

polaoffice

ADVANCED TOOTH BRIGHTENING SYSTEM

INSTRUCTIONS FOR USE

Pola Office is a hydrogen peroxide based in-office tooth brightening system requiring minimal chair time. It is a neutral p and contains desensitizers to maximize patient comfort.

- INDICATIONS FOR USE: Lightly etching away surface staining on vital teeth Lightly etching away surface staining on non-vital teeth. Assisting in the brightening of discoloured teeth Removal of surface stains on teeth discoloured by Medications, such as tetracycline, minocycline Fluorosis Food related stains Age dependent changes

COMPOSITION: Pola Office Liquid

| Pola Office Liquid | 35% Hydrogen peroxide 65% Water |
|--------------------|--|
| Pola Office Powder | 73.26% Thickeners 26.2% Catalysts 0.04% Dye 0.5% Desensitizing agents |
| Gingival Barrier | 83.95% Methacrylic ester 16% Silica 0.04% Pigment 0.01% Butylated hydroxy toluene |

NET WEIGHT: Depending on kit purchased. Please refer to outside of box: <u>Pola Office: 1 syringe and 1 pot:</u> 0.3g Bleach powder 2.25g Hydrogen peroxide liquid 1g Gingival Barrier

Pola Office Bulk Kit:

3g Bleach powder 22.5g Hydrogen peroxide liquid 3g Gingival Barrier

- PRECAUTIONS: 1. For professional use only. 2. Patient must wear protective eyewear. 3. Operators must wear gloves, mask and protective eyewear. 4. Do not use on pregnant or lactating women. 5. Do not use on children under 14 years of age. 6. Do not use the Gingival Barrier on any persons having known r allernies.
- Do not use the Gingival Barrier on any persons naving known callergies.
 Do not use Pola Office on any persons having known peroxides allergies.
 Anyone with a history of chemical allergies is advised to undergo allergy checks before treatment.
 Do NOT anaesthetize patient.
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 Do Not allow mixed gel or Pola Office Liquid to come in contact with skin, eyes and soft tissues.
 Pol Office will not lighten any restorative materials.
 Do not use on patients with extremely sensitive teeth.

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- RST AID: SKIN/TISSUES (contact): Immediately wash thoroughly with w Apply a slurry of sodium bicarbonate and water to the affected area. Seek medical attention if symptom persists. EYES (contact): Open the eye wide and thoroughly wash for 15 minutes with running water. Seek med vater
- nning water. Seek medical Attention. INGESTIOD: Rinse mouth with water. Gargle with salt water and drink lots of milk. Seek medical attention if symptoms persist. INHALATION (powder): Remove to fresh air. If breathing is difficult, seek medical attention.

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

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- S: Select appropriate candidate. Note: Not everyone is suitable for in-office brightening e.g. patient with translucent teeth or in the Vita* C group. Patient must have good overall health. Seal all exposed roots and restorations. Inform patient that results are not guaranteed as the removal of stains varies between patients. Acid etching before treatment is NOT recommended. Large diameter suction tips are not recommended as they can spread the gel to other areas. Mild discomfort in teeth during treatment can be a common side effect. If patient experiences sensitivity during light curing, move the tip slightly away from the tooth. If this doesn't work, remove gel and rinse the affected area. Sases other possible causes. Delay any esthetic restorations for 2 to 4 weeks after treatment. Advise patient not to smoke, consume highly coloured, hot or cold foods or beverages for at least 2 days. Treat any post-operative sensitivity with a desensitising gel or toothpaste. Prescribe Pola Day or Pola Night to maintain brightness if desired. A patient consent form is available for download at www.sdi.com.au **STRUCTIONS FOR VITAL TOOTH REIGHTENING-**7. 8.
- 9. 10. 11.
- 12. 13.

- www.sdi.com.au
 INSTRUCTIONS FOR VITAL TOOTH BRIGHTENING:
 1. Determine and record pre-operative shade. Please follow this Vita* shade guide arrangement according to degree of brightness: B1+A1+B2+D2+A2+C1+C2+D4+A3+03+B3+A3.5+B4+C3+A4+C4
 3. Clean teeth with ONLY a flour based purnice.
 3. Place check retractors and then cover exposed lip surface with petroleum gel.
 4. Dry teeth and apply Gingival Barrier to both arches, slightly overlapping enamel and interproximal spaces.
 5. Light cure in a fanning motion for 10-20 seconds until Gingival Barrier to release pressure.
 7. Carefully pull back plunger to release pressure.
 8. Immediately mix using a brush applicator until gel is homogeneous.
 9. Apply a thick layer of gel to all teeth undergoing treatment.
 10. Leave gel on for 8 minutes (Optional: a curing light may be used at this stage, please refer to light manufacturer's recommendations)
 11. Suction off using a surgical aspirator tip.
 12. Compilete Steps 9-11 three times (optional: a curing light may be used at should only be used for 2 applications or within 20 minutes of mixing.
 13. After the last application, suction all the gel off, then wash and apply suction.
 14. Remove Gingival Barrier by lifting it from one end.

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- S FOR NON-VITAL TOOTH BRIGHTENING: Isolate tooth effectively. Protect oral mucosa to prevent chemical burns. Verify adequate endodontic obturation. Use protective barrier to prevent peroxide from reaching the periodontal ligament. Avoid acid etching as periodontal ligament irritation may result. Advise the patient that a brightened non-vital tooth will not look the same as a vital tooth. Recall patients periodically to examine the brightened teeth (clinically & radiographically). 5. 6.
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- Recail patients periodically to examine the orightened teeth (clinically & radiographically). **STRUCTIONS FOR NON-VITAL TOOTH BRIGHTENING:** Determine and record pre-operative shade. Please follow this Vita* shade guide arrangement according to degree of brightness: BI+A1+B2+D2+A2=C1+C2+D4+A3+D3+B3+A3,5+B4+C3+A4+C4 isolate tooth/teeth undergoing brightening using a rubber dam. Ensure the dam fits tightly at the cervical margin. Note: If a rubber dam is not used, cover approximately half of the adjacent vital teeth with 3-4mm thick layer of Gingival Barrier to insulate from heat disconfort of the curing light. This is done when one tooth is being brightened non-vitally. Open lingual access to pulp chamber and remove all composite, base material and guita percha 2-3 mm apical to the CE junction. Place a glass ionomer/zinc phosphate base, at least 1 mm thick to ensure a barrier between the "sealed" root canal and brightening gel. Place and light cure a thick layer of Gingival Barrier at the gingiva region of the isolated tooth. Mix the Pola Office gel as instructed in steps 6-8 of the vital tooth bleaching instructions. Place the Pola Office gel into the opened pulp chamber and onto the labial surface. Leave gel onin for 8 min (Optional: curing light may be used at this stage, please refer to light manufactures recommendations) NOTE: If using a curing light and treating inner and outer surfaces, 2 curing lights can be used (one on each side of tooth) to activate Pola Office. Suction off the gel. Repeat steps 6-8 until desired shade is achieved. Note: One pot should only be used for 2 applications or within 20 minutes of mixing. After the last application, suction and wash the gel off. Barrow Ginerial Barrier and one option builts and the distructions. 2.
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- mixing. 10. After the last application, suction and wash the gel off. 11. Remove Gingival Barrier and re-seal tooth with appropriate restorative. 12. Record the final shade.

*Vita shade guide is a trademark of VITA Zahnfabrik, H. Rauter GmbH & Co. KG, D-79713 Säckingen, Germany

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Pola Office 1 Patient Kit 2 x 0.3g Pola Office powder pots 2 X 2mL Pola Office syringes 1 x 1g Gingival Barrier syringe Accessories

Pola Office 3 Patient Kit 6 x 0.3g Pola Office powder pots 6 X 2mL Pola Office syringes 3 x 1g Gingival Barrier syringes Accessories



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