

3%, 7.5% and 9.5% hydrogen peroxide +
10%, 16% and 22% carbamide peroxide
advanced tooth whitening system

INSTRUCTIONS FOR USE FOR INTERNAL AND EXTERNAL BLEACHING OF NON-VITAL TEETH USING POLA DAY / NIGHT

SUGGESTIONS FOR SAFER NON-VITAL BLEACHING

1. Verify adequate endodontic obturation.

The root canal filling must be dense and asymptomatic (showing no evidence of disease). The root canal should be completed at least a month before bleaching. The quality of root canal obturation should always be assessed clinically and radiographically prior to bleaching. Adequate obturation ensures a better overall prognosis of the treated tooth. It provides an additional barrier against damage by peroxide to the periodontal ligament and periapical tissues.

2. Use protective barrier.

This is essential to prevent leakage of bleaching agents which may infiltrate between the gutta-percha and root canal walls, reaching the periodontal ligament via dentinal tubules, lateral canals or the root apex. The ideal barrier should protect the dentinal tubules.

Caution: Seal gutta-percha to a level which is coronal to potential communication with periodontal tissue.

3. Avoid acid etching.

Acid etching has not proven to be beneficial (Casey et al 1989) and the use of caustic chemicals in the pulp chamber is undesirable, as periodontal ligament irritation may result.

4. Recall patients periodically.

Bleached teeth should be frequently examined both clinically and radiographically. Root resorption may occasionally be detected as early as 6 months after bleaching. Early detection improves the prognosis as corrective therapy may still be applied.

MATERIAL REQUIRED BEFORE PROCEDURE

Custom make bleaching tray for the arch that the non-vital tooth is located.

Trim to fit one tooth on either side of tooth to be treated.

Procedure

1. Take pre-operative X-ray to verify the presence of an acceptable root canal treatment and the absence of apical pathology.
2. Open lingual access to pulp chamber and remove all composite, base material and gutta-percha to 1-1.5 mm below the cemento-enamel junction (CEJ).
3. Place a 1 mm thick protective barrier eg a conventional glass ionomer over the exposed gutta-percha.
4. Take a periapical radiograph to check that the barrier has been well placed.
5. Clean the pulp chamber with water.
6. Fill pulp chamber with Pola Day / Night.
7. Load enough Pola Day / Night into the bleaching tray (only into the compartment of the non-vital tooth).
8. Carefully seat bleaching tray into the patient's teeth.
9. Leave the Pola Day / Night in for about 60 minutes.
10. Check shade. If sufficient lightening has occurred, the bleaching procedure may be terminated.
11. Otherwise, remove tray and rinse tooth and pulp chamber.
12. Refill the pulp chamber with Pola Day / Night. If the patient is not happy to stay for another hour, the chamber can be temporary sealed off at this stage using a glass ionomer cement such Riva Protect (SDI Ltd) in a pink shade .
13. Dispense more Pola Day / Night for continuing external bleaching at home.
14. Recall patient 2-3 days later for assessment.

Note: The longer the tooth has been discoloured, the longer it will take for the bleaching treatment to remove the discoloration.

STORAGE AND SHELF LIFE:

Store in cool place (2°-25°C / 35°-77°F). Do not use after expiration date.

PRECAUTIONS:

To be used under the supervision of a dentist. Keep out of reach of children and pets. Not to be used by pregnant or lactating women or children under 14 years old. Patients with a history of chemical allergies are advised to carry out allergy testing by a specialist before using these products. Discontinue use if any unusual sensitivity or reactions occur and consult your dentist. Do not inject Pola Day or Pola Night into the body. CAUTION: FEDERAL LAW RESTRICTS THIS DEVICE TO SALE BY OR ON THE ORDER OF A DENTIST. MSDS available at www.sdi.com.au or contact your regional representative.

FIRST AID:

Eye (contact): Wash thoroughly with water and seek medical advice if symptoms persist. Skin (contact): Wash thoroughly with water and seek medical advice if symptoms persist. Ingestion (large amount): Drink plenty of milk or water and seek medical advice.

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