

TruNatomy® Sequence

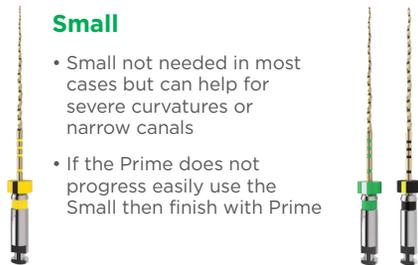
Motor settings: 500 rpm / 1.5 Ncm



Low torque instruments - **Never brush, but peck with large amplitudes.**

Advance the **TruNatomy® file passively** with no more than 2-3 gentle amplitudes approximately 2-5 mm **in-and-out of the canal** until working length has been reached. Use standard irrigation protocol used in your practice (including activated irrigation strategies if applicable).

TruNatomy® Shaping options to treat other cases:



Small

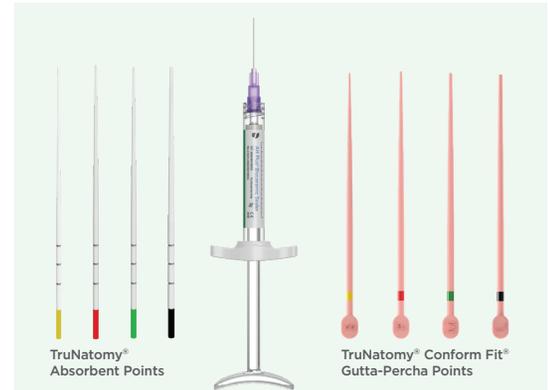
- Small not needed in most cases but can help for severe curvatures or narrow canals
- If the Prime does not progress easily use the Small then finish with Prime

Medium and Large*

- After finishing with the Prime (if the apex is larger than current shaping file), continue with the Medium or Large if needed (straight anatomies)

* SmartLite Pro EndoActivator™ and TruNatomy® Large: Availability depending on local registration.

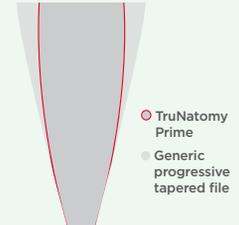
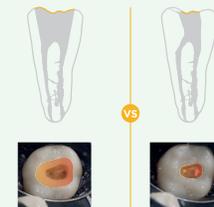
** The taper indicated is the average of all the tapers and not the taper at the tip. The “v” indicates that the taper is variable.



Select dedicated TruNatomy® Absorbent Points to dry the root canals, AH Plus® Bioceramic Sealer to seal the canals and a dedicated TruNatomy® Conform Fit® Gutta-Percha Point corresponding to color code and size of the last instrument used during canal preparation.

Preserving structural strength

No need for conventional straight line access



Efficiency with less dentin removal

TruNatomy® Step-by-Step procedure

- Review different horizontally angulated radiographs to diagnostically determine the width, length, and curvature of any given root canal.
- Estimate the working length using well-angulated preoperative radiographs.
- Prepare a conservative access cavity sufficient enough to reveal all root canal orifices.
- Scout the coronal 2/3 of canals with an ISO 010 K-File in the presence of lubricant such as Glide™ FILE PREP and irrigate.
- Followed by a TruNatomy® Orifice Modifier at 500 rpm and 1.50 Ncm. With irrigant in the canal advance TruNatomy® Orifice Modifier in 2-3 gentle amplitudes approximately 2-5 mm in-and-out of the canal. Repeat until the coronal third is shaped. The instrument has 7 mm of cutting flutes, insertion into the canal should not exceed the length of the cutting portion. Irrigate the canal and clean cutting flutes routinely.
- Scout the whole root canal with an ISO 010 K-File, determine working length by using an electronic apex locator (EAL) in combination with radiographs, irrigate and confirm patency.
- With irrigant in the canal, create and confirm a reproducible glide path using a TruNatomy® Glider in 2-3 gentle amplitudes approximately 2-5 mm. Irrigate and repeat until previously confirmed working length with an EAL has been reached.
- ALWAYS begin shaping with TruNatomy® PRIME (500 rpm / 1.5 Ncm) file passively in the presence of sodium hypochlorite with no more than 2-3 gentle amplitudes approximately 2-5 mm in-and-out of the canal. Irrigate and repeat as necessary until full working length is reached. Upon reaching length, remove the file to avoid over-enlarging the apical canal portion.
- Routinely irrigate the canal and clean the instruments cutting flutes of debris upon removal.
- If TruNatomy® PRIME does not progress easily, remove, irrigate, and recapitulate with an ISO 010 K-File to confirm canal patency and move to the TruNatomy® SMALL.
- Inspect cutting flutes routinely upon removal for presence of unwinding and straightening. If deformation is noted, discard and use a new TruNatomy® instrument.
- Advance TruNatomy® SMALL passively in the presence of sodium hypochlorite with no more than 2-3 gentle amplitudes approximately 2-5 mm in-and-out and remove instrument. Irrigate and repeat as necessary to working length in a gentle/passive in-and-out motion and then use TruNatomy® PRIME to working length to optimize the shape.
- If TruNatomy® PRIME is loose at length with no dentinal debris in the apical flutes, continue shaping with TruNatomy® MEDIUM and subsequently with LARGE if needed. Care should be taken to guide each instrument gently to full working length to ensure completeness of shape. Use TruNatomy® LARGE in larger and straighter canals only, such as maxillary central incisors, some palatal or distal canals of molars.
- Following proper cleaning and shaping, confirm the final working length measurement using the last TruNatomy® instrument by hand. Verifying the shape at working length and passive fit ensures that TruNatomy® Conform Fit® gutta-percha points matches the correct apical canal diameter. This is achieved by passively placing the last TruNatomy® instrument in the canal. If the instrument reaches the working length passively, choose and try-in the matching TruNatomy® Conform Fit® gutta-percha points. If the fit is not passive, instrument (as described above) with the last TruNatomy® shaping instrument after reconfirming working length, irrigating and confirming patency.
- Once appropriateness of the shape is confirmed, proceed with 3-D disinfection protocols.
- Use dedicated TruNatomy® paper points to dry the root canals and dedicated TruNatomy® Conform Fit® gutta-percha points to obturate, selecting either AH Plus® or AH Plus® Bioceramic Sealer.

		CE
Files, Gutta-Percha & Absorbent Points	Maillefer Instruments Holding Sàrl , Chemin du Verger 3, CH-1338 Ballaigues, Switzerland	2797
Irrigation Needle	Produits Dentaires SA , Rue des Bosquets 18, CH-1800, Vevey, Switzerland	1639
SmartLite Pro EndoActivator™	Dentsply LLC , trading as Dentsply professional, 1301 Smile Way, York, PA, 17404, USA	2797

