Your Best Buy in Splinting Materials in No-Waste Rolls

For Permanent Stabilization of Teeth

Specifically designed for today’s Adhesive Dentistry. Use SplintMat and PerfoMat to splint and immobilize periodontally involved teeth. Indicated for all clinical applications where tooth stabilization or temporary restoration placement is required. Simple to use with your preferred composite restorative material and acid etching bonding procedure.

- Available in stainless steel mesh or clear nylon for use with self-cure or light-cure composites.
- Supplied in rolls. Cut only what you need.
- Easy to use. Easily adapts to all lingual or facial contours.

Does not fray.

Conservative approach, no tooth preparation required, tooth remains intact.

Clinically proven results.

Comfortable to patient.

Easily removed and replaced.

Provides support for temporary replacement of missing teeth.

Can be used to splint and stabilize reimplanted, transplanted and periodontally involved teeth, pontics, orthodontic and occlusal positioning.

Ideal for reinforcing denture repairs.

SPL-L. SplintMat-Coarse, nylon mesh grid in a roll, 39” long by 5.5mm wide

SPL-F. SplintMat-Fine, stainless steel mesh grid in a roll, 39” long by 4mm wide

SPL-P. PerfoMat, perforated stainless steel grid in a roll, 39” long x 3.5mm wide

INDICATIONS

- Stabilization of replanted teeth that were completely avulsed.
- Stabilization of partially avulsed teeth or traumatically avulsed teeth.
- Stabilization before or after extensive periodontal surgery.
- Diagnostic or provisional splinting.
- Temporary replacement of traumatically missing tooth.
- Stabilization of transplanted teeth.
- Implant stabilization.
- With splint bars for full arch splinting.
- Splinting anteriors for orthodontic treatment.

ADVANTAGES

- Can be used with composites & curing lights.
- Preserves natural tooth structure.
- Inexpensive.
- Esthetic.
- Easy to construct splint.
- Reversible.
- Comfortable, lasting, immobilization.
- Stabilization on three sides of tooth.
- Greater retention from wider mesh.

- Virtually no tooth preparation.
- Supra-gingival margins.
- No dentinal involvement.
- No pulpal involvement.
- Few inter-oral procedures.
- Improved Esthetics.
- Reversibility.
- In office procedure - no lab.
- Significant reduction in cost to patient.
- Can be used with pins for added retention.

INDICATIONS

- Replacement of missing teeth.
- Periodontal Splinting.
- Post-Orthodontic fixed retention.
- Repairs of dentures.
- Other innovative applications.

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