



ADHESIVE RESIN CEMENT SYSTEM

PANAVIA™ V5

CE
0197

ENGLISH INSTRUCTIONS FOR USE

I. INTRODUCTION

PANAVIA V5 is an adhesive resin cement system. PANAVIA V5 consists of the cement paste (Paste), Try-in Paste, Tooth Primer, CLEARFIL CERAMIC PRIMER PLUS and K-ETCHANT Syringe. The Paste is a dual-cure (light- and/or self-cure), fluoride-releasing, radiopaque resin cement for ceramics (lithium disilicate, zirconia, etc.), hybrid ceramics (ex. ESTENIA C&B), composite resins, and metal restorations. It is supplied in an automix delivery system which mixes equal amounts of two components. It is available in the following 5 shades: Universal (A2), Clear, Brown (A4), White, and Opaque. The Opaque shade should be self-cured for final curing due to its strong opacity. The Try-in Paste is a shade matching material which has approximate color and transparency as the hardened mixture of Paste. The Tooth Primer is a self-etching primer to tooth structures that accelerates the polymerization of the Paste. CLEARFIL CERAMIC PRIMER PLUS is a dental universal prosthetic primer that provides an enhanced adhesive surface to ceramics, hybrid ceramics, composite resins and metals. K-ETCHANT Syringe is an etching gel that consists of 35 % phosphoric acid aqueous solution and colloidal silica.

II. INDICATIONS

PANAVIA V5 is indicated for the following uses:

- [1] Cementation of crowns, bridges, inlays and onlays
- [2] Cementation of veneers
- [3] Cementation of adhesion bridges and splints
- [4] Cementation of prosthetic restorations on implant abutments and frames
- [5] Cementation of posts and cores
- [6] Amalgam bonding

III. CONTRAINDICATIONS

Patients with a history of hypersensitivity to methacrylate monomers

IV. POSSIBLE SIDE EFFECTS

- [1] The oral mucosal membrane may turn whitish when contacted by the product due to the coagulation of protein. This is usually a temporary phenomenon that will disappear in a few days. Instruct patients to avoid irritating the affected area while brushing.
- [2] K-ETCHANT Syringe may cause inflammation or erosion due to its chemistry. Use caution to prevent the product from coming in contact with the skin or getting into the eye.

V. INCOMPATIBILITIES

- [1] Do not use eugenol-containing materials for pulp protection or temporary sealing, since the eugenol can retard the curing process.
- [2] Do not use hemostatics containing ferric compounds since these materials may impair adhesion and may cause discoloration of the tooth margin or surrounding gingiva due to remaining ferric ions.
- [3] Do not use a hydrogen peroxide solution for cleaning cavities since it may weaken the bond strength to the tooth structure.

VI. PRECAUTIONS

1. Safety precautions

1. This product contains substances that may cause allergic reactions. Avoid use of the product in patients with known allergies to methacrylate monomers or any other components.
2. If the patient demonstrates a hypersensitivity reaction, such as rash, eczema, features of inflammation, ulcer, swelling, itching or numbness, discontinue use of the product and seek medical attention.
3. Avoid direct contact with the skin and/ or soft tissue to prevent hypersensitivity. Wear gloves or take appropriate precautions when using the product.
4. Exercise caution to prevent the product from coming in contact with the skin or getting into the eye. Before using the product, cover the patient's eyes with a towel or safety glasses to protect them in the event of splashing material.
5. If the product comes in contact with human body tissues, take the following actions:
<If the product gets in the eye>
Immediately wash the eye with copious amounts of water and consult a physician.
<If the product comes in contact with the skin or the oral mucosa>
Immediately wipe the area with a cotton pellet or a gauze pad moistened with alcohol, and rinse with copious amounts of water.
6. Exercise caution to prevent the patient from accidentally swallowing the product.
7. Do not reuse the mixing tip, the endo tip, the needle tip and the applicator brush to prevent cross-contamination. These are single-use and should be discarded after using.

2. Handling and manipulation precautions

[Common precautions]

1. The product must not be used for any purposes other than specified in [II.INDICATIONS].
2. The use of this product is restricted to dental professionals.
3. Do not use the product as a provisional cement. This material is designed to use as a permanent cementation.
4. Use a rubber dam to prevent contamination and to control moisture.
5. Use a pulp capping agent in a cavity close to the pulp or in the event of accidental pulp exposure.
6. When using hemostatics containing aluminum chloride, minimize its quantity, and use caution to prevent contact with the adherend surface. Failure to do so might weaken the bond strength to the tooth structure.
7. Completely remove any lining materials, amalgam and temporary sealing material when preparing the cavity to avoid poor adhesion.
8. Do not mix the product with any other dental materials.
9. If the containers and/ or instruments for this product are damaged, protect yourself from any danger and immediately discontinue their use.
10. Do not use the same applicator brush for both the Tooth Primer and CLEARFIL CERAMIC PRIMER PLUS.

[Paste]

1. The Opaque shade should be self-cured for final curing due to its low curing depth. The margins of prosthetic restoration can be light-cured.
2. The Paste must be used within 2 minutes after dispensing.
3. The polymerization of the paste will be accelerated by contact with Tooth Primer. The procedure should be carried out within the working time listed in the table below. The Paste must be applied only to one veneer at a time when cementing multiple veneers.

Paste setting time in the oral cavity (at 37°C, after coming into contact with Tooth Primer)

Working time	60 seconds
Setting time	3 minutes

4. Be careful to prevent unnecessary exposure to direct sunlight or operating lights. The Paste contains a light-cure catalyst that is highly photo-reactive. During cementation, adjust the angle and/ or distance of the dental light to reduce the intensity of light entering the oral cavity to prevent premature polymerization of the paste.
5. Do not use a Lentulo spiral to insert the paste into the root canal.
6. If you want to place dental posts into several root canals of one tooth, complete the post placement of one root canal before proceeding with another. Make sure to prevent the excess cement from entering another root canal.
7. When dispensing the cement intra-orally using the mixing tip or endo tip, be careful to avoid cross-contamination. Cover the entire syringe with a disposable plastic barrier to prevent saliva and blood contamination. Disinfect the syringe by wiping it with an absorbent cotton with alcohol both before and after use.
8. Excess cement can be removed after tack light-curing it for 3-5 seconds. When removing the excess cement, hold the restoration in place to avoid the possibility of lifting the restoration since there could be some insufficiently cured resin cement.

[Tooth Primer]

1. The use of the Try-in Paste should be limited to checking the shade matching with the PANAVIA V5 Paste.
2. The Try-in Paste does not set. Do not use it to cement restorations.
3. A transparent liquid may appear at the tip of the Try-in Paste syringe. If this transparent liquid is present, it should be dispensed and discarded, since the separated liquid may affect the shade matching.
4. Shade evaluation with Try-in Paste should be performed using the same approximate thickness of Try-in Paste as the hardened cement.
5. After use, thoroughly wash the Try-in Paste from the restoration and tooth surface with water to avoid poor adhesion.

[Tooth Primer]

1. Use within 5 minutes after dispensing.
2. Do not use for surface treatment of implant abutments, frames and prosthetic restorations (inlays, onlays, crowns, bridges and veneers). The polymerization of the paste will be accelerated and the working time will be insufficient.
3. Only use with PANAVIA V5 Paste. **Do not use** in conjunction with other resin cement (ex. PANAVIA F 2.0 or CLEARFIL ESTHETIC CEMENT).
4. Clean the cavity sufficiently to prevent poor bonding. If the adherend surface is contaminated with saliva or blood, wash it thoroughly and dry. Then re-apply the Tooth Primer.

[CLEARFIL CERAMIC PRIMER PLUS]

1. CLEARFIL CERAMIC PRIMER PLUS should be used shortly after dispensing. CLEARFIL CERAMIC PRIMER PLUS contains volatile ethanol. As the solvent evaporates, the viscosity increases and may make it difficult to apply.
2. Perform bonding (or cementation) soon after treating the restoration surface with CLEARFIL CERAMIC PRIMER PLUS.
3. If the treated surface is contaminated with saliva or blood, wash it with water, dry, clean with K-ETCHANT Syringe, and re-treat.

[K-ETCHANT Syringe]

1. Be careful not to contaminate it with saliva or blood. If the treated surface is contaminated, re-treat.
2. Be careful to avoid cross-contamination. Disinfect the syringe by wiping it with an absorbent cotton with alcohol both before and after use. Cover the entire syringe with a disposable plastic barrier to prevent saliva and blood contamination.

3. If the product adheres to clothing, wash it off with water.
4. After each use, remove the needle tip from the syringe and recap the syringe immediately and tightly.
5. Etching the vital dentin may cause post-operative sensitivity.

[Dental light-curing unit]

1. Use it according to the Instructions for Use for the dental light-curing unit.
2. Do not look directly at the light source. Protective glasses are recommended.
3. Low light intensity causes poor adhesion. Check the lamp for service life and the dental curing light guide tip for contamination. It is advisable to check the dental curing light intensity using an appropriate light evaluating device at appropriate intervals.
4. The emitting tip of the dental curing unit should be held as near and vertical to the resin surface as possible. If a large resin surface has to be light-cured, it is advisable to divide the area into several sections and light-cure each section separately.
5. Check the conditions required to cure the paste mixture by referring to the light-curing times listed in these Instructions for Use before using the product.

3. Storage precautions

1. The product must be used by the expiration date indicated on the package.
2. The Paste, Tooth Primer and CLEARFIL CERAMIC PRIMER PLUS must be stored (2-8°C/ 36-46°F) when not in use, and should be brought to room temperature for 15 minutes before use in order to restore its normal viscosity and curing properties. Try-in Paste and K-ETCHANT Syringe should be stored at 2-25°C/36-77°F when not in use.
3. The product must be kept away from extreme heat, direct sunlight or a flame.
4. The bottle or syringe cap should be replaced as soon as the liquid or paste has been dispensed from the bottle or syringe. This prevents evaporation of volatile ingredients.
5. The product must be stored in a proper place where only dental practitioners can access.

VII. COMPONENTS

Please see the outside of the package for contents and quantity.

<Principal ingredients>

- 1) Paste: Universal (A2), Clear, Brown (A4), White, Opaque

(1) Paste A

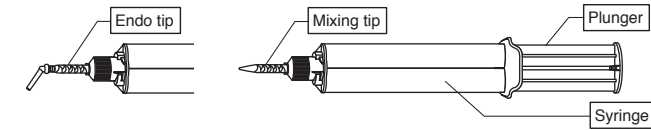
- Bisphenol A diglycidylmethacrylate (Bis-GMA)
- Triethyleneglycol dimethacrylate (TEGDMA)
- Hydrophobic aromatic dimethacrylate
- Hydrophilic aliphatic dimethacrylate
- Initiators
- Accelerators
- Silanated barium glass filler
- Silanated fluoroaluminosilicate glass filler
- Colloidal silica

(2) Paste B

- Bisphenol A diglycidylmethacrylate (Bis-GMA)
- Hydrophobic aromatic dimethacrylate
- Hydrophilic aliphatic dimethacrylate
- Silanated barium glass filler
- Silanated aluminum oxide filler
- Accelerators
- di-Camphorquinone
- Pigments

The total amount of inorganic filler is approximately 38 vol%.
The particle size of inorganic fillers range from 0.01 µm to 12 µm.

Device components:



- 2) Try-in Paste: Universal (A2), Clear, Brown (A4), White, Opaque

- Glycerol
- Silanated silica
- Silanated colloidal silica
- Colloidal silica
- Pigments

3) Tooth Primer

- 10-Methacryloyloxydecyl dihydrogen phosphate (MDP)
- 2-Hydroxyethyl methacrylate (HEMA)
- Hydrophilic aliphatic dimethacrylate
- Accelerators
- Water

4) K-ETCHANT Syringe

- Phosphoric acid
- Water
- Colloidal Silica
- Pigment

5) CLEARFIL CERAMIC PRIMER PLUS

- 3-Methacryloxypropyl trimethoxysilane
- 10-Methacryloyloxydecyl dihydrogen phosphate (MDP)
- Ethanol

6) Accessories

- Mixing tip
- Endo tip (S)
- Needle tip (E) (for K-ETCHANT Syringe)
- Applicator brush (fine <silver>)
- Mixing dish

VIII. CLINICAL PROCEDURES

A. Standard procedure I [Indications [1], [2] and [3]]

- [1] Cementation of crowns, bridges, inlays and onlays
- [2] Cementation of veneers
- [3] Cementation of adhesion bridges and splints

A-1. Cleaning the cavity / stump (tooth, metal, composite resin)

When cementing in the oral cavity or to the stump, remove the temporary sealing material and temporary cement in the usual manner; clean the cavity using moisture control.

A-2. Trial fitting and adjusting a restoration

- (1) Trial fit the prosthetic restoration to check its fit on the cavity or stump, as necessary.
- (2) If necessary, apply the selected shade of Try-in Paste onto the cementation surface of the restoration and trial fit the restoration onto the cavity or stump. Remove excess Try-in Paste from the margins with a brush. The shades of Try-in Paste correspond to those of the hardened cement (PANAVIA V5 Paste).
- (3) Check the shade for best color matching, and then remove the restoration. Using water, completely wash the Try-in Paste from the inner surface of the restoration and the cavity or stump surface.

A-3. Conditioning the prosthetic restoration surface

Please follow the Instructions for Use of the restorative material. In the absence of specific instructions, we recommend the following procedures and application of CLEARFIL CERAMIC PRIMER PLUS:

If the adherend surface is metal oxide ceramic (ex. KATANA Zirconia) or metal:

- (1) Roughen the adherend surface by blasting with alumina powder (30-50 µm) using air pressure of 0.1-0.4 MPa (1-4 kgf/cm², 15-58 psi). The air pressure and powder size should be properly adjusted to suit the material and/ or shape of the prosthetic restoration, using caution to prevent chipping.
- (2) Clean the prosthetic restoration in an ultrasonic cleaning unit for 2 minutes followed by drying it with an air stream.

If the adherend surface is silica-based ceramic (ex. conventional porcelain, lithium disilicate) or composite resin:

Based on the type of restoration, hydrofluoric acid etching or blasting may be used:

Hydrofluoric Acid Treatment (ex. conventional porcelain, lithium disilicate):

- (1) Etch the adherend surface with hydrofluoric acid solution and rinse with water. Please refer to the Instructions for Use of the hydrofluoric acid solution for proper etching times.
- (2) Clean the adherend surface with water and dry.

Blasting Treatment (ex. composite resin):

- (1) Roughen the adherend surface by blasting with alumina powder (30-50µm) using air pressure of 0.1-0.2 MPa (1-2 kgf/cm², 15-29 psi). The air pressure and powder size should be properly adjusted to suit the material and/ or shape of the prosthetic restoration, using caution to prevent chipping.
- (2) Clean the prosthetic restoration in an ultrasonic cleaning unit for 2 minutes followed by drying it with an air stream.

A-4. Application of CLEARFIL CERAMIC PRIMER PLUS to the prosthetic restoration

- (1) If the adherend surface is composite resin, apply K-ETCHANT Syringe onto the adherend surface and leave it for 5 seconds; rinse and dry.

- (2) Apply CLEARFIL CERAMIC PRIMER PLUS to the adherend surface of the restoration with an applicator brush. After application, dry the entire adherend surface sufficiently using mild, oil-free air flow.

[NOTE]

For optimal performance, ALLOY PRIMER can be used on the surface of the precious metal alloy instead of CLEARFIL CERAMIC PRIMER PLUS. Please refer to the Instructions for Use of ALLOY PRIMER.

A-5. Application of Tooth Primer to the cavity / stump

Based on the type of adherend surface and/ or procedure, treat as follows before application of Tooth Primer.

Etching of the enamel surface (Optional, but necessary for veneers and adhesive bridges):

A clinically adequate adhesive bond is achieved by the application of Tooth Primer without an extra phosphoric acid etching step.
If the adherend surface is uncut enamel or when cementing an adhesion bridge or veneers, apply K-ETCHANT Syringe to the enamel surface only and leave for 10 seconds; rinse and dry.

Treatment of precious metal:

Apply ALLOY PRIMER according to the Instructions for Use.

- (1) Apply Tooth Primer to the entire cavity or stump (tooth, metal, composite resin), with an applicator brush and leave in place for 20 seconds. Use caution not to allow saliva or exudates to contact the treated surfaces.
- (2) Use a cotton pellet to carefully remove any excess Tooth Primer liquid from the cavity or stump, especially from the corners of the cavity and shoulders at the margins of the stump.
- (3) Thoroughly dry the entire adherend surface sufficiently by blowing mild, oil-free air. Use a vacuum aspirator to prevent the Tooth Primer liquid from dispersing.

A-6. Preparing the syringe and accessories

- (1) Attach a mixing tip or an endo tip to the syringe of PANAVIA V5 Paste in the usual manner.

[CAUTION]

Before attaching a mixing tip or an endo tip, extrude small amounts of the two pastes, making sure equal amounts are being dispensed through the two outlets of the syringe; then discard them. If equal amounts of paste are not used, there is a possibility of poor polymerization.

[NOTE]

- After use, the syringe should be stored with the cap. When you put the cap back on the syringe before storage, make sure the cap is free of paste.
- When replacing an old mixing tip or endo tip with a new one, turn it 1/4 of a turn counterclockwise to align the projections of the mixing tip or the endo tip with the grooves in the syringe. Remove it from the syringe by twisting and pressing downward.
- If the paste has hardened making it difficult to squeeze the mixed paste out of the syringe, remove the hardened paste by using an appropriate instrument.
- When changing the direction of the endo tip, rotate the distal attachment and use caution not to bend the slender dispensing nozzle.

A-7. Cementing the prosthetic restoration

- (1) Apply the mixed paste over the entire adherend surface of the prosthetic restoration or the entire stump within the cavity. If the paste is applied directly on the entire cavity / stump intra-orally, you must begin step (2) within 60 seconds after application of the paste.
- (2) Place the prosthetic restoration on the cavity / stump.

A-8. Removing the excess cement and final curing

A-8-a. For Universal (A2), Clear, Brown (A4) or White shades:

- (1) Remove any excess cement using either of the following two methods:
Removing method for tack-cured excess cement:
Light-cure any excess cement in several spots for 3 to 5 seconds. Holding the prosthetic restoration in position, remove the tack-cured excess cement using a dental explorer. It is advisable to determine in advance the light-curing time of the excess cement by light-curing some paste on a mixing pad.

Removing method using a small brush:

Any excess cement remaining at the margins can be removed with a small brush. Light-cure the margins of the prosthetic restoration using the dental curing unit. Please confirm the curing time by referencing Table 1.
[For curing margins of the restoration, it is possible to cover the margins with a protective gel (ex. PANAVIA F2.0 OXYGUARD II) to prevent the formation of an oxygen inhibition layer according to the Instructions for Use.]

- (2) Finally, cure the cement using either of the following two methods:
Prosthetic restorations that are not translucent (ex. metal crowns):
Allow the cement to chemical-cure by letting it set for 3 minutes after placement of the prosthetic restoration.

Prosthetic restorations that are translucent (ex. ceramic inlays):
Light-cure the entire surface of the prosthetic restoration using the dental curing unit. If the area you want to light-cure is larger than the light emitting tip, divide the exposure process into a few applications. Please confirm the curing time by referencing the following table:

Type of light source (Light intensity)	Curing time
High-intensity BLUE LED * (More than 1500 mW/cm²)	Twice for 3 to 5 sec.
BLUE LED * (800-1400 mW/cm²)	10 sec.
Halogen lamp (More than 400 mW/cm²)	10 sec.

The effective wavelength range of each dental curing unit must be 400 - 515 nm.
* Peak of emission spectrum: 450 - 480 nm.

The working times and setting times depend on the ambient and oral temperature as indicated below. When oral temperature is not specified in the Instructions for Use, it is understood to be 37°C/ 99°F. Note that this cement is a dual-curing cement and therefore sensitive to artificial and natural light.

Table2: Working time and setting time (for cementation of crowns, bridges, inlays, onlays, veneers and adhesion bridges)

Working time after initial dispensing (23°C/ 73°F)	2 min.
Working time after insertion of the paste into the cavity (37°C/ 99°F)	60 sec.
Tack-curing for removal of excess cement	3 - 5 sec.
Final-curing after placement of the restoration	
light-cure (LED)	10 sec. *
self-cure (37°C/ 99°F)	3 min.

* Curing time using BLUE LED (light intensity: 800-1400 mW/cm²).

A-8-b. For Opaque shade:

- (1) Any excess cement remaining at the margins can be removed with a small brush. Light-cure the margins of the prosthetic restoration using the dental curing unit. Please confirm the curing time by referencing Table 1.
[For curing margins of the restoration, it is possible to cover the margins with a protective gel (ex. PANAVIA F 2.0 OXYGUARD II) to prevent the formation of an oxygen inhibition layer according to the Instructions for Use.]
- (2) Allow the cement to chemical-cure by letting it set for 3 minutes after placement of the prosthetic restoration.

B. Standard procedure II [Indications [4]]

- [4] Cementation of prosthetic restorations on implant abutments and frames

B-1. Cleaning the implant abutment or frame, Trial fitting and adjusting a restoration, Conditioning the prosthetic restorative surface

See section "A-1", "A-2" and "A-3".

B-2. Application of CLEARFIL CERAMIC PRIMER PLUS

Apply CLEARFIL CERAMIC PRIMER PLUS to the internal surface of the restoration and adherend surface of implant abutments or frames with an applicator brush. After application, dry the entire adherend surface sufficiently using mild, oil-free air flow.

[NOTE]

For optimal performance, ALLOY PRIMER can be used on the surface of the precious metal alloy instead of CLEARFIL CERAMIC PRIMER PLUS. Please refer to the Instructions for Use of ALLOY PRIMER.

B-3. Preparing the syringe and accessories

See section "A-5".

B-4. Cementing the prosthetic restoration

- (1) Apply the mixed paste onto the entire adherend surface of the prosthetic restoration.
- (2) Place the prosthetic restoration on the implant abutment or frame.

B-5. Removing the excess cement and final curing

B-5-a. For Universal (A2), Clear, Brown (A4) or White shades:

- (1) Remove any excess cement. See section "A-8-a (1)".
- (2) Finally, cure the cement using either of the following two methods:
Prosthetic restorations that are not translucent (ex. metal crowns):
Allow the cement to chemical-cure by letting it set after placement of the prosthetic restoration. See the below table.

Table3: Setting time (for cementation of prosthetic restorations on implant abutments and frames)

Final-curing after placement of the restoration	
self-cure (37°C/ 99°F)	5 min.
self-cure (23°C/ 73°F)	10 min.

Prosthetic restorations that are translucent (ex. ceramic inlays):
Light-cure the entire surface of the prosthetic restoration using the dental curing unit. If the area you want to light-cure is larger than the light emitting tip, divide the exposure process into a few applications. Please confirm the curing time by referencing Table 1.

B-5-b. For Opaque shade:

- (1) Treat the excess cement. See section "A-8-b(1)".
- (2) Allow the cement to chemical-cure by letting it set after placement of the prosthetic restoration. See the Table 3.

C. Standard procedure III (Indications [5])

- [5] Cementation of posts and cores

C-1. Preparing a cavity and trial fit of the core or post

- (1) Prepare the endodontically filled root canals for post / core placement in the usual manner. Provide moisture control with a rubber dam.
- (2) Trial fit a core or a dental post (ex. PANAVIA POST) of appropriate thickness into the prepared cavity. Cut and trim the post as necessary. Wipe away any contamination from the surface of the core or post using a piece of gauze or a cotton pad soaked with ethanol.

C-2. Blasting the core or post

Blast the core or post surface according to step "A-3". Do not blast glass fiber posts due to potential damage.

C-3. Treatment of the core or post

For a metal core and metal post:

Apply CLEARFIL CERAMIC PRIMER PLUS to the surface of the core or post with an applicator brush. After application, dry the entire adherend surface sufficiently using mild, oil-free air flow.

[NOTE]

For optimal performance, ALLOY PRIMER can be used on the surface of the precious metal alloy instead of CLEARFIL CERAMIC PRIMER PLUS. Please refer to the Instructions for Use of ALLOY PRIMER.

For a resin core, glass-fiber post and ceramic post:

- (1) Apply K-ETCHANT Syringe to the core or post surface. Leave the gel in place for 5 seconds before washing and drying.
- (2) Apply CLEARFIL CERAMIC PRIMER PLUS to the surface of the core or post with an applicator brush. After application, dry the entire adherend surface sufficiently using mild, oil-free air flow.

C-4. Application of Tooth Primer

- (1) Apply the Tooth Primer to the root canal and the cavity wall with an applicator brush and leave it in place for 20 seconds. Use caution not to allow saliva or exudates to contact the treated surfaces.
- (2) Use a paper point to carefully remove any excess Tooth Primer liquid from the root canal or cavity, especially from the corners of the cavity and inside the root canal.
- (3) Thoroughly dry the entire adherend surface sufficiently by blowing mild oil-free air. Use a vacuum aspirator to prevent the Tooth Primer liquid from dispersing.

C-5. Preparing the syringe and accessories

See section "A-5".

C-6. Placing the core or post

- (1) Apply the mixed paste over the entire adherend surface of the core or post, or the entire tooth surface within the cavity. If the paste is applied directly into the cavity, you must begin step (2) within 60 seconds after application of the cement.
- (2) Place the core or post quickly into the cavity, slightly vibrating it to prevent air bubbles from entering the root canals.

C-7. Treatment of the excess cement

For cores:

See section "A-8-a (1)" or "A-8-b (1)".

For dental posts:

Using an applicator brush, spread the excess cement over the coronal base and post head.

C-8. Curing

Light-cure the margins of the core or post. See Table 1 in "A-8".
For the opaque shade, allow the cement to chemical-cure by letting it set for 3 minutes after placement of the core or post.

C-9. Pre

