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REVOTEK LC

LIGHT-CURED RESIN FOR TEMPORARY CROWN, BRIDGE, INLAY & ONLAY
REVOTEK LC is a new light-cure single-component sculptable composite resin for temporary inlays, onlays, crowns and bridges.
 For use only by a dental professional in the recommended indications.

RECOMMENDED INDICATIONS
 Fabrication of temporary crowns, bridges, inlays and onlays.

CONTRAINDICATIONS
 In rare cases the product may cause sensitivity in some people. If such any reactions are experienced, discontinue the use of the product and refer to a physician.

DIRECTIONS FOR USE
DIRECT METHOD (on the patient's mouth)
 A. Temporary Crowns & Bridges

1. Transfer of putty stick to the storage case
 Transfer the putty stick from the aluminum foil pack into the storage case provided in the Introductory Set.
 Note:
 1) When putty stick is transferred to the storage case or is dispensed, handle with care in order to prevent contamination.

2) If the storage case is used repeatedly, fine abrasion fragments may be produced from the lid because of the structure of the case. When the lid is replaced, make sure that the inside of the case is clean. If it is dirty, clean with cotton moistened with alcohol.

2. Dispensing material
 Dispense the required amount of material using the spatula. Adjust the shape of the material in such a way so to ensure that the mass of material fits into the space between the abutment and the adjacent tooth. It is effective to shape the material in advance so that it goes into the space easily (Picture A-3a), or put another paste in the space before the mass is pressed into the abutment (Picture A-3b).

3. Preparation for pressing material onto the abutment
 Press the material roughly onto the abutment and roughly contour with the fingers or spatula.
 Note:
 1) Do not warm up before use. The material will become sticky, making it much more difficult to handle.
 2) Do not knead excessively, or the material will become sticky.
 3) After dispensing, immediately close the storage case to protect the material from light.

3. Preparations for pressing material onto the abutment
 Press the material roughly onto the abutment and roughly contour with the fingers or spatula.
 Note:
 1) Do not warm up before use. The material will become sticky, making it much more difficult to handle.
 2) Do not knead excessively, or the material will become sticky.
 3) After dispensing, immediately close the storage case to protect the material from light.

4. Pressing material onto the abutment
 Press the material onto the abutment and roughly contour with the fingers or spatula.
 Note:
 1) Apply GC COCOA BUTTER or Vaseline to the fingers or spatula to help shape the material more easily and to make the surfaces glossier. For additional application of material, temporarily light cure and remove the coated surface using a laboratory carbide bur.
 5. Shaping material - Step 1
 Let the patient bite softly to register the occlusal surface and adjust occlusion. Also adjust and contour the margin of the buccal surface.

6. Shaping material - Step 2
 Adjust the margins as necessary, and contour the proximal and lingual surfaces. Using an appropriate instrument, remove any excess material, particularly from interproximal spaces.

Note:
 1) If shaping the material takes a long time, it may become sticky. In this case, apply GC COCOA BUTTER or Vaseline to the fingers or instrument. In cases where additional application of material is needed, temporarily light cure and remove the coated surface using a laboratory carbide bur.
 2) Any material remaining after shaping should not be returned for storage because it has been exposed to ambient light. Dispose of it according to normal practice.

7. Temporary light curing
 Temporarily light cure the restoration in the patient's mouth in order to prevent possible deformation during removal from the mouth. Light cure all surfaces of the crown or unit for a combined total of 10 seconds with Halogen/LED or 3-5 seconds with a plasma arc.

Note:
 1) Make sure that no excess material remains in interproximal spaces before light curing. Any material remaining will make it difficult to remove the temporary restoration from the mouth.
 2) Remove the trial fit temporarily light cured restoration perpendicular to the abutment.

8. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

9. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

10. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

11. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

12. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

13. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

14. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

15. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

16. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

17. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

18. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

19. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

20. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

21. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

22. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

23. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

24. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

25. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

26. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

27. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

28. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

29. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

30. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

31. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

32. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

33. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

34. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

35. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

36. Final light curing
 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

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 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

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 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

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 Perform final polymerization outside the patient's mouth. Light cure each of the buccal, proximal, occlusal and lingual surfaces for 20 seconds with Halogen / LED or 3-5 seconds with a plasma arc. When using a tabletop fluorescent light curing unit (GC LABOLIGHT LV-III or equivalent), light cure for at least 3 minutes.

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REVOTEK LC

LICHTHÄRTENDE KUNSTSTOFF FÜR PROVISORISCHE KRONEN UND BRÜCKEN, INLAYS UND ONLAYS

REVOTEK LC ist ein neues, lichthärtendes plastisches Komposit Resin für provisorische Kronen, Brücken und Inlays.
 Zur Benutzung nur durch Zahnärzte bei den empfohlenen Indikationen!

INDIKATION
 Herstellung von provisorischen Kronen, Brücken, Inlays und Onlays.

KONTRAINDIKATIONEN
 In seltenen Fällen reagieren Menschen empfindlich auf dieses Produkt. Wenn eine derartige Reaktion eintritt, muss das Produkt nicht verwendet und einem Arzt konsultiert.

GEREAUCHSANWEISUNG
I. DIREKTE METHODE (im Mund des Patienten)
 A. Provisorische Kronen & Brücken

1. Überführen des Putty Sticks in die Aufbewahrungsdose
 Überführen Sie den Putty Stick aus der Folienverpackung in die Aufbewahrungsdose, die in der Einlassungstafel mitgeführt wird.
 Note:
 1) Wenn Sie den Putty Stick in die Aufbewahrungsdose geben, oder ihn herausnehmen, achten Sie bitte darauf, Verunreinigungen zu vermeiden!

2) Wenn die Aufbewahrungsdose verwendet wird, kann sich ein feiner Abrieb vom Verschluss bilden. Wenn Sie die Paste ersetzen, kontrollieren Sie die Dose auf Abrieb und wenn Sie die Dose austauschen, reinigen Sie sie bitte mit einem in Alkohol getränkten Wattebausch.
 2. Entnahme des Materials
 Öffnen Sie die Dose und entnehmen Sie die Menge an Material, die Sie benötigen. Bringen Sie die Paste mit behandschuhten Fingern in eine Form, die Sie Ihnen leicht ermöglicht, die Paste auf die Brücke aufzutragen. Kneten Sie die Paste mit den Fingern, bis Sie eine gleichmäßige Konsistenz erreicht haben.
 Anmerkung:
 1) Bitte nicht vor dem Gebrauch erwärmen! Dadurch wird das Material klebrig und schwer zu verarbeiten.
 2) Kneten Sie die Paste nicht übermäßig – auch dadurch wird sie klebrig!
 3) Verschließen Sie nach der Entnahme der Paste die Verpackung, um die nicht benötigte Paste vor Licht zu schützen.

3. Vorbereitung für das Aufpressen der Paste auf die Brücke.
 Stellen Sie sicher, daß die Menge an Paste in den Raum zwischen Brücke und den angrenzenden Zahn paßt. Sämtliches, die Paste vorher so zu formen, daß sie leicht in den Zwischenraum paßt (Abb. A-3a). bzw. eine andere Paste in den Raum zu füllen, bevor die Paste eingepreßt wird (Abb. A-3b).

Anmerkung:
 Wenn es Unterschneidungen auf dem Zahnrumpf gibt, füllen Sie diese bitte vorher mit Wachs aus, bevor Sie dieses Material auf die Oberfläche auftragen.
 4. Anpressen des Materials auf dem Zahnrumpf
 Pressen Sie das Material auf das Zahnrumpf, und formen Sie es grob mit den Fingern oder einem Spatel.
 Anmerkung:
 Geben Sie GC COCOA BUTTER oder Vaseline auf die Finger oder den Spatel um das Material leichter formen zu können und die Oberfläche glatter zu machen. Wenn Sie danach weiteres Material hinzufügen möchten, härten Sie die Oberfläche leicht an, und entfernen Sie den Überschuss an Cocoa Butter bzw. Vaseline mit einem Silikonpfeiler.

5. Formen des Materials - erster Schritt
 Lassen Sie den Patienten leicht auf das Material beißen, um die occlusale Oberfläche abzurücken und korrigieren Sie diese, wenn nötig. Gestalten Sie ebenso den Rand der buccalen Oberfläche her.

6. Formen des Materials - zweiter Schritt
 Wenn nötig formen Sie die Krone erneut und kontrollieren die proximale und linguale Oberfläche. Entfernen Sie bitte überschüssiges Material mit einem geeigneten Instrument, speziell von interproximalen Zwischenräumen.
 Anmerkung:
 1) Wenn das Ausformen des Materials zu lange dauert, kann das Material klebrig werden. In diesem Fall verwenden Sie bitte GC COCOA BUTTER oder Vaseline auf den Fingern oder dem Spatel. Wenn Sie in diesem Fall eine weitere Schicht auftragen wollen, härten Sie das Material leicht an und entfernen Sie den Überschuss der Oberfläche mit einem Silikonpfeiler.

2) Nach dem Formen darf übergebliches Material nicht mehr verwendet werden, da es dem Umgebungslicht ausgesetzt worden ist. Entsorgen Sie es durch das Abwerfen in den Müll.
 7. Vorbereitende Lichthärtung
 Härten Sie die Restauration vorübergehend im Mund des Patienten, um eine vorläufige Befestigung der Restauration auszuführen, beiseite während der Krone/Brücke für 10 Sekunden mit Halogen/LED Lampe oder 3-5 Sekunden mit der Plasma-Lampe.

Anmerkung:
 1) Stellen Sie sicher, daß vor dem Licht härten kein überschüssiges Material mehr in Unterschneidungen verbleibt. Sollte Material dort verbleiben, kann es die Haftung der Restauration beeinträchtigen.
 2) Entfernen Sie die Restauration und testen Sie den Sitz der provisorisch gehaltenen Restauration rechtwinklig auf dem Zahnrumpf.

8. Endgültige Härtung
 Die endgültige Härtung wird ausserhalb des Mundes durchgeführt. Licht härten Sie jede Fläche, buccal, proximal, occlusal und lingual für 20 Sekunden mit Halogen / LED oder 3-5 Sekunden mit einer Plasma-Lampe. Bei einem Tischlichtstrahlgerät (z. B. GC LABOLIGHT LV-III) härten Sie bitte mindestens 3 Minuten.

Anmerkung:
 1) Wenn Sie ein tragbares Lichtstrahlgerät verwenden, stellen Sie sicher, daß Sie sich nicht selbst in die Augen mit dem Licht aussetzen lassen

