

endodontic posts

Instructions for Use

ENGLISH

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Dentatus

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Symbol	Explanation	Symbol	Explanation
***	Manufac- turer	R _X Only	Prescription use only
	Do not use if package is damaged	8	Do not re-use
REF	Catalogue number	LOT	Batch code
STERILE R	Sterilized using ir- radiation	<u> </u>	Use-by date
<u>М</u>	Date of ma- nufacture	i	Consult instructions for use
MD	Medical Device		Single ste- rile barrier system with protective packaging outside
STEPRIZE	Do not resterilize	5	Packa- ging unit contains 5 items

Material: Gold Plated Brass [#RSTS series] or

Titanium [#TSTS series].

Indication: Used by dental professionals to support and secure coronal restorations in endodontically treated teeth.

Contraindications: In patients suffering from bruxism or suspected bruxism, those with deep overbites, and those with insufficient crown to root ratio. Also, for patients with known allergy to material of the post.

Disposal: swwwPosts that have been removed from tooth structure should be cleansed and placed into the proper medical waste disposal container.



Surtex STERILE Posts are delivered sterile in perforated blister packs. Do not use if seal is broken or punctured. Do not resterilize. Intended for single use, thereby avoiding risk of infectious cross contamination.

Surtex accessories, including reamers & keys, are delivered factory clean and after removing their wrappings, they should be cleaned and sterilized in compliance with protocols before use for an aseptic procedure. All other instrumentation used in this clinical procedure should be autoclaved with steam sterilization prior to use. The health facility should validate its own autoclave steam sterilization machine in accordance with a recognized standard.

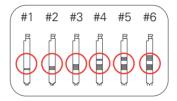
Extreme care should be observed to prevent accidental swallowing or aspiration of endodontic posts or other related small accessory components used in this procedure. Preventive practices (rubber dam, floss ties or throat pack) should always be utilized. If such an accident should occur, immediately contact a physician.

NOTE: These instructions inform the user about the recommended procedures when using Dentatus Surtex Sterile Endodontic Posts. They are intended for use by clinicians with a basic level of restorative dentistry and endodontic training. It is the responsibility of the clinician to stay informed, educated and trained. The printed guidelines, including Precautions and Notes, are to be regarded as additions to accepted clinical procedures and protocols.

Report any malfunction of our products to Dentatus without delay, but not later than 7 (seven) elapsed calendar days following the awareness of the event.

Surtex Sterile Post System is a complete tested system for retention of core materials in endodontically treated teeth. The System consists of reamers and specially fitted posts in different diameters and lengths, as well as materials. The posts are cemented temporarily or permanently in the prepared root canal. The anatomically shaped reamers and posts correspond to the natural morphology of the root canal. The system is to be used by trained dental professionals only. The Surtex surface texture offers improved retention and a nonglare appearance for improved esthetics.

DENTATUS STANDARD CLASSIC & HELIX CLASSIC REAMERS are designed to be used in standard contra-angles, at low speed, not exceeding 10,000 rpm. The shape of the post. Dentatus Reamers are available in various lengths, and in six different diameters, #1-6. Actual diameter is shown with corresponding number of grooves on the shank.



Contrary to the threading, Dentatus Surtex Sterile Posts are non-engaging; they are designed for passive cementation in root canals. The body of the post is 2/3rds cylindrical with a tapered anatomical end for extra length. The reamer system is size-matched to ensure passive seating; when utilizing a size 3 post with a size 3 reamer there is no engagement of the canal walls. This prevents tension build-up and risk of root fractures. The threading allows safe re-access to the canal and ease of retrieval, if the need arises. The threading also provides more surface area for better retention and allows excess cement a path to vent out.

How to use:

After endodontic therapy, root-filling material is removed to the predetermined depth with a Pathfinder, Gates-Glidden drill, Peeso reamer and/or hot instrument (Fig. 1). A minimum 4 mm of the root-filling material should remain apically. Radiographic verification is recommended.

The preparation should include at least 1.5 mm ferrule of sound tooth structure around the circumference of the preparation.

The preparation is commenced by using the Classic Reamers [#RUA or RUB series] with a slow speed contra-angle in sequential order until the desired preparation has been achieved (Fig. 2). Preparation depth can be controlled by using the Dentatus Stoppers for Depth Measuring [#MRA] on the reamers.

Choosing dimension:

The appropriate size post is a combination of the diameter of the reamer, the length of the canal, and the height of the crown. The size number of the post shall coincide with the last used reamer, the length shall be as long as possible without the post head interfering with shape, function and esthetic properties of the finished restoration. The fit in the root canal is confirmed without rotating the post. The prepared root canal shall be thoroughly cleansed and dried prior to cementation of the post (Fig. 3-4).

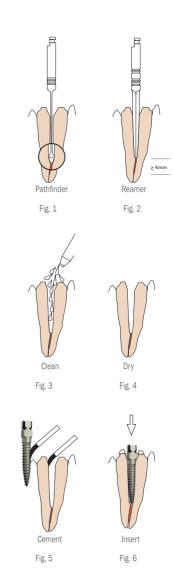
Use the dental cement of choice according to the manufacturer's instructions. The cement is applied on the threaded portion of the post and in the opening of the prepared root canal to coat the wall (Fig. 5). Use an instrument of choice (i.e.: locking tweezer) to slowly insert the post to full depth allowing excess cement to vent (Fig. 6). Radiographic verification is recommended.

NOTE:

The Hollow Key [#NLH] may be utilized to rotate the post passively, further spreading cement and eliminating hydraulic pressure. When the cement is completely set, the head of the post can be widened by the Cross Cut Key [#NLK] for extra retention of the core material.

After the cement has set, remove any excess before completing core preparation (Fig. 7) and fabricating final restoration (Fig. 8).

Provide the patients with post operative instructions on hygiene and maintenance. In the event of any malfunction, patients should contact their dental provider.





Core Preparation

Fig. 7

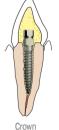


Fig. 8