Instruction for Use

1. Local anesthesia and placement of rubber dam

Because the preparation will be partially subgingival and the placement of a rubber dam is suggested, an appropriate local anesthetic should be administered. Before rubber dam placement please check whether there is any extrusion of the antagonist tooth triggered by carious lesion or mesial trusion and occlusion. Occlusal reduction is carried out to obtain clearance of approximately 1~ 1.5 mm. However, considering the occlusion conditions, partial or no preparation may be required.

2. Preparation of the clinical tooth.

Preparation of the clinical tooth is important for the seating of a stainless steel crown and gaining the maintenance force for it. The mesial and distal contact points are cleared for the space from neighboring teeth, and occlusal reduction is for the space from antagonist tooth.

A. Occlusal reduction

Using a flat-ended diamond bur or stone, make occlusal reduction by 1~ 1.5 mm.
When using a rubber dam, decide the level of removal, considering the gingival ridge of neighboring teeth.
As the level of occlusal reduction can vary depending on the occlusal plan of the tooth, the reduction should be minimal so that the height of a clinical crown is not too short.

B. Mesio-distal reduction

Using a thin and long diamond bur or stone, remove the mesial and distal surface.
The purpose of Mesio-distal reduction is to make space for seating a stainless steel crown while reducing the clinical tooth minimally. Wedge the clinical crown so that the mesial and distal contact points can be cleared: a probe can easily pass through the gap between mesial and distal surface and neighboring teeth. The gingival finishing line should be a feather edge with no ledges or steps detectable.

C. Finishing preparation

Remove all angles, making the shape of clinical crown round. Though you can remove bucco-lingual surfaces to adjust the size of clinical crown, minimal removal is recommended. Preserve the natural undercut on the bucco-lingual surface of primary molar, for the maintenance force of stainless steel crown.

3. Chioice and adjustment of a stainless steel crown.

Select a stainless steel crown of the right size.
Using calipers, the correct size is obtained by measuring the mesio-distal width between the contact points of the neighboring teeth. It is suggested to use the smallest crown that will fit.
After removing the rubber dam to check the occlusal clearance and to place stainless steel crown, care must be taken to avoid the patient inhaling or swallowing the crown.

A. Choice of a Kids Crown

It is advisable to measure the mesio-distal length of clinical crown and choose a stainless steel crown of the same size.

B. Adjustment of a Kids Crown

Cut and adjust the gingival area of the chosen Kids crown so that it can fit well with marginal gingiva. The marginal gingiva will blanch somewhat with a well fitting crown as it seats. If excess gingival blanching is seen the crown will need to be trimmed. It may be helpful to scribe a line on the crown along the gingival contour with a sharp explorer. The crown can then be trimmed to 1 mm below the scribe line. Afterwards, the crown margins should be thinned slightly and smoothed with green stone and rubber point

C. Marginal adaptation

Trim the crown with a crown scissors or an abrasive wheel and crimp with appropriate crimping pliers as necessary to assure that good marginal adaptation is achieved

D. Cementation and seating

Following all adjustments, the crown should be thinned slightly at the margin using a 'heatless' stone. This should be followed by a final polish using a rubber wheel.

At this point the crown is ready to be cemented. Suggestions for cementation are; glass ionomer, modified glass ionomer, polycarboxilate or zinc phosphate cements. Stainless steel crowns require much more cement than permanent crowns. (This has been moved from 3A) To seat the crown on a prepared tooth it is placed lingually and rolled over the preparation to the buccal margin. It is important to choose the smallest crown that makes soft resistance. On placement, the crown will often make a 'click' sound as it snaps over the gingival undercut area.

When placing the crown to seat correctly and firmly, excess cement should flow out at the margins. If excess cement is not visible, it could be a sign that not sufficient cement was put into the crown. This may lead to early failure!

Allow the patient to bite on a cotton roll until setting is completed. Excess cement can be removed with an explorer, knotted floss or appropriate scaler.A final marginal and occlusal check should be made to assure patient comfort.

Storage : Please store in a sealed container out of the direct rays of the sun at normal room temperature

CAUTION !

- **Before use, PLEASE read the 'Instructions For Use'**
- **Take care not to injure yourself when handling Kids Crowns**
- **Avoid contact with the crown if you suffer from metal allergies**
- **This product should be used by dental specialists only following the 'instructions for use'**
- **This product should NOT be used for any purpose other than described in the instructions for use**
- **This is a disposable product and should NOT be used more than once**
- **For further information, please contact your supplier or dental dealer**

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FAMILY SITE