

# THE DENTAL ADVISOR<sup>TM</sup>

Improving Patient Care Through Research & Education

July-Aug 2016

Vol. 33, No. 06

## 2016 CLINICAL PROBLEM SOLVERS

Dentists and their teams face daily challenges with materials and equipment when treating patients. Most teams have identified “go to” products that are helpful. These products can solve a clinical problem and save time, headaches, and costs.

This issue of THE DENTAL ADVISOR reports on products recommended by the editorial team of THE DENTAL ADVISOR. Each product has been identified as an excellent choice for solving a particular clinical challenge.

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[www.dentaladvisor.com](http://www.dentaladvisor.com)

### RATINGS :

|           |       |
|-----------|-------|
| Excellent | +++++ |
| Very Good | +++   |
| Good      | ++    |



July/Aug  
2016

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No matter what subject I am lecturing on from translucency of zirconia to the latest and greatest digital scanning systems, I am consistently asked, "Which products do you use in your practice?" As a member of the editorial board and clinical evaluator at THE DENTAL ADVISOR, I feel fortunate to be well-versed in a broad range of dental products that reach the market. Because of this unique position, I look forward to offering this issue of Clinical Problem Solvers each year to our subscribers. This issue allows us to recommend products which we have found to solve very specific problems or address previously unresolved issues in dentistry.

We know that the individual practicing dentist is faced with an over-abundance of products (new and old) to choose from on a daily basis and limited time and resources can hinder the ability to thoroughly investigate the claims of manufacturers. It gives us genuine pleasure to be able to combine our experiences as practicing dentists and clinical evaluators to offer you this list of go-to products that truly solve clinical problems.

While we all have our own opinions regarding individual products, this issue more directly offers you our advice on how these products can be utilized to overcome a specific challenge.

I hope you find these suggestions useful, and please keep your own recommendations coming! As always, you may reach me at [drbunek@dentaladvisor.com](mailto:drbunek@dentaladvisor.com).

—Sabiha S. Bunek

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## Elements Free Obturation System Kerr Corporation

[www.kerrdental.com](http://www.kerrdental.com)

Clinician: Dr. Sabiha S. Bunek



**CLINICAL PROBLEM:** Root canal therapy involves a lot of adjunct equipment. Cords can become a nuisance and even a tripping hazard. Most obturation systems on the market are large and take up valuable counter space.

**SOLUTION:** The *Elements Free Obturation System* has been a life saver! When a crown prep appointment suddenly morphs into a root canal, there is a tremendous amount of equipment that must quickly materialize. The cordless *Elements Free* has a uniquely small footprint and no cords for my assistant to trip over as she moves about the operator to take required radiographs, etc. The unit also heats quickly adding to the overall efficiency of a sometimes cumbersome procedure.

## Admira Fusion

VOCO

www.voco.com

Clinician: Dr. Sabiha S. Bunek



Photos courtesy of VOCO America

**CLINICAL PROBLEM:** Patients are becoming increasingly concerned with the chemicals that make up restorative materials and often request that we avoid using anything with BisGMA.

**SOLUTION:** *Admira Fusion* is the first purely ceramic-based restorative on the market. Instead of using classic monomers (i.e., BisGMA, TEGDMA, HEMA), it utilizes organically modified ceramics (ORMOCER). Another added bonus is the packaging which is unique to this composite. Each compule comes in its own foil packet eliminating the chance of cross contamination. I enjoy both the polishability and the handling of *Admira Fusion*.

## BruxZir Anterior

Glidewell Laboratories

www.glidewell dental.com

Clinician: Dr. John W. Farah



**CLINICAL PROBLEM:** Patient presented with severely worn upper and lower dentition, resulting in almost 2 mm loss of vertical, affecting his smile and facial features. There was a need for a highly esthetic ceramic which allowed for minimal reduction, as his teeth were already worn.

**SOLUTION:** *BruxZir Anterior* was selected due to its high strength as well as its translucency and natural appearance. It requires less reduction than a monolithic glass ceramic. The patient's smile and function were restored using both *BruxZir Anterior* and *BruxZir Solid Zirconia* in the posterior region. He was extremely happy with the results. We have been tracking the long-term performance of *BruxZir* for 5 years and *BruxZir Anterior* for one year and our positive outcome gave me confidence that these materials will perform well for many years.

## Preference Liquid Hand Sanitizer

Whip Mix

www.whipmix.com

Clinician: Dr. John A. Molinari



**CLINICAL PROBLEM:** Hand sanitizers often dispense too much material, leaving hands overly wet and sticky. This makes donning gloves immediately after use not just difficult, but nearly impossible.

**SOLUTION:** *Preference Liquid Hand Sanitizer* delivers material in a measured spray, eliminating excess moisture. My hands are left dry but not dried out and have an almost silky feeling. I have no problem immediately donning gloves when I use this product.

## RVG 6200 Digital Intraoral Sensor

Carestream Dental

www.carestreamdental.com

Clinician: Callie M. Siwarga, B.A., Dental Assistant



**CLINICAL PROBLEM:** Typical digital x-ray sensors have an activation button that must be pressed to initiate a timer before exposure. This is an extra step that is inefficient and even cumbersome especially when attempting to take a radiograph on a patient with a strong gag reflex or tori. Once the x-ray is set up, the operator must stop and reach for the activation button.

**SOLUTION:** *RVG 6200* does not have an activation button. It is always ready! It has greatly improved efficiency especially for endo procedures and full mouth series. I also find the *RVG 6200* sensor to be more durable than sensors we've had in the past. We have had it for close to a year and still no issues!

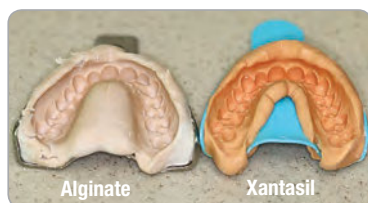
**Xantasil®**

Heraeus-Kulzer

www.heraeus-kulzer.com  
 Clinician: Dr. Sabiha S. Bunek

**CLINICAL PROBLEM:**

**Patients are not happy when you take multiple alginate impressions on them for fabrication of different models or trays (study models, orthodontic models, bleach trays, etc.).**



**SOLUTION:** **Xantasil** is an addition silicone alginate substitute material that can be poured multiple times. The material does not need to be poured immediately and can be stored for several weeks. The accuracy is far superior to traditional alginates and there is no mixing or mess. My dental assistants can't live without **Xantasil**. **Xantasil** has been shown to be dimensionally stable for at least 2 weeks based on our lab testing.

**EyeSpecial C-II Digital Camera**

SHOFU

www.shofu.com  
 Clinician: Shami Tamber, CDA

**CLINICAL PROBLEM:**

**DSLR cameras are expensive, heavy, and difficult to operate on your own. In the past our doctors took all their own photos while an assistant retracted and positioned the mirrors. The process is stressful at times, and always takes two people; consuming valuable clinical chair time.**

**SOLUTION:** **EyeSpecial C-II Digital Camera** is a game changer. Designed specifically for the dental practice; it is intuitive, user friendly, produces high-quality images, light weight, and only requires one person to operate. I found it very easy to learn with this camera and was able to use it efficiently within a couple hours; it has since replaced our more complicated camera.

**Twist® Plus**

Crosstex

www.crosstex.com  
 Clinician: Dr. Brad Steiper



**CLINICAL PROBLEM:** **Cleaning around brackets and wires can be very difficult using traditional prophyl angles.**

**SOLUTION:** **Twist Plus** prophyl angle tapered brush provides an excellent back and forth motion with the right amount of taper. The pointed end is ideal for working around difficult to clean brackets and tie wires. We've also noticed that this back and forth motion eliminates splatter and reduces hand fatigue.

**Purekeys**

Productive Practices

www.productivepractices.net  
 Clinician: Dr. John A. Molinari



**CLINICAL PROBLEM:** **Recently we ruined a computer keyboard due to repeated cleaning. What is a good way to clean and disinfect a keyboard?**

**SOLUTION:** There is no reliable way to clean and disinfect a standard keyboard from organic debris without damage and keyboard barriers can be tedious. Instead we recommend **Purekeys** keyboard by Productive Practices. **Purekeys** has a flat, silicone surface that makes it easy to clean and disinfect with approved intermediate level disinfectants. Our Infection Control laboratory challenged **Purekeys** keyboard with both clinical and laboratory testing and found that its unique design allows for effective cleaning and disinfection.

## MI Paste Plus

GC America

www.gcamerica.com

Clinician: Dr. Sabiha S. Bunek



**CLINICAL PROBLEM:** Cancer patients undergoing chemotherapy or radiation suffer from dry mouth and experience nausea, resulting in discomfort, dental caries, and enamel erosion.

**SOLUTION:** As part of my protocol for treating cancer patients, I dispense a tube of **MI Paste Plus**, instructing them to apply the paste with their finger, leaving it on for 3-5 minutes (twice daily). The paste, a water-based cream containing RECALDENT and fluoride, helps protect teeth from erosion and decay. My patients find this regimen very beneficial and have reported less oral discomfort with the use of **MI Paste Plus**.

## QuickSplint

QuickSplint

www.quicksplint.com

Clinician: Dr. James G. Olsen



**CLINICAL PROBLEM:** Occasionally a patient will present to our office with symptoms of acute muscle and joint pain accompanied by frequent headaches. These patients usually require some type of immediate oral device but are not always capable of opening for an impression without further injury. Permanent appliances usually require some fabrication in a lab which can take a couple of weeks. However, the patient would like some instant solutions to help reduce their symptoms.

**SOLUTION:** **QuickSplint** is a useful and readily available device technique which we can offer to the patient, to give them some of the relief they are seeking. It is not intended to be used for long-term treatment and we are sure to inform the patient about this. The patient appreciates us for providing some immediate attention and support for their problem.

## SISU Mouthguard

Akervall Technologies

www.sisuguard.com

Clinician: Dr. Eric Brust



**CLINICAL PROBLEM:**

Orthodontic patients' teeth are moving so quickly in first stages, they need a mouth guard that can evolve with their dentition.



**SOLUTION:** **SISU Mouthguards** have the flexibility to be reformed as teeth move. Simply place them in hot water and re-fit. This can save several trips to the dentist and saves parents from purchasing several throw-away mouthguards. Patients have commented on how thin the SISU is compared to traditional mouthguards and how comfortable they are to wear.

## QualiTouch Left & Right Gloves

Smart Practice

www.smartpractice.com

Clinician: Dr. Fiona Collins



Natural relaxed hand position



Traditional gloves

**CLINICAL PROBLEM:**

After many years of practicing dentistry, I am having more hand cramping and hand pain.



QualiTouch

**SOLUTION:** Left and right fitted gloves are manufactured differently than traditional gloves, and molded with the hand in a relaxed position. **QualiTouch** gloves are ideal especially in longer procedures, as they reduce muscle fatigue in the hand.

## Tooth & Gums Tonic

Dental Herb Company

www.dentalherb.com

Clinician: Dr. Julius E. Bunek



**CLINICAL PROBLEM:** Patients do not follow the recommended Chlorhexidine rinse regimen after periodontal therapy due to staining of teeth and altered taste sensation.

**SOLUTION:** *Tooth & Gums Tonic* provides an all natural alternative to offer patients after surgery or periodontal therapy. This powerful rinse contains essential oils that are known to have antimicrobial and anti-inflammatory properties. We found *Tooth & Gums Tonic* to be as effective as our traditional chlorhexidine rinses without the staining and patients have commented positively on the taste!

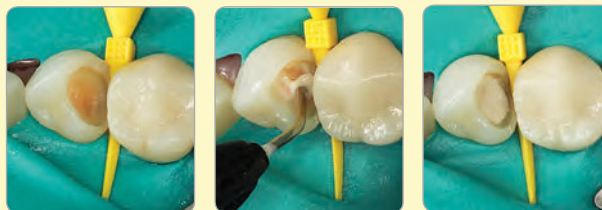


## TheraCal LC

Bisco, Inc.

www.bisco.com

Clinician: Dr. Sabiha S. Bunek



Photos courtesy Dr. Ross Nash

**CLINICAL PROBLEM:** It is time consuming to place a liner under deep restorations because most materials on the market have to be hand mixed or triturated.

**SOLUTION:** *TheraCal LC* is one of my favorite products on the market. It is a resin-modified calcium silicate filled material ideal for indirect and direct pulp capping, and as a base and liner. When preparations are close to the pulp, I generally use a glass ionomer or CaOH as a liner to promote dentinal healing and to reduce post-op sensitivity. I find *TheraCal LC* easier to use than other materials because it is dispensed in a flowable syringe, allowing for direct placement over the affected area. It is light cured so I can control my working time. This product is easy to use and provides me with consistent, effective results.

## 360 Toothbrush

Hart Felt distributed by Compac Ind.

www.compac.com

Clinician: Dr. Danny W. Qualliotine



**CLINICAL PROBLEM:** It is difficult to reach all areas of the mouth while brushing. In particular, people with limited dexterity or general physical or mental health issues have difficulty and sensitivity when brushing for prolonged periods of time.

**SOLUTION:** The *360 Toothbrush* is a new and unique way to clean your teeth. There is no plastic head containing bristles; rather, the whole head is covered by mesh-like bristles so there is no hard surface to bump or hurt the tissue. It works extremely well in small mouths and around tori. It is generally much safer for the oral tissues and is the first brush to effectively clean the lingual surfaces of the upper and lower anterior teeth. It is also very effective on the distal surfaces of upper second and third molars. There are three different models of this brush and all of them are soft and compatible with delicate oral tissues yet do an extremely efficient job of cleaning the tooth surfaces.

## Ti-Max Z95L

NSK

www.NSKdental.com

Clinician: Dr. Lori K. Brown



**CLINICAL PROBLEM:** I like the benefits associated with the use of electric handpieces; however, I still have not found one that fits comfortably in my hands.

**SOLUTION:** *Ti-Max Z95L* is lightweight and well balanced and fits nearly any brand of e-style motor. Visibility in the mouth is improved by the slim neck and slightly narrow head. Relatively quiet operation is combined with good ergonomics for user comfort. High torque and smooth operation result in procedures being performed efficiently.

## Clinpro™ 5000 Toothpaste

www.3M.com

Clinician: Lyn Vandelaar, B.S., RDH



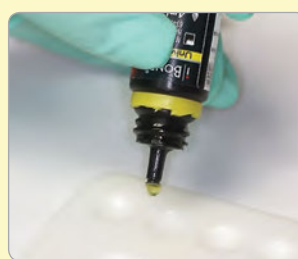
**CLINICAL PROBLEM:** Patients with dry mouth (secondary to the use of multiple medications) present to the office with numerous carious lesions and many areas of demineralization.

**SOLUTION:** With dry mouth patients, we treat cavitated lesions with resin composites or ceramics after caries removal and put them on a home preventative care program. I recommend the use of **Clinpro™ 5000** toothpaste (contains 1.1% NaF and tricalcium phosphate) twice daily to aid in the remineralization of early lesions and to prevent new lesions. I have incorporated this into my protocol for all my moderate- to high-risk caries patients.

## iBOND Universal

www.heraeus-kulzer.com

Clinician: Carol A. Reed, CDA



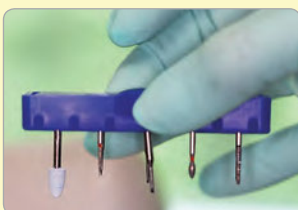
**CLINICAL PROBLEM:** As an assistant, dispensing just the right amount of bonding agent can be difficult, and extra material is often wasted when you are trying to move quickly.

**SOLUTION:** **iBOND Universal** comes in a unique drop control dispenser, allowing the clinician to dispense as little or as much as necessary with control and efficiency. **iBond Universal** is a light cure adhesive compatible with all bonding techniques, for all indications, and with all dental materials. When tested in our laboratories the bond strength of **iBond Universal** in self-etching mode was 32 MPa for dentin and 23 MPa for enamel.

## Bur Butler

www.shofu.com

Clinician: Peri D. Nelson, B.A.



**CLINICAL PROBLEM:** Our autoclavable bur blocks tip over during sterilization, spilling burs. This metal block also causes rusting on bur shanks if not dried properly.

**SOLUTION:** **Bur Butler** has unique silicone rings which hold burs and diamonds tightly in place while undergoing ultrasonic cleaning and sterilization. Additionally, the silicone base will never rust with prolonged use. Our Infection Control laboratory evaluated the **Bur Butler** design and how it impacted routine reprocessing effectiveness. In this study, we found that when challenged with heavy loads of organic debris the **Bur Butler** allowed contained burs to be effectively cleaned and sterilized with routine reprocessing procedures.

## Pro-Matrix

www.medicom.com

Clinician: Dr. James G. Olsen



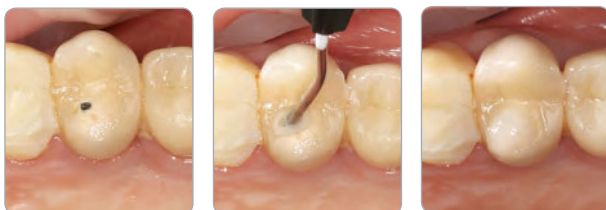
**CLINICAL PROBLEM:** When removing an old amalgam due to recurrent decay we will often discover significant damage to the underlying tooth. After removing all of the decayed portion of the tooth, there will not be much left for a matrix band to grab on to. Bleeding and fluid contamination are also challenges to overcome in placing a new restoration. A matrix that requires minimal adjustment is helpful.

**SOLUTION:** **Pro-Matrix** bands are able to grab and hold on to teeth with limited support. They even hold well on to teeth that have significant taper in their prep design. **Pro-Matrix** does a good job of creating an adequate seal at the cervical portion of the tooth, which helps keep the prep clean and dry for easy placement of any material that may be needed. The convenience of a disposable matrix and band which has been set up in advance makes the **Pro-Matrix** an excellent choice for handling this challenging situation.

## NovaPro Flow™

Nanova Biomaterials

www.nanova.myshopify.com  
Clinician: Dr. John W. Farah



**CLINICAL PROBLEM:** With older PFM crowns I often have patients concerned with the esthetics of chipped porcelain. If the patient elects not to replace the crown, I attempt to replace the chipped porcelain with composite. I prefer flowable composite but find that most are often too translucent or are low in strength.

**SOLUTION:** *NovaPro Flow™* offers me the esthetics and strength I need for porcelain repair procedures. The shades are more opaque than traditional flowables and are perfect for blocking out underlying metal while providing esthetics. *NovaPro™* is the first composite restorative material to incorporate calcium phosphate nanofiber technology in conjunction with nanoparticles, thereby increasing the strength of the material.

## Q-Etch UF

BJM Laboratories

www.bjmlabs.com  
Clinician: Dr. Lori K. Brown

### CLINICAL PROBLEM:

Traditional phosphoric acid etch can be runny, making selective etching a challenge.



**SOLUTION:** *Q-Etch UF* is a 37% phosphoric acid etch gel with a thickening agent that is designed to stay where you place it. It is blue in color and rinses off easily. I love having the option of a higher viscosity etch!



## STEAMPlus™ Type 5 Integrators

Crosstex

www.crosstex.com  
Clinician: Peri D. Nelson, B.S.



**CLINICAL PROBLEM:** We use biological indicators once a week to monitor our sterilizers but is there a less expensive way to ensure sterility in the interim?

**SOLUTION:** Yes, *STEAMPlus Type 5 integrators* by Crosstex. These are a form of chemical indicators that react to all three sterilization parameters (time, temperature, and pressure). Type 5 integrators do not replace biological indicators, however, they provide immediate readout.

## Uvener Direct Composite Veneers

Dental Art Innovations Pty Ltd

www.uvener.com  
Clinician: Dr. Michelle Elford



Photos courtesy of Dr Victor Acosta, Paraguay



### CLINICAL PROBLEM:

Composite veneers can be challenging and very time consuming, especially if they are not a routine procedure; however, they can fill a specific need for a patient who is not ready to commit to porcelain veneers.

**SOLUTION:** *Uvener* is a system of templates which guide the esthetics of composite veneers. The templates can offer a more convenient and efficient process to a practitioner who does not frequently hand sculpt composite veneers. Because the system uses the golden rule of proportions as its standard, there may be less time spent determining proper lengths, widths and midlines. *Uvener* can also be a great starting point for an experienced practitioner to build on when completing large cases.

# Microflex Sensation® Exam Gloves

++++ 1/2

*Microflex brand by Ansell*

www.ansell.com

91%  
overall  
rating

## Description

**Microflex Sensation® Nitrile Exam Gloves** carry a specialized “low dermatitis potential” claim by the Food and Drug Administration (FDA) for demonstrating a reduced potential for irritation caused by chemical additives. They are ambidextrous and powder-free with textured fingertips and beaded cuffs. **Microflex Sensation Gloves** are a medium blue color and are available in extra-small, small, medium, large, and extra-large in boxes of 100.

## Unique Features

The manufacturing process of **Sensation Gloves** is a step forward in reducing dermatitis. The nitrile is produced without accelerators that can cause skin sensitivity. Dental personnel who experience skin irritation despite using non-latex products may have less redness and itching. This glove is also great for users who are concerned about the overall health of their skin and are interested in not coming into contact with unnecessary chemicals.

## Consultants' Comments

- “I suffer from dermatitis and found these gloves very helpful with my condition.”
- “**Sensation Gloves** provide substantially better tactile sensitivity compared to the other gloves we use.”
- “The gloves never tore during the evaluation.”
- “I could use small instruments without slipping.”

## Clinical Tip

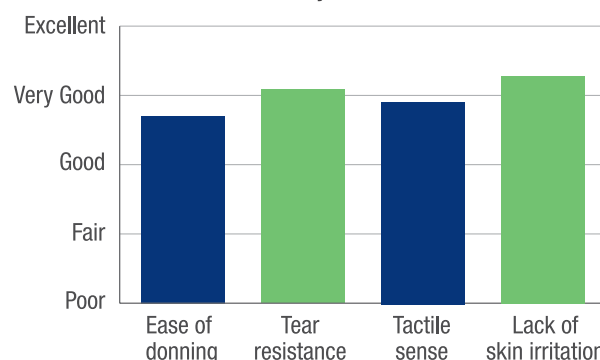
- Place gloves on dry hands.

## Evaluation Highlights

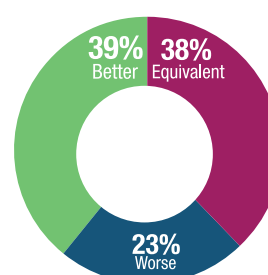
**Sensation Gloves** were evaluated by 47 consultants in 1,685 uses.

- Gloves offer a high level of tactile sensitivity.
- Fit is favored by those who like gloves to feel snug; others used a size larger.
- They do not tear during donning and use.
- Users noticed less skin irritation.
- Odor dissipates shortly after removal from the box.

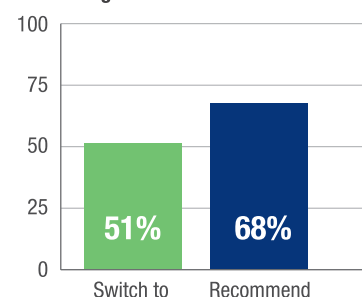
Key Features:



Compared to Competitive Products:



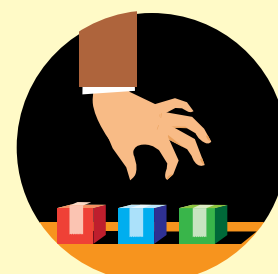
Percentage of Consultants Who Would:



THE DENTAL  
ADVISOR™

## Did you know?

Many products reported on in THE DENTAL ADVISOR have free samples available for our readers. To sample products, go to the article and look for this icon, or go to [www.dentaladvisor.com/clinical-evaluations](http://www.dentaladvisor.com/clinical-evaluations) and view a list of samples available.



Order Samples



SpeedCEM Plus

Ivoclar Vivadent, Inc.  
www.ivoclarvivadent.com

98%  
rating at  
recall

**SpeedCEM<sup>®</sup> Plus** is a self-adhesive, self-curing resin cement with a light-curing option. This cement offers an ideal combination of performance and ease of use. Its formulation has been optimized for use in conjunction with restorations made of zirconium oxide and metal-ceramics, and for the cementation of high-strength ceramics on implant abutments. Strong self-curing capabilities offer an additional measure of reliability when seating opaque restorations.

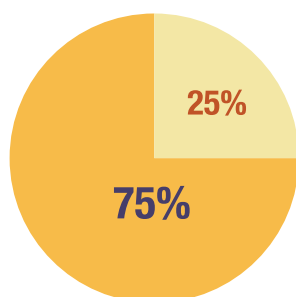
## Purpose

The purpose of this study was to evaluate the clinical performance of **SpeedCEM Plus** self-adhesive resin cement after two years.

## Consultants' Comments

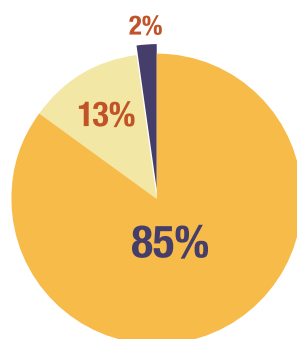
- "Retention has been excellent."
- "No long term issues with sensitivity."
- "I have not seen any marginal discoloration."

**Fig. 1: Age of Restorations Evaluated at Recall.**



1-1.5 years old  
1.5-2 years old

**Fig. 2: Types of Restorations Evaluated at Two Years.**



Single crowns  
Implant crowns  
Bridges

## Clinical Evaluation Protocol

A total of 136 ceramic single-unit crowns and bridges were fabricated and cemented with **SpeedCEM Plus** over a seven-month period. Of the 122 restorations recalled, 25% were 1-1.5 years, 75% were between 1.5-2 years old (Figure 1). These included single crowns (104), implant crowns (2) and bridges (16) (Figure 2). Seven percent were anterior crowns and 93% were posterior crowns. The restorations cemented with **SpeedCEM Plus** represented a wide range of material including porcelain-fused-to-zirconia, pressed and CAD/CAM lithium disilicate ceramic and full-contour zirconia.

## Clinical Observations After Two Years

### Lack of postoperative sensitivity

Lack of postoperative sensitivity was excellent (Figure 3). Over a two-year period, five patients experienced minor to moderate postoperative sensitivity. Two teeth had a history of extensive treatment and ultimately needed root canal treatments. Ninety-six percent of the restorations experienced no sensitivity.

### Esthetics

After two years in service, clinicians noted exceptional esthetics. None of the restorations exhibited evidence of marginal discoloration related to the cement (Figure 3). Two ceramic restorations were noted as being opaque or lacking ideal esthetics at cementation. Ninety-eight percent of the crowns and bridges maintained excellent esthetics.

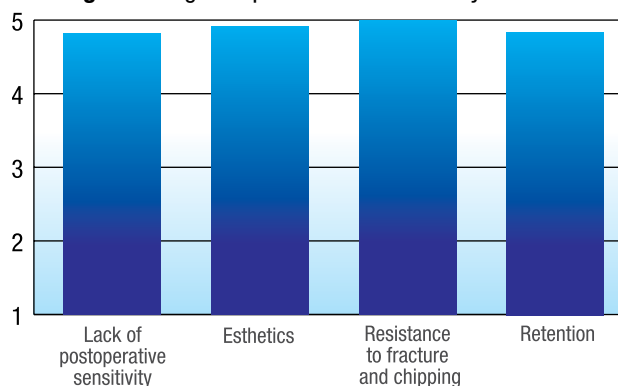
### Resistance to Fracture/Chipping

None of the restorations cemented with **SpeedCEM Plus** fractured or chipped (Figure 3).

### Retention

Five of the 122 restorations recalled debonded over the two-year recall period. All five were molar restorations and were attributed to the clinical conditions presented by the patient than related to the cementation system. A retention rate of 96% is excellent. (Figure 3).

**Fig. 3:** Ratings of SpeedCEM Plus at two-year recall



Restorations were evaluated on a 1-5 rating scale:  
1 = poor, 2 = fair, 3 = good, 4 = very good, 5 = excellent

## Conclusions

**SpeedCEM Plus** has proven to be an excellent, self-adhesive resin cement. After two years in service, there was very little evidence of marginal discoloration, sensitivity or debonds. The ultimate success of a restoration is strongly dependent on the retention. **SpeedCEM Plus** is a reliable, self-adhesive resin cement and received a 98% clinical performance rating.

## THE DENTAL ADVISOR UPCOMING LECTURES

■ **Friday, August 6, 2016:** Dr. Sabiha Bunek

### Enhancing the Strength and Esthetics of Zirconia to Achieve Restorative Success

American Academy of Esthetic Dentistry Annual Meeting, Dana Point, CA



■ **Friday September 23, 2016:** Dr. Sabiha Bunek

### Using Modern Material Science and Technology to Enhance Restorative Success for Indirect Restorations

Delta Dental Foundation Lecture, Traverse City, MI

■ **Friday, October 7, 2016:** Dr. Sabiha Bunek

### Using Modern Material Science and Technology to Enhance Restorative Success for Indirect Restorations

CEREC Doctors Mentor Meeting, Scottsdale, AZ

■ **Wednesday, October 12, 2016:** Peri Nelson

### Dental Unit Waterlines: Facts vs. Myths

THE DENTAL ADVISOR Education Center, Ann Arbor, MI



■ **Friday, November 11, 2016:** Dr. Julius Bunek

### Managing & Preventing Implant Complications: A Team Approach

Wichita District Dental Society, Wichita, KS



■ **Winter, 2017:** Dr. John Molinari

### What's Bugging The Dentist: A Hands-On Infection Control Workshop

Presented at 2017 Yankee Dental Meeting, Boston, MA, and Chicago Midwinter Meetings



■ **Friday, February 10, 2017:** Dr. Fiona Collins

### Infection Prevention: Keeping You and Your Patients Safe

Wichita District Dental Society, Wichita, KS



■ **Friday, March 3, 2017:** Dr. Sabiha Bunek

### Digital vs. Traditional Impressions and Cementation and Bonding for Ceramics

Wichita District Dental Society, Wichita, KS



# Micro-Touch NitraFree™ Exam Gloves

++++ ½

*Micro-Touch brand by Ansell*  
www.ansell.com

91%  
overall  
rating

## Description

**Micro-Touch NitraFree™ Gloves** are pink nitrile exam gloves. Ansell donates \$1 per case sold to The Breast Cancer Research Foundation®. They are ambidextrous and powder-free with textured fingertips and beaded cuffs. **Micro-Touch NitraFree Gloves** are soft and comfortable, yet durable and available in sizes extra-small, small, medium, large, and extra-large in boxes of 100.

## Unique Features

**Micro-Touch NitraFree** gloves are manufactured without sulfur accelerators that can cause skin sensitivity.

## Evaluation Highlights

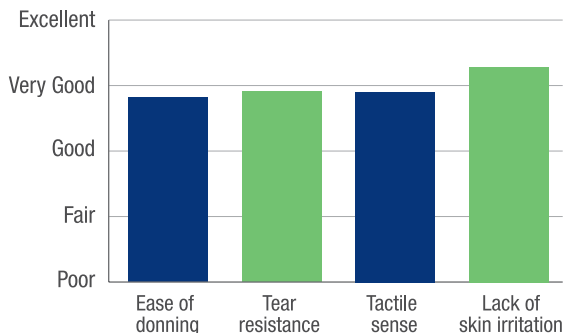
**Micro-Touch NitraFree Gloves** were evaluated by 51 consultants in 1881 of uses.

- Gloves have a high level of stretch for increased comfort.
- Pink color is easy on the eyes.
- They do not tear during donning and use.
- Users noticed less skin irritation.
- Textured fingertips provide good grip.

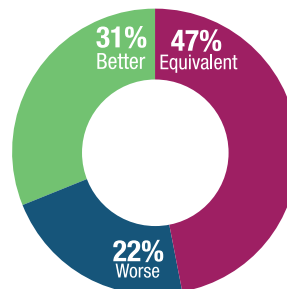
## Consultants' Comments

- "Great tactile sense."
- "I felt confident wearing these gloves."
- "Very good tear resistance."
- "Extremely stretchy."
- "I could use small instruments without slipping."

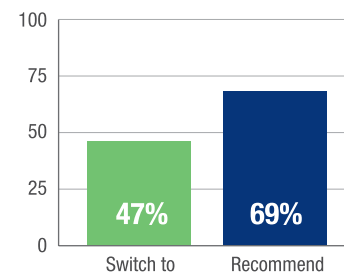
Key Features:



Compared to Competitive Products:



Percentage of Consultants Who Would:



### SPECIAL THANKS TO:

#### Select Senior Clinical Consultants (Over 20 years):

J. Amara, CT · R. Fisher, OH · W. Gregory, MI · E. Katkow, MD · J. Lockwood, MI · J. Mayer, OH · W. Nagy, TX · G. Poy, MI · J. Shamraj, MI · R. Trushkowsky, NY · P. Yaman, MI

#### Senior Clinical Consultants (15-19 years):

K. Baker, TX · F. Berman, PA · J. Bostic, OH · L. Brimhall, MT · M. Briskin, NY · L. Brown, MI · W. Brownscombe, MI · R. Ciccone, MI · C. Colbert, MI · M. Conrad, PA · J. Dingman, WI · R. Dost, VA · J. Doueck, NY · M. Dwoskin, MI · M. Eannaccone, NY · R. Engle, IL · K. Fairbanks, MI · M. Feinberg, NY · K. Fischer, IN · G. Franco, NY · N. Garlisi, OH · K. Goodman, MI · S. Graber, IL · P. Grandsire, NY · E. Gutman, NY · D. Haas, Ontario · K. Hamlett, TX · S. Harlock, MI · G. Hart, OH · R. Herwig, KS · J. Kaminski, MI · R. Kaprielian, NJ · M. Kastner, OH · D. Keren, NY · M. LaMarche, WA · J. Leitner, MI · S. Lever, MD · R. Lezell, MI · M. Livernois, NC · M. Man, NY · B. Manne, FL · N. Mansour, MI · N. Markarian, CA · C. McLaren, MI · J.W. Mikesell, IL · R. Mizrahi, NY · G. Mosso, PA · E. Mosso, PA · J. Nash, MI · A. Nazarian, MI · E. Odenweller, OH · R. Oshrain, NY · J. Paris, TX · D. Parris, GA · M. Patel, MI · D. Peterson, MD · T. Pieper, WY · D. Pitak, MI · V. Plaisted, NY · D. Qualliotine, NC · G. Raichelson, Ontario · C. Reed, MI · G. Reskakis, NY · K. Schwartz, FL · J. Shea, MO · B. Shumaker, NJ · B. Sims, NY · P. Symeonides, NY · H. Tetalman, OH · C. Trubschenck, CA · S. Ura, NH · W. Walcott, MI · M. Waranowicz, MI · L. Wee, MI · D. Wojtowicz, MI · H. Yeung, CA · M. Zahn, MI · P. Zanetti, MI · S. Zimmer, MI

#### Clinical Consultants (14 years or less):

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#### Laboratory Consultants:

Apex Dental Milling, MI · Bullinger Dental Lab, MI · Centric Dental Laboratory, TX · Cornerstone Dental Studio, Inc., MI · David's Dental Laboratory, NY · Expertec Dental Lab, MI · Heritage Dental Laboratory, IL · Technique Crown and Bridge, Inc., NC