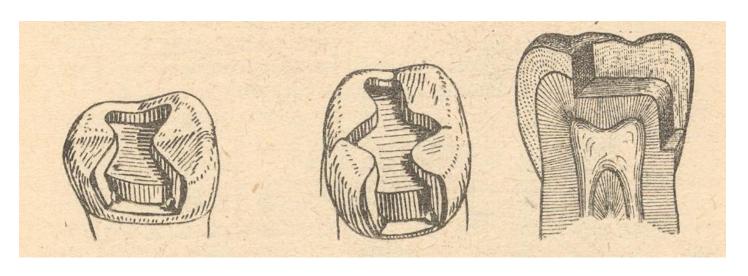
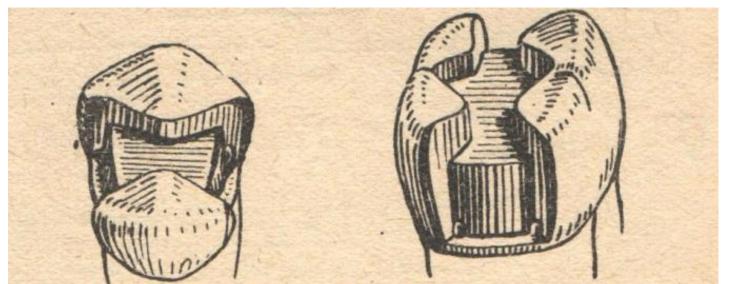


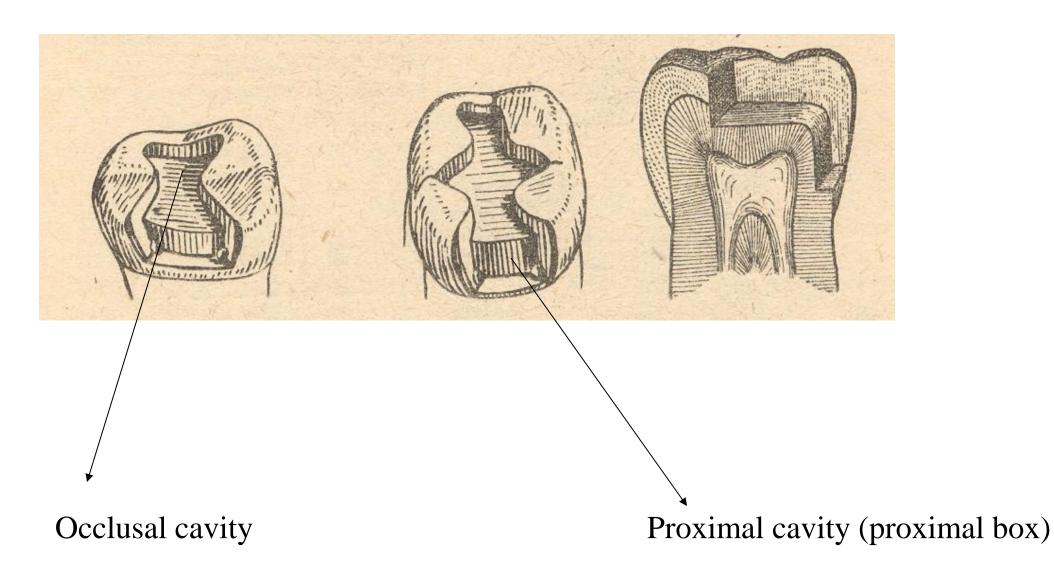
Clas II. caviry recapitulation

Name parts of this cavity, name the walls. What is MO. Od and MOD cavity? Wnhat is isthmus, where we find it?

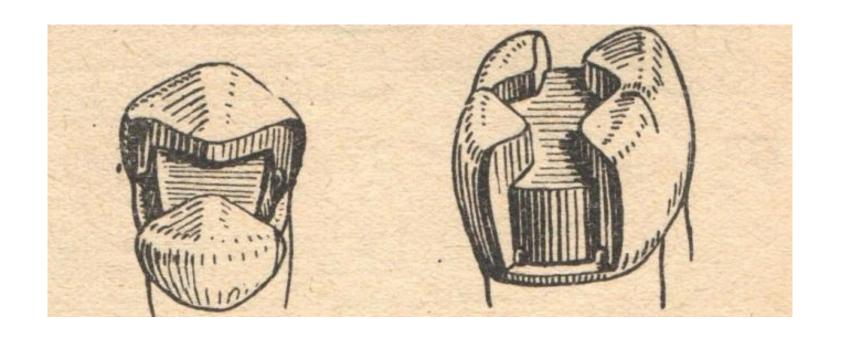




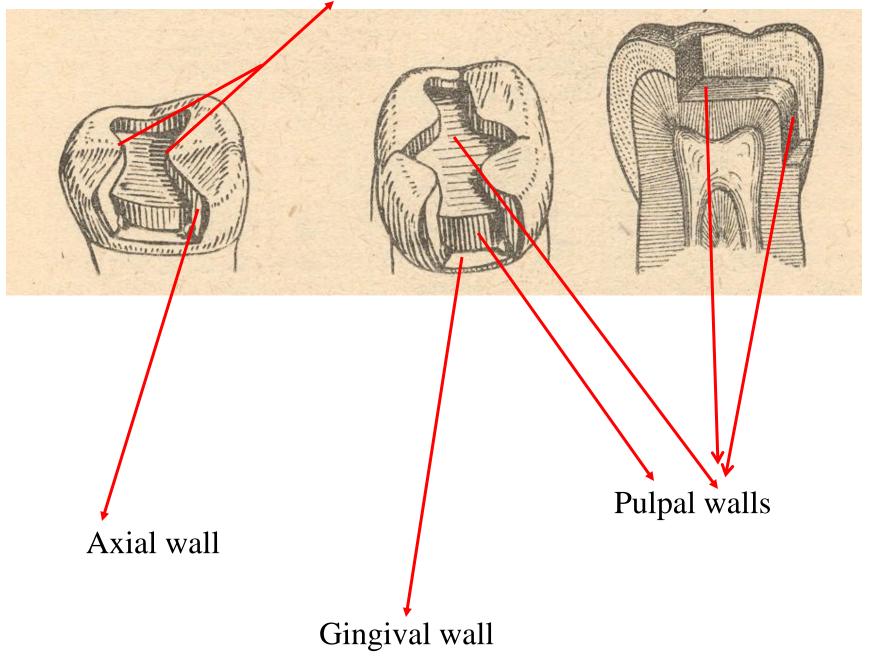




MO, OD – one proximal wall is affected, mesioocclusal cavity (MO) or distal – occlusodistal cavity (OD)



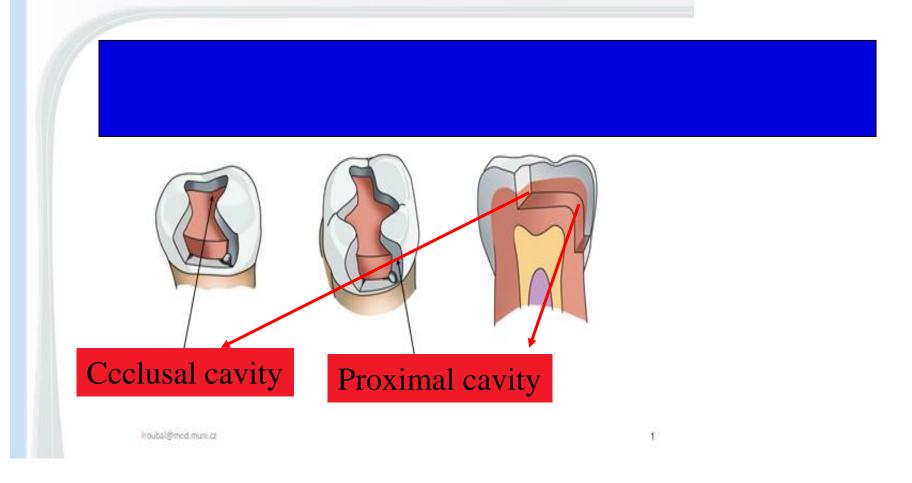
MOD . Both proximal walls are affected



Which two main types of the class II. preparation do you recognise?



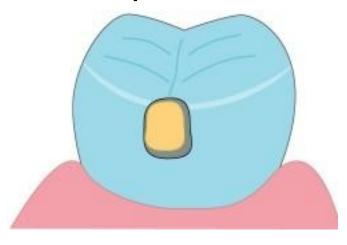
1. Conventional preparation acc. to Black – compoused cavity

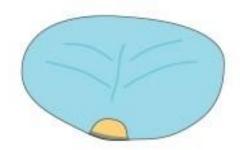




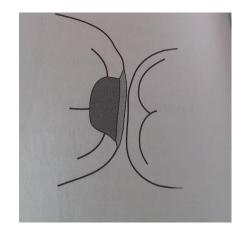
2. Slot preparation

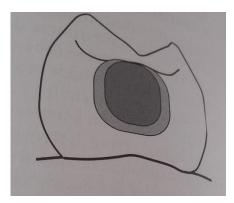
Principle





Detail





The cavity does have not extension on occlusal surface, it is open occlusally



Slot preparation – defect, cavity and filling









When the composite fillings can be used?



Composite materials – indications II.class

- Small moderate cavities
- Large cavities onlay, inlay, crown
- Dry operating field (absolutely) rubberdam
- Excellent oral hygiene
- Patients compliance

Amalgam does not have the substitution – maybe bulk composites – the topic of one of the next lectures.



Which contraindications of composite filling materials do you know?

See indications



How do we prepare the enamel margins for composite materials in class II.?



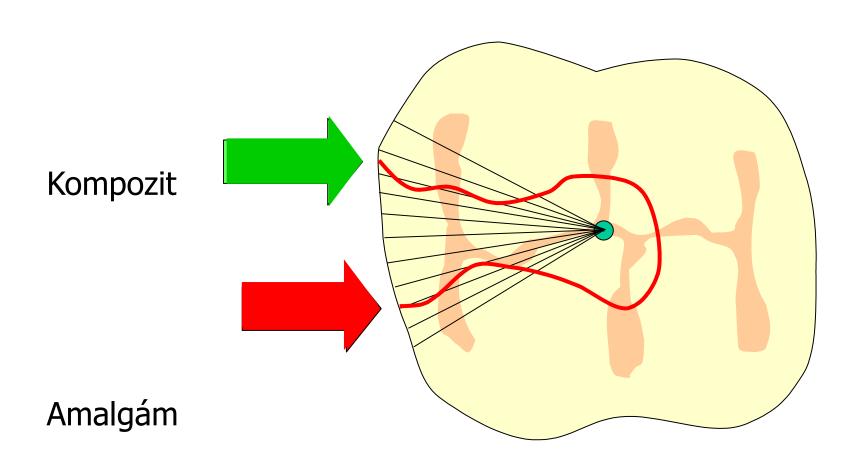
Preparation of enamel margins

Enamel on axial walls must be beveled (red coded diamond) and also the outer edge of the gingival wall must be beveled (if the gingival wall is situated in enamel)

Also hand instruments (chisels) can be used for the gingival wall



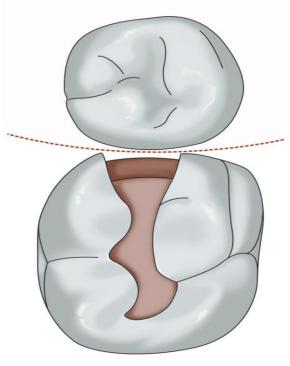
Interproximal vertical margins



How do we establish the position of the axial walls?



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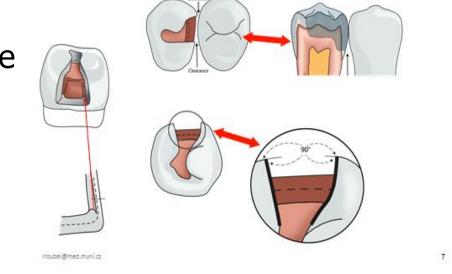
Axial walls

Study the contact area (contact point): The axial walls (cavosurface margins) are approx. o 0,5 mm vestibulary and orally Over this area.

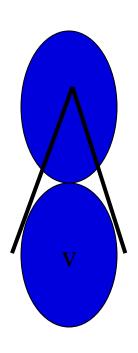
The contact of the treated tooth is made of the restorative materials.

Gingival wall is parallel with the cementoenamel junction and it is situated appr.

0,5 mm below free gingiva.



American rule (estimation)



Tangents from the middle of treated tooth to the next tooth – where these cross the treated Tooth there are borders of the preparation

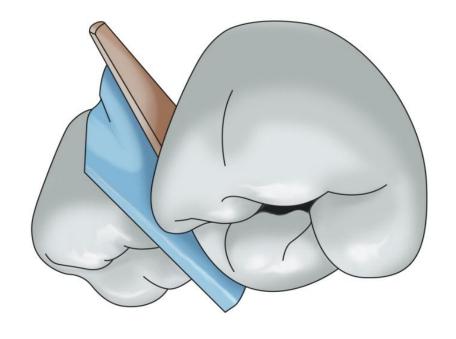
How do we protect the teeth next to the preparared tooth?



Protection of the neighbour tooth

- Wooden wedges and the metal strip
- Special plastic wedges with the
- metal foil







Which tool is necessary when one or more proximal walls are missing?



Matrix

➤ Matrix primarily is used when a proximal surface is to be restored

- The objectives:
- Provide proper contact
- Provide proper contour
- Confine the restorative material
- Reduce the amount of excess material

In some cases id important for good setting of the material



Matrices for II.nd class

Circular and sectional matrices

>Circular matrices round the tooth

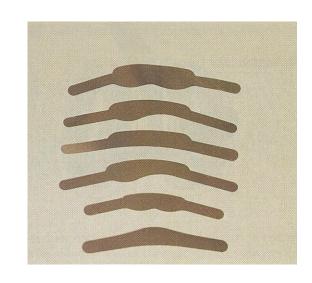
They are used in combination with the matrix retainer.

Sectional matrices do not round the tooth, the proximal surface only.

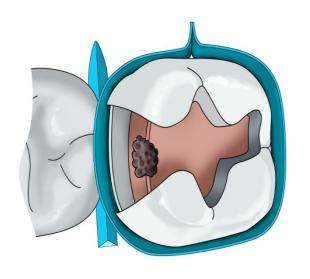


Circular matrix

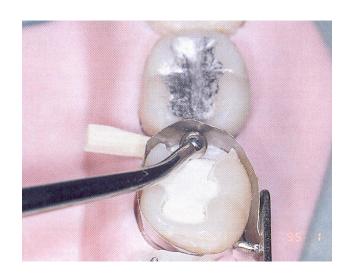
Matrix Hawe Neos Matrix retainer ivory 8 (universal or paired)





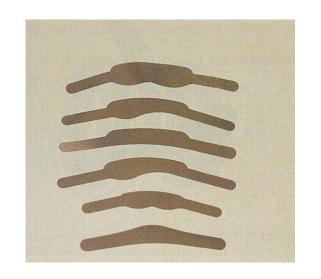


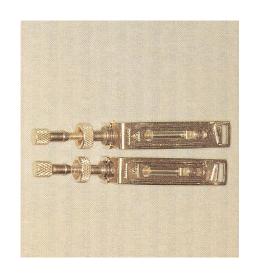






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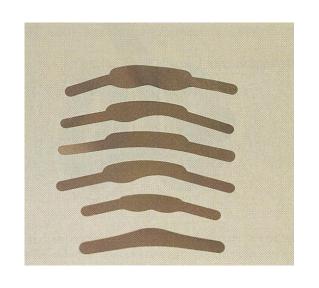






Which tools are here in this picture?

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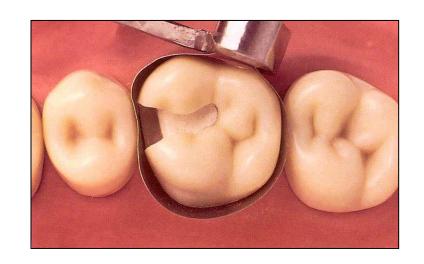


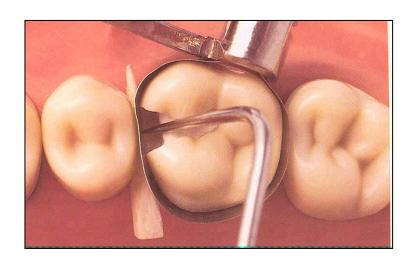
matrix band

matrix retainer

wedges

Which function does the wedge have?







Wedges

> Wooden wedges

- tighten the matrix band
- compress the gingiva
- separate the teeth





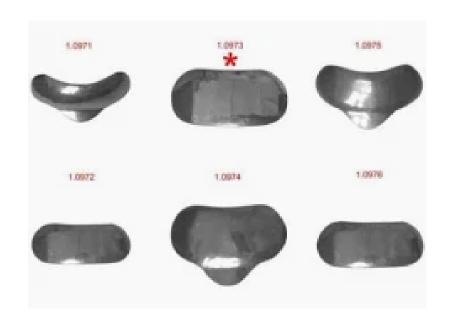
Wedging

- ➤Slip the matrix band over the tooth (apical to the gingiva margin 0,5, 1 mm)
- >Tighten the matrix, check it with probe
- ➤ Place a wedge
- ➤ Turn the retainer ¼ counterclockwise
- Contour the band





Segmental (sectional) matrices







What do we need for the work with sectional matrices?



Tools for the work with sectional matrices

Separator (separation ring)



Forceps (for rubberdam clamp or similar)

Wedge







Describe sequences of operation by making the composite filling – class II.



Sequence of operation

- Preparation
- Bevel the enamel on axial walls and outer edge of gingival wall (if located in enamel)
- Placement of the matrix
- Adhesive procedure (acid etching, washing, priming and bonding)
- Placement of the composite material layer by layer
- Curing



Finishing and polishing

Why do we perform the incremental technique? (Layer by layer?)



The material must be placed layer by layer, max 1.5 mm

Good polymerization

 Decreasing of the polymerization stress which is connected with the polymerization shrinkage (explanation in next lecture)

– Aesthetics

