

## Instructions for use » TemPRO 4 « (Bis-acrylic temporary crown & bridge material)

Bis-acrylic temporary crown & bridge material is a bis-acrylic based provisional crown and bridge material that is peroxide free and methylmethacrylate free. The tissue-friendly, low polymerization temperature prevents thermal damage to the pulp. Bis-acrylic temporary crown & bridge material incorporates a special snap-set curing characteristic and consequently has a long plastic working stage, during which the temporary restoration can be easily re-moved from the patient's mouth. Bis-acrylic temporary crown & bridge material is exceptionally fracture resistant and shade stable due to its outstanding mechanical properties and is therefore ideal for fabrication of long-term temporary restorations. Bis-acrylic temporary crown & bridge material guarantees a highly accurate fit of the finished temporary restoration with optimal marginal integrity. Bis-acrylic temporary crown & bridge material should be mixed in an automatic mixing unit.

### Indication

Temporary crowns, bridges, inlays, onlays, partial crowns, veneers, long-term temporary restorations

### Taking the impression

A study model impression should be taken using alginate or sili-cone before preparing for a crown or bridge or before a planned extraction. The interdental flash should be cut out to improve the stability of the temporary restoration to be fabricated at a later stage. In the case of alginate impressions, syringe the Bis-acrylic temporary crown & bridge material as soon as possible after taking the impression.

### Handling of double syringe

The double syringe automatically dispenses and mixes the material, which saves time when applying the luting material directly into the restoration. Remove the transport cap before using a new double syringe and then attach the mixing tip. Following application, the mixing tip acts as a seal and can be left on the double syringe until the next use. The mixing tip should only be replaced by a new tip when the double syringe is used again.

When using for the first time, discard the material initially extruded from the mixing tip (about the size of a pea). There is an optimal mixture after initial extrusion.

### Cartridge handling

The material is dispensed and mixed automatically by extruding through a mixing tip. Remove the transport seal before using a new cartridge. Then attach the mixing tip and, if required, a contouration tip. Following use, the mixing tip should be used as a seal and should be left on the cartridge until the next application. The mixing tip should only be replaced with a new one when the cartridge is to be used again.

When using for the first time, discard the material initially extruded from the mixing tip (about the size of a pea). There is an optimal mixture after initial extrusion.

### Recommended use and elastic phase

Dry the prepared teeth and coat the preparations, surrounding tissue and any existing acrylic with a separating agent (e.g. Vase-line). Syringe Bis-acrylic temporary crown & bridge material into the deepest section of the impression and then up to the gingival areas. Always keep the mixing tip immersed in the material to avoid bubbles. The Bis-acrylic temporary crown & bridge material has a firm, elastic consistency approximately 2 to 3 min after mixing and can be easily removed from the patient's mouth. The curing process must be monitored intraorally (e.g. with a probe), as the temporary restoration can only be easily removed during the elastic phase.

## Final curing and preparation

Bis-acrylic temporary crown & bridge material cures fully in 3 min extraorally. The temporary restoration should be replaced in the impression during the final curing phase. Prepare and polish the temporary restoration after removing the oxygen inhibition layer with a solvent (e.g. alcohol). Commercially available temporary cements (e.g. Temporary luting cement) can be used for luting.

## Repair of the temporary restoration

A feature of temporary restorations fabricated using Bis-acrylic temporary crown & bridge material is their high mechanical strength. If a temporary restoration should fracture however, we recommend the following procedure:

### Fracture of the temporary restoration shortly after fabrication:

Bond the fracture sections with freshly mixed Bis-acrylic temporary crown & bridge material.

### Fracture of an older or in situ temporary restoration:

Roughen the fractured sections and prepare undercuts. Bond the prepared fracture sections with freshly mixed Bis-acrylic temporary crown & bridge material. We recommend using a composite bonder (e.g. Varnish & Bond) to improve the bond. Press the sections together for approx. 3 min.

### Please note

In individual cases a hypersensitivity to components of the material cannot be ruled out. Stop using the material in those cases.

Avoid skin contact with the paste. On accidental contact, wash with soap and water. On contact with the eyes, rinse immediately with plenty of water and consult a doctor.

## Technical data

Compressive strength  $\geq$  200 MPa

Flexural strength  $\geq$  60 MPa

Diametrical tensile strength  $\geq$  31 MPa

Water absorption  $\leq$  25  $\mu\text{g}/\text{mm}^3$

## Working sequence

0 min Syringe into the impression.

0- 45 s Insert the impression intraorally.

2-3 min Remove from the patient's mouth.

6 min Remove the oxygen inhibition layer with a solvent.

6-7 min Preparation, contouring and polishing.

## Composition

Glass filler materials in a matrix of multifunctional methacrylates; catalyst, stabilizers, additives. Free of methyl methacrylate and peroxides. Filler content: 47 % by weight = 26% by volume. The variation width of the inorganic filler particles is between 0.02 and 2.5  $\mu\text{m}$

## Storage

Store at room temperature (15-25 °C / 59-77 °F).

Do not use after date of expiry.

**Keep away from children! For dental use only!**