The Ultimate

# Guide to Rotary Instruments

SWHITE Dental®

Better Patient Outcomes
Improved Efficiency
Faster Practice Growth

SWYTE Dental®

Better Patient Outcomes
Improved Efficiency
Faster Practice Growth

## Ultimate Guide Quick Reference

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# A Legacy of Innovation

The name SS White® is synonymous with dentistry around the world. Dating back to 1844 when Dr. Samuel Stockton White, a dentist, opened his dental products company in Philadelphia, PA. Manufacturing porcelain teeth, introducing many firsts over the decades beginning with dental equipment such as the dental chair, X-ray, and electric handpiece.

SS White® Dental has been on the forefront of minimally invasive dentistry, designing innovative products that are efficient and better for the patient. Known for its contribution of precision rotary instruments since the invention of the carbide bur in 1872, SS White® was also the first to introduce single-use diamonds and minimally invasive cavity prep system to the marketplace. In 2010 SS White® rocked the dental industry introducing the first minimally invasive endodontic file system all manufactured in the U.S.A. We help dental professionals create superior patient outcomes by being an innovative manufacturer of premium dental products – and a valued partner – through the delivery of C.O.R.E. principles.

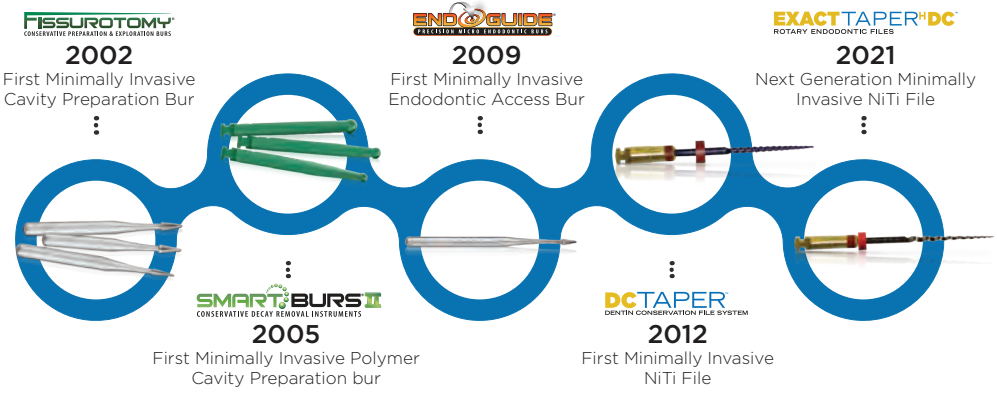
# The SS White® Legacy

SS White® carbides are made from tungsten carbide which is strong and sharp resulting in little vibration and chatter. Concentric design ensures precision and optimal clinical performance and are ideally suited for cavity preparation, crown and bridge work, root canal treatment, extractions as well as orthodontic slenderizing and debonding.

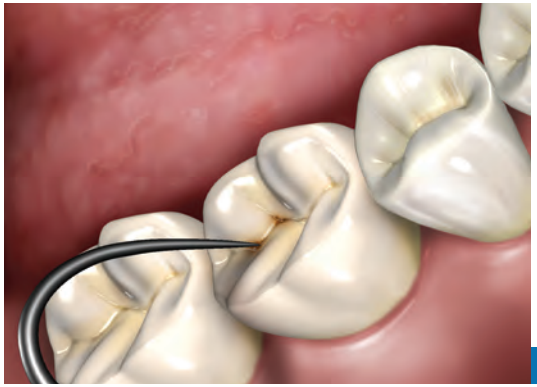
Your patients increasingly seek conservative options. Case acceptance may depend upon it. Whether performing operative or endodontic procedures, conserving healthy tooth structure yields a better patient outcome with more restorative support, and a longer-lasting restoration.

In the United States, 90% of cavity preparations are completed with carbide burs. The shapes are designed based upon the material that will be used in the restoration. Make the most of your procedure time. Introducing these procedures into your treatment protocols can improve your efficiency, grow revenue, and improve patient outcomes.

## On the Forefront of Minimally Invasive Dentistry



# 92% of Suspicious Fissures Have Hidden Caries



According to the ADA, the average doctor performs 770 Class I procedures per year. Complete 200 without anesthesia and save 33 hours of chair time per year. Treating instead of watching may add $20,000 or more in additional revenue to your practice.

## Fissurotomy® is a pain-free way to explore and restore in 3-5 minutes.

- Increased fluoride use has made it difficult to detect fissure caries using explorers and x-rays
- Improves diagnostics & early conservative treatment
- No anesthesia to the DEJ
- Better Patient Experience
- Ideal for opening fissures prior to PRR

Christensen RP, Ploeger BJ, Palmer TM. The role of pit-and-fissure discoloration in caries assessment. Compendium Contin Educ Dent. Nov 2001;22(11A):996-1007.

*"The Fissurotomy® bur is a new approach to ultraconservative dental treatment. The shape and size of the bur are designed specifically for the purpose of treating pit and fissure lesions."*

Dr. Fay Goldstep, DMD

# Hidden Pit and Fissure Caries

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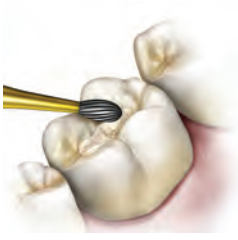

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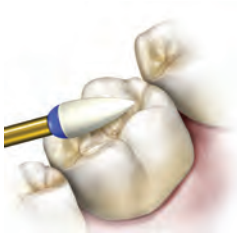

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**Suspected occlusal caries in pits and fissures:**
**Fissure staining + white decalcification spots = possible hidden caries.**

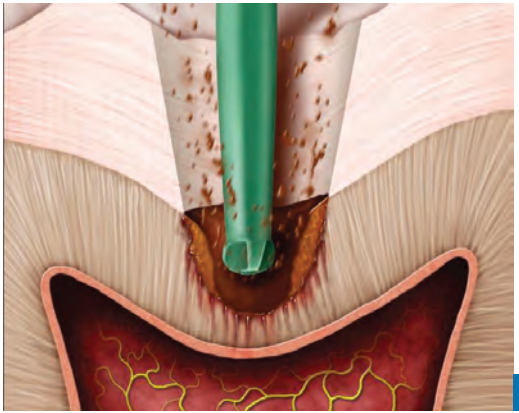
1. Suspected caries remain undetected by explorer and may not be evident on radiographs.
2. Minimally invasive enamel exploration with Fissurotomy® Burs Original or NTF.
3. Caries confirmed: caries removal in enamel and ideal preparation form is created with Fissurotomy® Burs.

**After placement of composite restoration:**

4. Composite Restoration Finishing – with Trimming & Finishing Bur #7406 (12-blade).
5. Followed by Trimming & Finishing Bur #8406 (20-blade).
6. Composite Restoration Polishing – use Jazz® Supreme Composite 1-Step Universal Polishers, flame shape.

SCAN TO WATCH

# No More Inadvertent Pulp Exposures



Decay removal over deep lesions is now commonly completed with the same carbide that is used to create the cavity form. This can and does cause pulp exposures.
A University of Maryland study concluded that the use of SmartBurs®II is an efficient method for removing caries-infected dentin while preserving caries unaffected dentin and conserving healthy tooth structure.

## Designed by Cariologists

To only remove decayed dentin; SmartBurs®II cannot cut healthy dentin or enamel, eliminating the possibility of creating an inadvertent pulp exposure or unnecessarily removing healthy tooth structure

- SmartBurs®II do not traumatize healthy dentinal tubules, thereby reducing post-operative sensitivity.
- NYU Clinical study confirms 85% of patients prefer treatments that used SmartBurs®II with no anesthesia over traditional treatment that used anesthesia and carbide burs.

*"SmartBurs®II provide a conservative endpoint during excavation of infected carious dentin. Underlying and potentially protective caries affected dentin is thus preserved. SmartBurs®II relies on dentin hardness to provide a scientifically-based endpoint, and not staining, which can be viable or absent, and not a true indicator of remaining carious dentin."*

Daniel Boston, DMD

# Comfortable Cavity Preparation and Composite Restoration

Caries Access

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Comfortable Caries Removal

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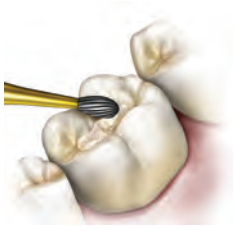

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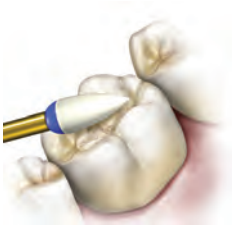

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## Occlusal pit and fissure carious lesion confirmed:

1. Caries Access – with Fissurotomy® Burs Original or NTF or #245 carbide bur.
   Note: If secondary caries exists under a failed restoration, use Great White® #2 for restoration removal, followed by caries removal with SmartBurs®II.
2. Comfortable Caries Removal in Dentin – Use size #4, #6, or #8 appropriate to size of lesion.

## After placement of composite restoration:

3. Composite Restoration Finishing – use Trimming & Finishing Bur #7406 (12-blade).
4. Followed by Trimming & Finishing Bur #8406 (20-blade) .
5. Composite Restoration Polishing – use Jazz® Supreme Composite 1-Step Universal Polishers, flame shape.

Clinicians have reported completing an additional 100 Class V and open Class I cavity preps with SmartBurs®II to remove decay with no anesthesia. This means a time-savings of up to 17 hours.

SCAN TO WATCH

# Painless Anterior Proximal Caries Removal - Class III

Reducing the operative tools and increasing efficiency at the chair can save both time and material costs while not compromising the restorative result. Fissurotomy® Burs are part of the Comfortable Cavity Prep System.

## This minimally invasive preparation system has 2 distinct advantages over traditional preparation:

(1) minimally invasive outline and convenience forms of the cavity preparation can be instrumented in enamel without the use of anesthesia, and (2) carious lesions in dentin can be instrumented with SmartBurs®II polymer burs, oftentimes without any local anesthesia. This approach can create a more pleasant patient experience as well as expedite treatment times in the busy dental practice.

# Anterior Proximal Caries Procedure - Class III


**Anterior proximal carious lesion confirmed:**

1. Caries Access – with Carbide Bur #169L or #330
2. Comfortable Caries Removal in Dentin – Use SmartBurs®II size #4, #6, or #8 appropriate to size of lesion.

**After placement of composite restoration:**

3. Composite Restoration Finishing – Use Trimming & Finishing Bur #7901 (12-blade)
4. Followed by Trimming & Finishing Bur #8901 (20-blade).
5. Composite Restoration Polishing – use Jazz® Supreme Composite 1-Step Universal Polisher, knife-edge disc.

SCAN TO WATCH

# Cervical Caries Removal – Class V

The average doctor does 1100 cavity preps per year. Approximately 600-800 of those are Class I, III or V. Imagine performing 200 of those without anesthesia.

## How many additional new patients could you get from referrals?

## The Value of 100 Referrals

The ADA estimates that each referral patient is valued at $440 annually.  Total Value $44,000.

*"With the SS White® Fissurotomy® system you don't have to watch and wait. I found the system virtually pain-free and very fast to restore."*

- Dr. Joe Blaes, DDS

# Cervical Caries Removal - Class V



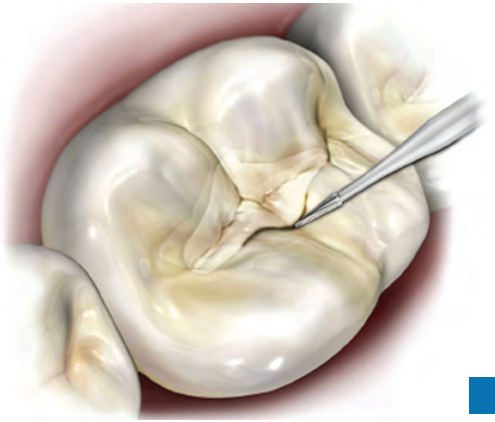

## Cervical carious lesion confirmed:

1. Caries Access – use Fissurotomy® Burs Original or SS White® Carbide Burs FG#329 or FG#330.
2. Comfortable Caries Removal in Dentin – use SmartBurs®II size #4, #6, or #8 appropriate to size of lesion.

## After placement of composite restoration:

3. Composite Restoration Finishing – use Trimming & Finishing Bur #7901 (12-blade)
4. Followed by Trimming & Finishing Bur #8901 (20-blade)
5. Composite Restoration Polishing – use Jazz® Supreme Composite 1-Step Universal Polisher, flame-shape.

# Micro-leakage, One of The Major Reasons for Recurrent Decay



Remove affected stained margin with Fissurotomy® bur, etch bond and repair with flowable composite.

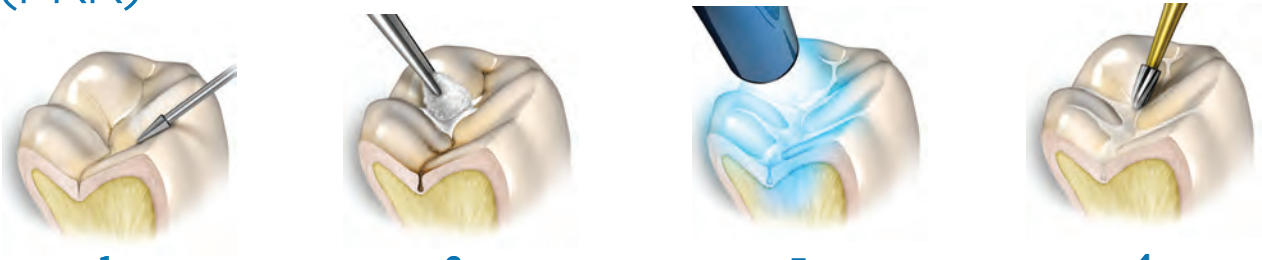
## Prep Secondary Decay with Minimal Tooth Removal

Use Fissurotomy® burs Original or NTF which is specifically designed for recontouring the fissures. This bur helps access decay without removing considerable amounts of the enamel. Fissurotomy® burs are pain-free to the DEJ, are cleaner, faster and more controlled than air abrasion.

*"My Goal is to maintain as much tooth structure, I'll do my minimal access form with a Fissurotomy® bur. This is achieved without removing considerable amounts of enamel and allows access for the SmartBurs®II if needed prior to sealing the tooth."*

Dr. Robert Lowe, DDS

# Increase Revenue on Enameloplasty and Sealant Placements (PRR)




**Preparation of occlusal pits and fissures for application of dental sealant:**

1. Roughen the surface enamel and remove suspect areas – with Fissurotomy® burs Original or NTF.
2. Apply dental sealant
3. Light-cure sealant
4. Equilibrate the light-cured sealant with Trimming and Finishing Bur #7406 (12-blade).

Sealant technique success is dependent on obtaining proper isolation in order to avoid saliva contamination of the tooth. This isolation can be accomplished with a dental dam, cotton rolls and suction, a well-trained dental assistant, or with combination mouth-prop-and-suction devices.

SCAN TO WATCH

# Remove Amalgam Restorations Safely and Efficiently With No Loss of Healthy Tissue

Great White® Burs are ideally suited for this type of restoration removal because of their sharpened dentate that create more efficient cutting and help facilitate the sectioning of amalgam material, without aerosolizing, thereby reducing mercury exposure.

## Most Mercury-Safe Dentists

Use a removal process commonly referred to as chunking. This involves less drilling, because the dentist only drills enough to cut the filling into chunks, which can then be easily removed by a hand instrument or suction. Both chunking and keeping the filling cool during removal are very important.

*One Great White® Bur can remove up to 3 PFMs with the same enhanced cutting rate shown on non-precious metal and amalgams. Doctors reported saving 8-16 hours per year and $400 in material cost per year using Great White® Burs.*

# Effortless and Efficient Ortho Debonding

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### SS White® 12-Blade trim and contour

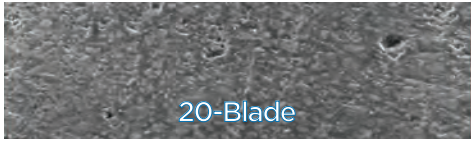
1. 10-Blade Safe End or 12-Blade finishing burs: Efficiently trim and contour

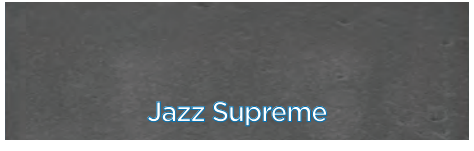
### SS White® 20-Blade ultra-smooth pre-polish

2. 20-Blade Safe End or 20-Blade finishing burs: Place anatomical features and create an ultra-smooth, pre-polish

### Jazz® Supreme one-step universal polishers

3. Jazz® Supreme One-Step Polishers: Create a beautiful, high shine


| | | | |
|---|---|---|---|
| **Average Surface Roughness (Ra.):** | 0.3684 | 0.2482 | 0.1966 |
| **Reduction from Previous:** | - | 33% | 21% |

# Faster, Easier, More Beautiful Polishes

## Polishing with Jazz® Supreme One Step Polishers

Can save up to 20 hours a year for most clinicians.

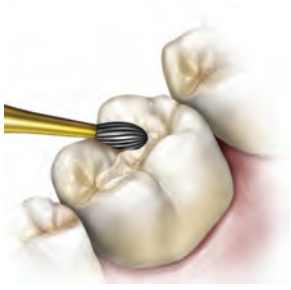
A 20 blade-finishing bur or an ultra-fine diamond should follow the use of the 12-blade finishing bur or fine grit diamond prior to polishing. This step greatly reduces the time needed to polish as it eliminates the striations often associated with the use of 12 blade finishing burs or fine grit diamonds from the surface of the restoration.

*"I save 12 hours per year and get faster more beautiful polishes with Jazz® Polishing system."*

Dr. Howard S. Glazer, DDS, FAGD

# Trimming and Finishing Burs and Jazz® Polishers

1



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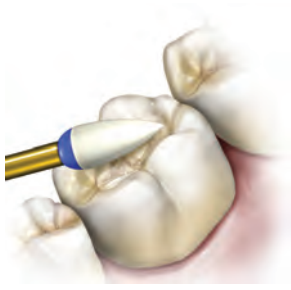

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**Efficiently trim and contour composites**

1. 12 blade to efficiently trim and contour

**Place anatomical features and create an ultra-smooth, pre-polish on composites**

2. 20 blade for approximately 30 Seconds to pre-polish and reduce the high points

**Create a beautiful, high shine on all types of composite material**

3. 1-step Jazz® polishing saving you 1.5 minutes per polish and material cost vs. multi-step polisher systems

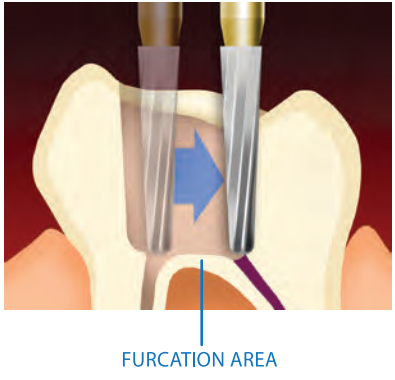
A convenient selection of SS White® trimming and finishing burs and one-step polishers specifically designed to trim, contour and pre-polish anterior and posterior composite resin materials using SS White® Safe End and regular trimming and finishing burs. Final polishing is accomplished with Jazz® supreme single-step polishers.

SCAN TO WATCH

# Achieve Lateral Endodontic Access Without the Risk of Perforation

Endo Safe End bur for lateral endodontic access enlargement without the risk of penetrating the pulp chamber floor or ledging. The Endo Safe End tip prohibits the access from getting deeper but will allow for lateral expansion.

## Flare, Flatten and Refine Internal Axial Walls





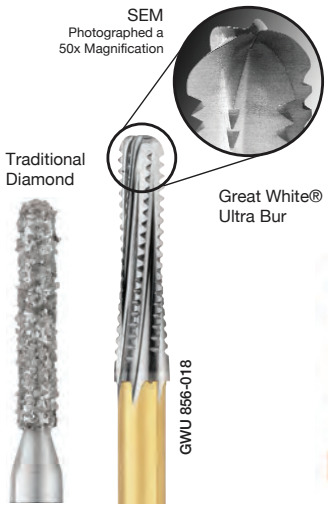

The Endo Safe End Instruments are available in 3 sizes (1.4mm, 1.6mm and 1.8mm).

Pulp Chamber Expansion: Using SS White® Endo SE carbide burs allow access to the canal orifices during endodontic treatment, while preventing damage or perforation of both the pulp chamber floor and root canal walls. Product recommended: ESE-014, ESE-016 and ESE-018

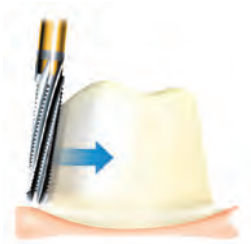
Endo Safe End burs have a smooth integrated transitional design from tip to cutting blade which eliminates ledging associated with competitor's burs. The Endo Safe End instrument will cut only laterally and not apically to prevent perforation of the furcation area.

# Save Time and Material Costs on Crown Removal and Prep

## The fastest crown prep instrument available, it's like 3 instruments in 1 - According to a University of Rochester study, a single Great White® Ultra bur can cut 11.5% to 35.3% faster than the top selling premium diamonds




- Crown preparations can take 10-15 minutes and use 3-4 different diamonds
- Great White® Ultra is like using 3 instruments in 1:
  - Cuts through amalgams & crowns quickly
  - Fastest gross reduction instrument available today
  - Leaves an impression ready margin
- Great White® Ultra burs can save clinicians 7-12 hours of chair time per year



### Versatile Performance

Our Chamfer 856 Series is designed to create a rounded axial-gingival line angle for metal to ceramic restorations.

*"The Great White® Ultra burs cut quicker than any diamond I have used and leave a smooth finish, reducing the steps to complete my crown preparations from 2 to 1".*

– Dr. Louis Malcmacher, DDS, MAGD

SCAN TO WATCH

# Reduce Chair Time and Cost Per Procedure on Zirconia Crown Removal

*"There is nothing more frustrating as a dental practitioner than getting behind schedule with patients backed up, the Great White®Z Diamond keeps me on schedule when other diamonds have failed".*

- Dr. Andre Shannon, DDS

## 75% to 80% of crowns are now manufactured from partial or full zirconia

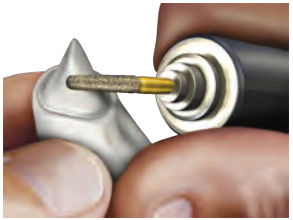
- Zirconia crown removal with traditional diamonds can take 15 to 30 minutes per crown and burn through 2-3 diamonds
- Great White®Z diamond's proprietary mix of diamond particle & matrix creates a highly efficient, cool cutting instrument that does not spark on zirconia
- Crown removal using Great White®Z takes on average 1-3 minutes
- 65 Zirconia Crown x 19 minutes average savings = 20 Hours of Chair Time

SCAN TO WATCH

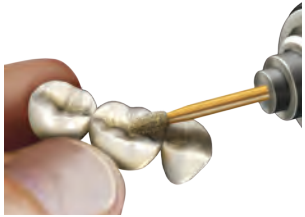
# With Great White®Z You Can Save 6 to 9 Hrs. Per Year Removing Zirconia*

## Initial Endodontic Access Through Zirconia

## Finish Laboratory Copings



## Crown Adjustments



Failure rates on zirconia based crowns have been shown to be between 7-13% after four years of placement.* Clinicians have stated it takes 20-40 minutes* to remove a crown with zirconia coping and 10-15 minutes* to create endodontic access through crowns with standard carbides or diamonds.

*Data on file

## Great White®Z Cuts Zirconia Much More Efficiently

Great White®Z Diamonds are manufactured with fine diamond particles and a proprietary diamond bonding technique which has been shown to reduce micro-fractures and vibrations with increased patient satisfaction.

*"I highly recommend Great White®Z Diamonds, they will cut significant time from zirconia crown removal procedures while reducing stress, usually with just one diamond."*

- Dr. Howard Strassler, DDS

# Eliminate Risk of Cross-Contamination and Get a Fast, Fresh Cut Every Time

*"Piranha® single-use diamonds make crown preparations predictable and efficient. Too many clinicians use diamonds way past their prime. This can cause heat and postoperative sensitivity. With Piranha®, you never have to worry about that, and you get the same fresh cut time and time again".*

- Dr. Gary Johnson, DDS

## Eliminate 6-8 Minutes Cleaning & Sterilizing Used Diamonds

- Multi-use performance at a single-use price
- The overall cost and time to clean and sterilize a used diamond is greater than the price of a new Piranha® Diamond
- Clinicians who perform on average 250 crown preparations per year, save 52% in rotary instrument material and aseptic control costs by switching from a multi-use diamond to a Piranha® Diamond

# Patient Can't Open Wide Enough?

## If you are working on a pediatric patient or someone who cannot open wide enough:

The SS White® Short Shank Carbide burs and diamond instruments are your answer for working in tight spaces or with a limited mouth opening.

FG SS

# Save 3 to 5 Minutes Sectioning 3rd Molars

*"The merging of the 703 crosscut fissure bur with the 8 round bur to become the 1703 bur provides the most efficient cutting as well as visual safety with depth of cut"*

- Dr. John Alonge, DDS

## Reduced Clogging

Unique blade geometry allows for more effective bone and tooth removal discharge creating a more efficient instrument

## More Efficient Cutting

Faster cutting by design, SS White® Oral Surgery burs save time for all surgical procedures

## Reduced Bur Breakage

Internal testing shows that SS White® burs consistently outperform all competitive burs in neck strength, significantly reducing bur breakage

## Packaged Sterile

For your convenience and safety, SS White® Oral Surgery burs shank #1-6 come in a single sterile package

# Bone Cutters Specifically Designed for Strength that Stands Up to the Rigors of Dental Surgery!

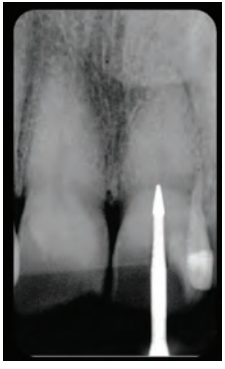
SS White® Oral Surgery burs are packaged sterile to save pre-operative time for the oral surgery practice. SS White® Oral Surgery burs have been shown to save 3-5 minutes per procedure* by combining both the removal of bone and sectioning impacted third molars in one step, utilizing the popular #1703 bur which combines the sculpting ability of a round bur with a high performance #703 sectioning bur.

*Data on file

## Neck Strength Exceeds ISO specification by over 90% Reducing the Occurrence of Breakage*

- Precise design for trimming and preparation of hard tissue, bone structure, bone lid and apicoectomy procedures
- Sectioning impacted third molars prior to extraction, separating roots, removal of fractured root stump and external sinus lift procedures
- Ultra-smooth vibration free cutting
- The crosscut shape and external flute depth ensures efficient cutting and expels waste material

# Faster, More Conservative Anterior Access



*"Put away your round burs and Gates Glidden Burs, EndoGuide® burs eliminate bur run-off and create a guidance system that finds canals much more effectively and conservatively."*

- Dr. David Clark, DDS

Round burs were designed to cut both vertically and horizontally, causing runoff. EndoGuide® was designed for endo access. The conical shape allows for better feel and pinpoint accuracy. Micro-diameter tip acts as a self-centering guide for precise access to canals, conserving 40% more healthy dentin.

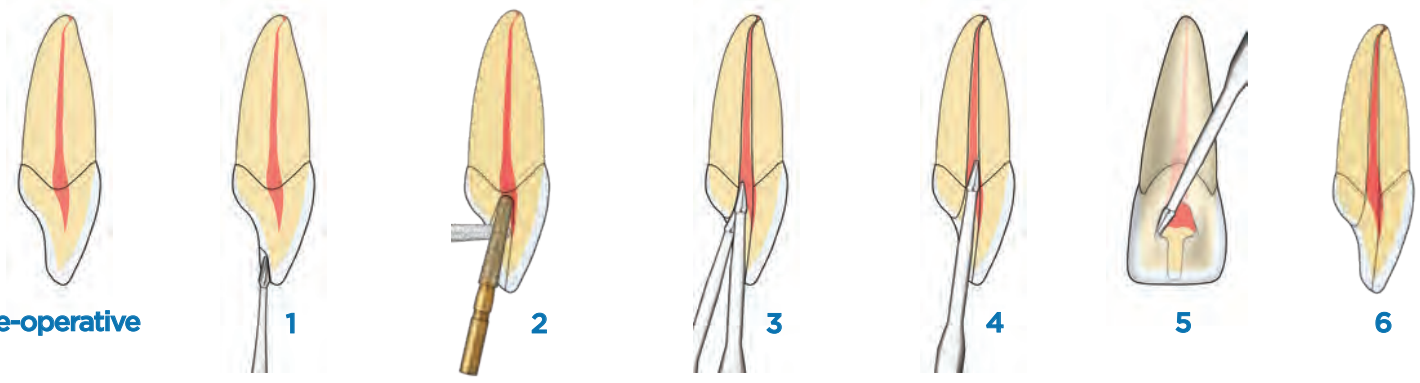
## EndoGuide® burs are specifically designed for precise, straight line root canal access

- Eliminates round bur runoff
- Eliminates bur created micro-ledge

SCAN TO WATCH

# Self Centering Guide to Access Canal

Large Incisor with Normal Pulp*




**1. Cut a palatal-incisal notch†** with EndoGuide® EG1A or SS White® Great White® GWZ 856-018 (round-end tapered diamond)

**2. Continue cutting along the long axis of tooth into pulp chamber** with SS White® Great White® GWZ856

**3. Smooth orifice funnel** with EndoGuide® EG2

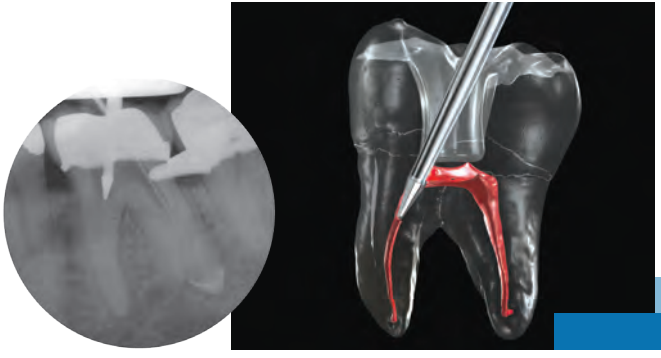
**4. Smooth upper canal walls** with EndoGuide® EG2

**5. Remove tissue from pulp horn** with EndoGuide® EG2

**6. Access achieved; maximum peri-cervical dentin retained**

† NOTE: The palatal-incisal notch serves as an orientation-notch to subsequently guide rotary instruments.

# Are You Struggling to Find Canals with Your Standard Instruments?



*"EndoGuide® burs have eliminated my dependence on round burs and the ultrasonic tips. EndoGuide® burs offer greater precision and efficiency in creating straight-line access and identifying canals in molar teeth".*

- Dr. John S. Khademi, DDS, MS

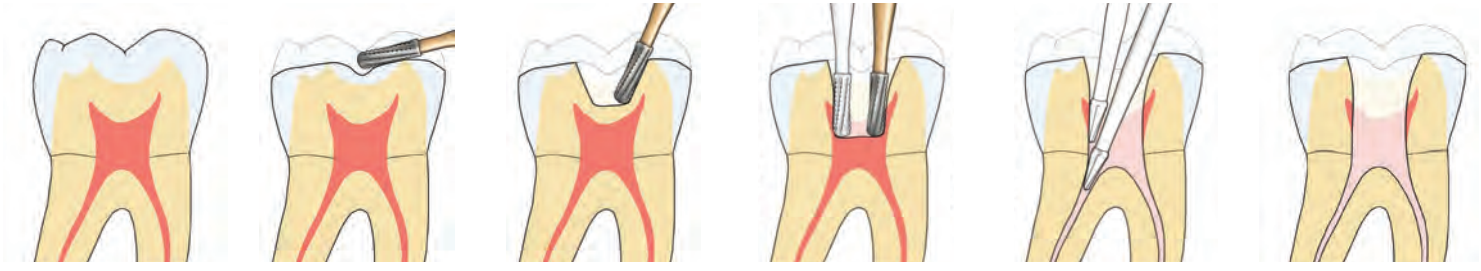
## 42% of retreatment in molars is due to canals being missed during the first root canal treatment.

- Better visibility and feel for MB 2/3 and calcified canals
- Removes old pins and posts in half the time
- Micro tip provides better instrument control for a straight line path
- Blade configuration keeps EndoGuide® centered in the canal
- Does not map up the pulp chamber floor (white caulk appearance)
- 25mm length backs the head of the handpiece out of the field of vision
- Micro opening allows for quicker access

SCAN TO WATCH

# Self-Centering Guide to Access Canal

Molar with Normal Pulp*



Pre-operative 1 2 3 4 5

## 1. Flatten occlusal surface

1. SS White® Great White® GW2 carbide bur

## Create divergent occlusal preparation

2. Great White® GW2 carbide bur

## De-roof pulp chamber

3. Great White® GW2 carbide bur

## †Create small, smooth orifice funnel

4. EndoGuide® EG2 (SLRA)

## Access achieved

5. Maximum peri-cervical dentin retained

†NOTE: This crucial step creates a guide-plane to help shepherd hand files and rotary files smoothly into the canal orifice. An extra minute spent here, benefits the operator for the entire procedure. This single step replaces round burs, gates glidden burs and some orifice openers.

# Reduce Hand Fatigue and Conserve Pericervical Dentin

*"The 14.03 file will extend my career years. We now determine length with a #10 and go immediately to a 14.03. We have a saying: "If the #10 goes, the 14 follows. When the 14 goes, the 17 follows. Case done!"*

- Dr. John S. Khademi, DDS, MS
Durango, Co
Four Corners Endodontics Clinical Professor,
Adjunct Assistant Professor

**DCTaper$^{H™}$ Technique:**

Recommended speed 200 – 400 rpms. Torque at 460 cm-g or 4.5 Newton Centimeters or higher.

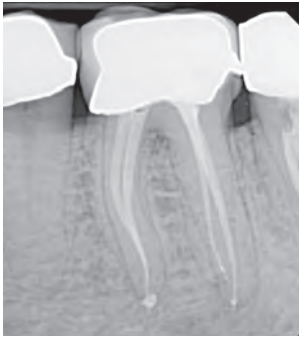
If the 10/02 hand file is binding at working length start with the 03/14 DCTaper$^{H™}$ Glide Path File and then proceed with the shaping technique of your choice.

Using a "single stroke and clean" technique, advance the DCTaper$^{H™}$ file to working length or first Resistance; then remove from canal, clean and reinsert file into the canal.

Final file size taken to working length is the clinician's decision; based upon the anatomy and size of the root canal.

SCAN TO WATCH

# EXACTTaper$^{H}$ DC™ The Next Generation of Minimally Invasive NiTi Files



*"Very few files are needed to shape the canals. The flexibility on these files is simply unreal."*

~ Dr. Reza Farshey, DMD
Endodontist, Chevy Chase, Maryland

## No Change To Your Current Technique

The SS White® EXACTTaper$^{H}$ DC™ file system has been designed with multiple tapers that ensure flexibility and cut dentin in specific canal zones, while utilizing a .8 MFD for maximum pericervical dentin conservation, reducing the potential for over-preparation. EXACTTaper$^{H}$ DC™ files are available in comparable sizes, lengths and tapers to the Dentsply® ProTaper Gold® file system, and Edge Endo® Edge Taper™ file system. They require no change to current protocol or technique and offer the same predictable results.

## Navigate Curvy Canals Without the Stress

EXACTTaper$^{H}$ DC™ files utilize proprietary heat-treating processes which create superior controlled memory and flexibility for up to 90° curves that accommodate even the most complex canal anatomies.

SCAN TO WATCH

# Carbide Burs

SS White® is fully committed to offering a full line of carbide burs, in both sterile and non-sterile packaging. For our sterile packed product, we ensure our products exceed all infection control standards and regulations.

# Material Guide

| Application | Bur Type | Material | Size (mm) | Speed (RPM) |
|---|---|---|---|---|
| Cavity Preparation | Standard | Enamel/Dentine | 010 to 023 | < 450,000 |
| Removal of Fillings | Standard | Amalgam/Composite | 010 to 018 | 60,000 to 120,000 |
| Excavation | Standard | Enamel/Dentine/Bone | 010 to 023 | < 2,000 |
| Finishing Margins | Finishing | Enamel | 010 to 016 | 10,000 to 20,000 |
| Finishing Restorations | Finishing | Amalgam | 012 to 023 | 18,000 to 30,000 |
| Finishing Restorations | Finishing | Composite | 012 to 023 | 10,000 to 20,000 |
| Finishing Restorations | Finishing | Glass Ionomer | 012 to 023 | 10,000 to 20,000 |
| Cutting Bone | Standard | Bone | 018 to 027 | 500 to 3,000 |
| Crown & Bridge Finishing | Finishing | C&B Polymer | 010 to 016 | 40,000 to 80,000 |
| Crown & Bridge Metal Finishing | Standard | Metals | 018 to 027 | < 30,000 |
| Prosthetic Polymer Trimming | Standard | Polymer | 018 to 027 | < 20,000 |
| Endodontic (EndoGuide®) | Specialty | Enamel/Dentin | 027 to 034 | 10,000 to 30,000 |
| Exploration (Fissurotomy®) | Specialty | Enamel/Dentin | 0.6 to 1.1 | 300,000 - 350,000 |
| Cavity Removal (SmartBurs®II) | Specialty | Decay | 014 to 023 | 5,000 - 10,000 |

# Rotary Instrument Reprocessing

The intention of these instructions is to provide guidelines for the sterilization of rotary dental instruments. Unless otherwise indicated, all instruments are supplied clean but not sterile. Instruments indicated as non-sterile single use should be processed following these guidelines before the initial use only and then properly discarded.

## Cleaning:

Automatic Cleaning is the recommended method for pre-sterilization cleaning. Follow the machine manufacturer's recommended method while utilizing approved agents for the cleaning of rotary dental instruments. If there is an excessive delay between use and cleaning, manual cleaning may be required. In the case that automatic cleaning is not available, rotary dental instruments may be cleaned manually. Manually brush debris from instruments under running water with a wire brush and approved cleaning agent. PPE should be worn and care taken to avoid spreading contaminants during the brushing process. After cleaning, dry instruments with paper towel or dry heat not exceeding 140°C. Inspect and properly discard any instruments with signs of excessive wear, damage or corrosion.

## Sterilization:

Saturated steam under pressure (autoclave) is the recommended method of sterilization for rotary dental instruments. The recommended cycle is 20 to 30 minutes at 121°C (250°F) at 15 to 30 psi.
For faster processing, a rapid cycle of 3 to 10 minutes at 135°C (275°F) at 25 to 30 psi is also acceptable.
Operation of the autoclave should follow the manufacturer's recommended methods and materials.

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