

1 kit - \$ 65.00 each 3 kits - \$ 60.00 each 5 kits - \$ 55.00 each



COMPONENTS:

SuperBond Kit Cat. No. 557-754

SuperBond Instant Activator only - Cat. No. 557-765 - \$35.00 each SuperBond Instant Adhesive only - Cat.No. 557-766 - \$35.00 each

Gold Chain and Gold Wire

- Gold Chain for cuspid traction.
- 12 " (30 cm) length.

Cat. No. 248-040

45.00 each



• Gold Wire for tying attachments.

• 12 " (30 cm) length.

Cat. No. 248-045

10.00 each

Gold Chain Cat. No. 248-040

Disposable Tips for Etch

 Perfectly fit onto 12 gm etch syringe to provide exact placement of etch.

Cat. No. 557-242

50 tips - \$ 8.00 each 100 tips - \$15.00 each



Autoclavable Lip Retractor

- · Retracts lips and cheeks for bonding procedures.
- Soft flexible plastic for patient comfort.
- Autoclavable in paper bag.

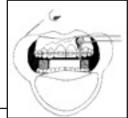


Standard Expander Cat. No. 822-444

1 to 4 expanders - \$ 6.00 each 5 to 9 expanders - \$ 5.40 each 10 + expanders - \$ 5.00 each



Mini Expander Cat. No. 822-666



Coordinated use of Lip Retractor and Tongue Block

Tongue Block

- Prevents the tongue from interfering when etching and bonding.
- Bite block provides for patient's comfort during long procedures.
- Four assorted sizes per pack.

Cat. No. 822-111

1 to 4 packs - \$ 7.00 each packs - \$ 6.00 each



CuspidBond - Light Cure

- Light Cure bonds attachments to impacted teeth in 10 seconds.
- Kit includes 1.2cc Primer syringe and 1.2 cc Adhesive syringe.
- 10 applicator needles.
- Instructions included. Cat. No. 557-754

1 kit - \$ 65.00 each 3 kits - \$ 60.00 each 5 kits - \$ 55.00 each



COMPONENTS:

CuspidBond Kit Cat. No. 557-754

CuspidBond Primer only - Cat. No. 557-755 - \$35.00 each CuspidBond Adhesive only - Cat.No. 557-756 - \$35.00 each

gm Green Syringe Etch

- For etching apply to tooth enamel for 30 seconds.
- 1. Apply copiously to tooth and all hard and soft tissues for 30 seconds.
- 2. Suction all etch away do not wash.
- 3. Reapply etch to entire operative field until edges of etch remain green (not black where bleeding continues).
- 4. Suction, wash and meticulously dry.

CAT. NO. 557-618



1 to 9 syringes - \$ 6.00 each 10 + syringes - \$ 5.50 each

Mini Bonding Tweezers

- · Easily picks up and securely holds all attachments.
- 5 different styles cover all placement situations.

1 to 4 - \$ 22.00 each 5 to 9 - \$ 20.00 each 10 + - \$ 18.00 each



Fine tips securely hold the tiniest attachment



Short - Cat. No. 878-020



Long - Cat. No. 878-021



Angled 30° - Cat. No. 878-022



Curved 45° - Cat. No. 878-023



Bayonet - Cat. No. 878-024

SPECIAL

Cat No 878-030

Five **Tweezers**

> One of each style

\$ 90.00

ROOT TEASERS and ELEVATORS

Heidbrink Root Tip Teasers

- Unique instruments for teasing out root tips from alveoli and canals.
- Heidbrinks have a special curved point for insertion into the ligament space for gentle lifting.
- Each instrument has a right and left side to work mesially and distally.
- Heidbrinks are NOT ELEVATORS the fine tips will fracture; use with a gentle lifting and pulling force.
- Instruments with bent or dull tips should be replaced.

Cat. No. 875-001 Heidbrink #1 - 9.50 each Cat. No. 875-002 Heidbrink #2 - 9.50 each Cat. No. 875-003 Heidbrink #3 - 9.50 each

SPECIAL

1 set 3 Heidbrink Cat. No. 875-000 One of each size List \$28.50 for \$25

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	SIZE	WIDTH	CAT. NO.
	1	1.2 mm	875-001
	2	1.5 mm	875-002
	3	1.8 mm	8 <i>75</i> -003

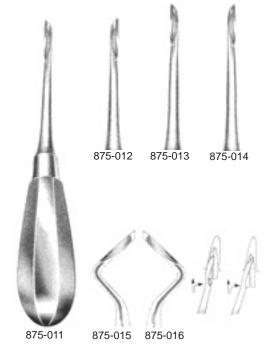
Kopp Elevators • Ultra this tip to enter ligament

- Ultra thin tip to enter ligament space.
- Razor-sharp tip also used to pierce root tip for extraction.
- Each instrument has a right and left side to work both mesially and distally.
- Place elevator in ligament space and use a circular motion to extract root tip.
- Bent or dull tip instruments should be replaced.

Cat. No.	875-011	Kopp Left -	21.00	each
Cat. No.	875-012	Kopp Right -	21.00	each
Cat. No.	875-013	Kopp Left Long -	21.00	each
Cat. No.	875-014	Kopp Right Long -	21.00	each
Cat. No.	875-015	Kopp 45° Right -	21.00	each
Cat. No.	875-016	Kopp 45° Left -	21.00	each

SPECIAL

1 set 6 Kopp Cat. No. 875-010 One of each style List \$160 for \$150



Claw Elevators

- Razor sharp tip for piercing mandibular molar interseptal bone and lifting root tip.
- Each instrument has a right and left side to work both mesially and distally.
- Bent or dull tip instruments should be replaced.

Cat. No. 875-021 Right Hand Claw Elevator - 35.00 each Cat. No. 875-022 Left Hand Claw Elevator - 35.00 each

SPECIAL

1 set 2 Claw Cat. No. 875-020 One of each style List \$70 for \$63



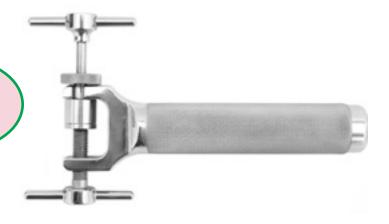
Bone Mill

- A compact quality bone mill that is easy and safe to operate and ECONOMICAL.
- The all stainless steel parts are simple to assemble and completely disassemble in order to autoclave.
- Reduces cortical and cancellous bone to desired particle size by varying gentle hand grinding pressure.
- Resulting bone particles are used for supporting implants, augmentation, and repair.

Cat. No. 875-040 - 350.00 each

SPECIAL

Bone Mill Totally Autoclavable



Sutures with Swaged Needles

- Individual packs of sterilized suture material with swaged needle.
- Each sterilized suture pack contained in see through clear sterile envelope.
- 12 suture packs per box.



Silk Black Braided, 12 Packs per Box

ONE BOX 12 SUTURES	6 BOXES EACH AT:	O.S.SOURCE CAT. NO.	SUTURE SIZE	NEEDLE CODE	NEEDLE STYLE	NEEDLE SHAPE	NEEDLE LENGTH	SUTURE LENGTH	LOOK CODE	ETHICON CODE	NEEDLE IMAGE
16.43	15.88	856-101	3-0	C-43	Reverse	1/2 Cir	16 mm	18"	778B	7762	PS-4
16.43	15.88	856-102	3-0	C-9	Reverse	1/2 Cir	23 mm	18"	785B	632G	X-1
16.43	15.88	856-103	3-0	C-6	Reverse	3/8 Cir	18 mm	18"	784B	7772	FS-2
16.43	15.88	856-104	4-0	C-6	Reverse	3/8 Cir	18 mm	18"	781B	683G	FS-2
19.90	19.23	856-105	5-0	C-6	Reverse	3/8 Cir	18 mm	18"	791B	682G	FS-2
44.09	42.61	856-106	4-0	C-3	Reverse	3/8 Cir	13 mm	18"	792B	641G	P-3
44.09	42.61	856-107	5-0	C-3	Reverse	3/8 Cir	13 mm	18"	793B	640G	P-3
19.80	19.14	856-108	3-0	C-7	Reverse	3/8 Cir	24 mm	18"	786B	684G	FS-1
19.80	19.14	856-109	6-0	C-22	Reverse	3/8 Cir	16 mm	18"	790B	1675H	PS-3

Gut Plain, 12 Packs per Box

ONE BOX 12 SUTURES	6 BOXES EACH AT:	O.S.SOURCE CAT. NO.	SUTURE SIZE	NEEDLE CODE	NEEDLE STYLE	NEEDLE SHAPE	NEEDLE LENGTH	SUTURE LENGTH	LOOK CODE	ETHICON CODE	NEEDLE IMAGE
18.49	17.87	856-201	3-0	C-9	Reverse	1/2 Cir	23 mm	18"	594B	612G	X-1
45.99	44.45	856-202	5-0	C-3	Reverse	1/2 Cir	13 mm	18"	596B	686G	FS-2
22.49	21.74	856-203	3-0	C-6	Reverse	3/8 Cir	18 mm	27"	554B	H822G	FS-2
22.49	21.74	856-204	4-0	C-6	Reverse	3/8 Cir	18 mm	27"	551B	H821G	FS-2
18.49	17.87	856-205	4-0	C-6	Reverse	3/8 Cir	18 mm	18"	591B	7771	FS-2

Gut Chromic, 12 Packs per Box

ONE BOX 12	6 BOXES	O.S.SOURCE	SUTURE	NEEDLE	NEEDLE	NEEDLE	NEEDLE	SUTURE	LOOK	ETHICON	NEEDLE
SUTURES	EACH AT:	CAT. NO.	SIZE	CODE	STYLE	SHAPE	LENGTH	LENGTH	CODE	CODE	IMAGE
22.49	21.74	856-301	3-0	C-6	Reverse	3/8 Cir	18 mm	27"	560B	636G	FS-2
22.49	21.74	856-302	4-0	C-6	Reverse	3/8 Cir	18 mm	27"	559B	635G	FS-2
44.99	43.48	856-303	5-0	C-3	Reverse	3/8 Cir	18 mm	18"	1248B	687G	P-3
22.49	21.74	856-304	3-0	C-6	Reverse	3/8 Cir	18 mm	18"	525B	N/A	FS-2
22.49	21.74	856-305	4-0	C-6	Reverse	3/8 Cir	18 mm	18"	558B	N/A	FS-2

Polyester - Green Braided, 12 Packs per Box

ONE BOX 12	6 BOXES	O.S.SOURCE	SUTURE	NEEDLE	NEEDLE	NEEDLE	NEEDLE	SUTURE	LOOK	ETHICON	NEEDLE
SUTURES	EACH AT:	CAT. NO.	SIZE	CODE	STYLE	SHAPE	LENGTH	LENGTH	CODE	CODE	IMAGE
31.49	30.44	856-401	5-0	D-14	Dia Point	1/2 Cir	18 mm	18"	797B	N/A	RB-1

Black Mono Nylon, 12 Packs per Box

	, .	•									
ONE BOX 12	6 BOXES	O.S.SOURCE	SUTURE	NEEDLE	NEEDLE	NEEDLE	NEEDLE	SUTURE	LOOK	ETHICON	NEEDLE
SUTURES	EACH AT:	CAT. NO.	SIZE	CODE	STYLE	SHAPE	LENGTH	LENGTH	CODE	CODE	IMAGE
29.65	28.66	856-501	6-0	C-22	Reverse	3/8 Cir	16 mm	18"	915B	6665G	FS-1
28.95	27.98	856-502	5-0	C-6	Reverse	3/8 Cir	18 mm	18"	918B	661G	FS-2
28.80	27.83	856-503	4-0	C-6	Reverse	3/8 Cir	18 mm	18"	922B	662G	FS-2
28.95	27.98	856-504	3-0	C-7	Reverse	3/8 Cir	24 mm	18"	925B	663G	FS-1
60.53	58.50	856-505	5-0	C-3	Reverse	3/8 Cir	16 mm	18"	1285B	698G	PS-3

Polypropylene, 12 Packs per Box

ONE BOX 12 SUTURES	6 BOXES EACH AT:	O.S.SOURCE CAT. NO.	SUTURE SIZE	NEEDLE CODE	NEEDLE STYLE	NEEDLE SHAPE	NEEDLE LENGTH	SUTURE LENGTH	LOOK CODE	ETHICON CODE	NEEDLE IMAGE
46.30	44.75	856-601	6-0	C-22	Reverse	3/8 Cir	16 mm	18"	N/A	N/A	FS-1
46.30	44.75	856-602	5-0	C-6	Reverse	3/8 Cir	18 mm	18"	1018B	8661G	FS-2
46.30	44.75	856-603	4-0	C-6	Reverse	3/8 Cir	18 mm	18"	1022B	8683G	FS-2
46.30	44.75	856-604	3-0	C-7	Reverse	3/8 Cir	24 mm	18"	N/A	8664G	FS-1

Coated Vicryl Type - Violet Braided, 12 Packs per Box

ONE BOX 12 SUTURES	6 BOXES EACH AT:	O.S.SOURCE CAT. NO.	SUTURE SIZE	NEEDLE CODE	NEEDLE STYLE	NEEDLE SHAPE	NEEDLE LENGTH	SUTURE LENGTH	LOOK CODE	ETHICON CODE	NEEDLE IMAGE
34.75	33.59	856-701	5-0	C-6	Reverse	3/8 Cir	18 mm	18"	N/A	J391H	FS-2
34.75	33.59	856-702	4-0	C-6	Reverse	3/8 Cir	18 mm	18"	N/A	J392H	FS-2
34.75	33.59	856-703	3-0	C-6	Reverse	3/8 Cir	18 mm	18"	N/A	J393H	FS-2
34.75	33.59	856-704	2-0	C-21	Reverse	1/2 Cir	26 mm	27"	N/A	J869H	FS
39.68	38.35	856-705	2-0	T-5	Тар	1/2 Cir	20 mm	27"	333B	J328H	CT-3
39.68	38.35	856-706	3-0	T-5	Тар	1/2 Cir	20 mm	27"	311B	J311H	SH-1

Coated Vicryl Type - Undyed Braided, 12 Packs per Box

ONE BOX 12	6 BOXES	O.S.SOURCE	SUTURE	NEEDLE	NEEDLE	NEEDLE	NEEDLE	SUTURE	LOOK	ETHICON	NEEDLE
SUTURES	EACH AT:	CAT. NO.	SIZE	CODE	STYLE	SHAPE	LENGTH	LENGTH	CODE	CODE	IMAGE
34.75	33.59	856-801	5-0	C-6	Reverse	3/8 Cir	18 mm	27"	421B	J421H	FS-2
34.75	33.59	856-802	4-0	C-6	Reverse	3/8 Cir	18 mm	27"	422B	J422H	FS-2
34.75	33.59	856-803	3-0	C-6	Reverse	3/8 Cir	18 mm	27"	423B	J433H	FS-2
59.40	57.41	856-804	6-0	C-3	Reverse	3/8 Cir	13 mm	18"	492B	J492H	P-3
59.40	57.41	856-805	5-0	C-3	Reverse	3/8 Cir	13 mm	18"	493B	J493H	P-3
59.40	57.41	856-806	4-0	C-3	Reverse	3/8 Cir	13 mm	18"	494B	J494H	P-3

"Sutures are a highly regulated product. The suture materials must conform to strict U.S.P. standards. All suture



needles come from the same manufacturer! Every package must be sterilized. All OralSurgerySource suture packs meet these requirements.

The only differences are the expensive and superficial brand name and image. If the products are the same, then the lowest price will be your best value."

Dr. Lloyd Taylor

Autoclavable Instrument Pouches

- Best quality transparent FDA and ADA approved pouch at an economical price!
- Pouches are "self-seal" for easy closure and to save time.
- Color changes on indicator after autoclaving.
- Packs of 200 pouches per size.





Cat. No.	SIZE	PRICE
810-001	2 1/4" x 5"	4.95
810-002	2 3/4" x 10"	5.50
810-003	3 1/2" x 6 1/2"	5.30
810-004	3 1/2" x 10"	5.50
810-006	4 1/4" x 12"	9.30
810-007	5 1/4" x 11"	9.95
810-008	7 1/2" x 13"	19.50
810-009	12" x 18"	64.95

Winged Infusion Sets

- Siliconized 3/4" needles with short bevels and three facet points to minimize chance of vein perforation during insertion.
- Kink resistant 12 inch PVC tubing.
- Sterilized with Ethylene gas; latex and pyrogen free.
- 100 pieces per box.

Gauge	100 pack
19	8 <i>57-</i> 019
21	857-021
23	8 <i>57</i> -023
25	857-025

1 to 2 boxes - **\$40.00 each** 3 to 4 boxes - **\$35.00 each** 5 plus boxes - **\$30.00 each**



Safety Infusion Sets

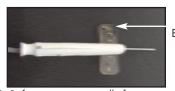
- Same item as Winged Infusion Set, but with addition of safety tube to hold withdrawn needle.
- On withdrawal from vein, 3/4" needle slides into unique locking safety tube to minimize chance of operator injury.
- Kink resistant 12 inch PVC tubing.
- Sterilized with Ethylene gas; latex and pyrogen free.
- 100 pieces per box.

1 to 2 boxes - \$90.00 each

3 to 4 boxes - \$85.00 each

5 plus boxes - \$80.00 each

ſ	Gauge	100 pack		
I	19	857-119		
	21	857-121		
ı	23	8 <i>57</i> -123		
	25	8 <i>57</i> -12 <i>5</i>		



 Before removing needle from vein, remove tape from butterfly and slide safety tube down over butterfly.



2. Gently pull PVC tubing to withdraw needle and butterfly into safety tube where they will lock.

Aspirating Syringe - Astra Type

• Astra type aspiring local anesthetic syringe.

Cat. No. 876-101

1 to 4 - \$ 12.00 each

5 to 9 - \$ 11.00 each 10 plus - \$ 10.00 each



Aspirating Syringe - Cooke-Waite

• Cooke-Waite type aspiring local anesthetic syringe.

Cat. No. 876-102

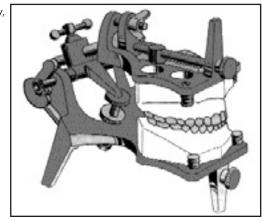
1 to 4 - \$ 12.00 each 5 to 9 - \$ 11.00 each 10 plus - \$ 10.00 each



Adjustable

- Models are easily, quickly, and firmly mounted on articulator.
- Does not require plaster or any other accessories.
- Provides full range of adjustable jaw motion.
- Ideal for instant set-up and occlusal check such as orthognathic surgery.
- Appliances like splints and nightguards can be processed directly on articulator.

CAT. NO. 846-440 **1 - \$185.00**



Intra Ligament Syringe

- A unique syringe for intraligament, intrapulpal, and intraosseous injection of carpule anesthetics.
- Unique ratchet design allows for dispensing minute amounts of anesthetic under high pressure resulting in profound anesthesia with little or no discomfort.
- Allows one tooth anesthesia eliminating the lip, tongue and cheek anesthesia of blocks.
- Available in either "pistol" style or hand held model.

Cat. No. 861-103 Intra Ligament Syringe - "pistol" style - **\$77.00 each**Cat. No. 861-104 Intra Ligament Syringe - hand held model **\$79.00 each**



876-103

EDUCATION MODELS & SUPPLIES

Very Appreciated Gifts

for Referring Dentists

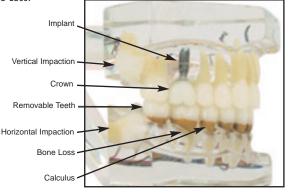
Implant/Third Molars/Pathology Model

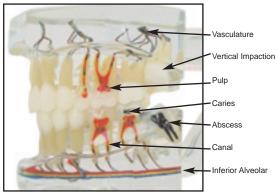
- Beautifully articulated Implant/Patholgy model.
- Maxillary Right Molar Implant and Crown.
- Four Impacted Third Molars.
- Removable Teeth with Calculus and Bone Loss.
- Pulp and Root Canal anatomy.
- Decay and Pulpal Abscess.
- Suggested Vasculature.

Cat. No. 840-186

1 - 145.00

BUY 5 OR MORE IMPLANT MODELS for only 125.00 EACH





Topical Anesthetic 30 gm jars

Let your patients chose their favorite flavor from these six delicious topical anesthetic gels. Apply the 20% benzocaine gel to mucous membranes with a cotton applicator to produce rapid and profound topical anesthesia in about ten seconds.

SPECIAL - all six flavors

Cat. No. 588-607

\$18.00

588-601	Mint	30 ml jar
588-602	Bubble Gum	30 ml jar
588-603	Banana	30 ml jar
588-604	Strawberry	30 ml jar
588-605	Piña Colada	30 ml jar
588-606	Cherry	30 ml jar

1 - 3.50 each



Six Delicious Topical Anesthetic Gels

Excel Slow Speed Handpieces

Our Micromotor revolving at 5,000 to 20,000 rpm will cover all your slow speed needs. The Latch Contra Angle and Straight Handpiece can be run forward and reverse. All parts are autoclavable. An external water cooling line can be attached to either head.

874-524 Micromotor 4 hole 1 - 148.00 3 - 141.00 874-522 Micromotor 2 hole 1 - 148.00 3 - 141.00 874-531 Latch Contra Angle

1 - 95.00 3 - 90.00 874-532 Straight Handpiece 1 - 110.00 3 - 100.00

Straight Handpiece Attachment

Latch Contra Angle

SPECIAL

SLOW SPEED HANDPIECE PLUS STRAIGHT AND CONTRA

\$325



Micromotor 5,000 to 20,000 rpm

Light Curing Unit

- · Rapid and complete curing with 75 watt, 12 volt halogen lamp.
- Autoclavable light guide with 360° turn.
- Individual curing times with beep tone.
- Automatic fan to prevent bulb burn out.
- Available 110 or 220 volt.

110 volt - CAT. NO. 855-380 220 volt

LIST \$399

SPECIAL \$299.00



Caries Development Model

- Contains four large removable hemisectioned teeth in sturdy base.
- Teeth open into 2 parts showing enamel, dentin and pulp.
- Demonstrates: (1) No Caries; (2) Incipient Enamel Caries; (3) Dentin Caries; and (4) Pulp Exposure.

5 OR MORE for only 95.00 EACH



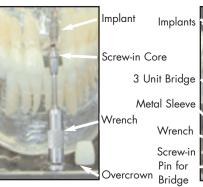
Caries Development Model 840-185 1 - 140.00

EDUCATION MODELS

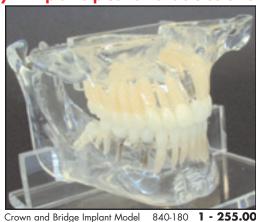
Life-Size Crown & Bridge Implant Model

- Unique anatomic implant model on base with complete mandible and condyles, hinged maxilla which opens, maxillary sinus, zygoma, and nasal floor.
- Clear plastic allows total visualization of teeth and roots so that patient can appreciate anatomic considerations for implant place-
- Upper Left Central Implant has removable core which unscrews plus esthetic overcrown.
- Lower Right Three Unit Bridge has two implants which hold prosthesis by two removable screws. Crowns have metal sleeves to guide screws into implants. Wrenches are extra.

- 1. Completely transparent maxilla and mandible show implants.
- 2. Maxillary implant has screw-in core plus esthetic overcrown.
- 3. Mandibular bridge held by 2 implants plus removable screws.







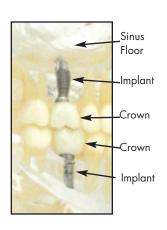
Life-Size Upper and Lower First Molar Implants and Crowns

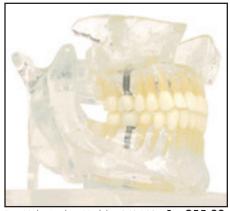
- Unique anatomic implant model on base with complete mandible and condyles, hinged maxilla which opens, maxillary sinus, zygoma, and nasal floor.
- Clear plastic allows total visualization of teeth and roots so that patient can appreciate anatomic considerations for implant place-
- Upper Right and Lower Right First Molar implants with Crowns in Ideal Occlusion.
- The need for adequate bone as well as anatomic limitations can easily be shown to patients.

LIFE-SIZE IMPLANT MODELS:

- 1. Full Maxilla Maxillary Sinus, Nasal Floor, Zygoma.
- 2. Full Mandible Lingula, Mental Foramen, Condyles, Inferior Alveolar.
- 2. Articulated Hinge Ideal Class I Occlusion.
- 3. Large Clear Acrylic Base.

- 1. Transparent maxilla and mandible show implants.
- 2. First Molar Implants and Crowns in perfect occlusion.
- 3. Patients can understand the need for adequate bone.





840-183 **1 - 255.00** First Molar Implant Model

Over Denture Implant Model

- Clear mandibular model with two implants in cuspid areas.
- Complete mandibular denture with embedded female attachments that snap fit onto male attachments which are screwed into implants.

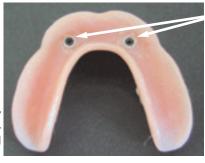
Cat. No. 840-181 1 - 220.00



Custon Over Denture is firmly held on model attachments and implants. Patient can practice removing prosthesis to appreciate the secure retention and 14 stability patient desires for his lower denture.

Over Denture Implant Model:

- 1. Provides patient the opportunity to test security and stability of implant prosthesis.
- 2. Appliance can be removed to appreciate the frictional fit of male and female attachments.

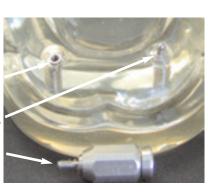


Female Attachments

Implant without Male Attachment

Implant with Male Attachment

Male Attachment removed by wrench



Demonstrates the surgical attachments and also the

orthodontic procedure for treating impacted cuspids.

Labial and Palatal Impacted Cuspids with Gold Buttons and Chain

- Labial and Palatal impacted cuspids with bonded gold buttons are both demonstrated on the same model.
- Full arch orthodontic appliance with cuspids tied to archwire.
- Complete root model demonstrates surgical and orthodontic treatments.

Cat. No. 840-121 1 - 195.00

Cat. No. 840-121 Labially impacted cuspid with bonded Gold Button and Chain tied to archwire.

Cuspid Root

Bonded Gold Button with Chain

Elastic thread to Gold Chain

Space holding archwire



Cat. No. 840-121 Palatally impacted cuspid with bonded Gold Button and Chain tied to archwire.

Space holding archwire Elastic thread

to Gold Chain Bonded Gold Button with Chain

Cuspid Root



Cat. No. 840-121 Articulated Impacted Cuspid Model with labial and palatal bonded Gold Buttons with Chain and orthodontic appliance.

Impacted Third Molar Model

- Class I Ideal model to demonstrate the need for and technique of removal of impacted third molars.

- Four Impacted Third Molars easily seen in beautiful clear anatomic model on base. Full Maxilla with Nasal Cavity, Maxillary Sinuses and Zygomas. Mandible articulates and can be totally removed from model for lingual visualization.

Patients can instantly understand the need for removal of Impacted Third Molars to maintain their ideal occlusions.



Maxillary Vertical Impaction



Impacted Third Molar Model Mandibular Horizontal Impaction Articulated Mandible Can Be Removed



Impacted Third Molar Model Cat. No. 840-190 1 - \$245.00



Maxillary Vertical Impaction Mandibular 45° Impaction

Vascular Models

- Demonstrate artery, vein and nerve innervation of the bone and teeth.
- Excellent for explaining anesthetic techniques, surgery and pain.
- Shows direct pathway from periapical area into the pulp.
- Large model includes movable full mandible with lingula and inferior alveolar artery, vein and nerve.



Small Vascular Model Cat. No. 840-131 1 - 145.00



Ramus of Large Vascular Model Cat. No. 840-132



Large Vascular Model Cat. No. 840-132 1 - 245.00

ANATOMIC IMPLANT MODELS

Consultations will have meaning and be accepted when patients can see and touch similar problems.

Life-Size Crown and Bridge Implant Model with Vasculature

- Unique anatomic implant model on base with complete mandible and condyles, hinged maxilla which opens, maxillary sinus, zygoma, and nasal floor.
- Clear plastic allows total visualization of teeth and roots so that patient can appreciate anatomic considerations for implant placement.
- Upper Left Central Implant has removable core which unscrews plus esthetic overcrown.
- Lower Right Three Unit Bridge has two implants which hold prosthesis by two removable screws. Crowns have metal sleeves to guide screws into implants. Wrenches are extra.

Crown and Bridge Implant Model:

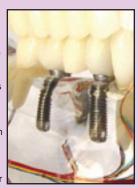
- 1. Completely transparent maxilla and mandible show implants.
- 2. Maxillary implant has screw-in core plus esthetic overcrown.
- 3. Mandibular bridge held by 2 implants plus removable screws.

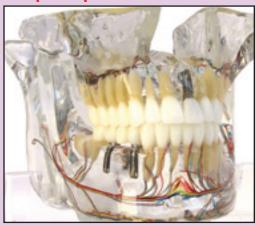


Nasal
Floor 3 Unit
Bridge
Implant
Implants

Post Mental
Foramen

Crown
Inferior
Alveolar





Crown and Bridge Implant Model 840-182 1 - 295.00

These spectacular articulating anatomic models with the maxillary sinus and vasculature allow patient to "see" what you are explaining to them. The implants with single and multiple crowns and bridge show them the advantages of implant dentistry over traditional tooth preparation and bridges.

Life-Size Upper and Lower First Molar Implants and Crowns with Vasculature

- Unique anatomic implant model on base with complete mandible and condyles, hinged maxilla which opens, maxillary sinus, zygoma, and nasal floor.
- Clear plastic allows total visualization of teeth and roots so that patient can appreciate anatomic considerations for implant placement
- Upper Right and Lower Right First Molar implants with Crowns in ideal occlusion.
- The need for adequate bone as well as anatomic limitations can easily be shown to patients.

Sinus Floor

1. Transparent maxilla and mandible show implants.

2. First Molar Implants and Crowns in perfect occlusion.

3. Patients can understand the need for adequate bone.

Implant Crown

Crown

Implant



Molar Vascular Implant Model 840-184 1 - 295.00

LIFE-SIZE IMPLANT MODELS:

- 1. Full Maxilla Maxillary Sinus, Nasal Floor, Zygoma.
- 2. Full Mandible Condyles, Mental Foramen, Inferior Alveolar.
- 3. Articulated Hinge Ideal Class I Occlusion.
- 4. Large Clear Acrylic Base.

SPECIAL

BOTH ANATOMIC IMPLANT MODELS (List \$590.00) with VASCULATURE

for only \$490.00



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