

OptiDam – SoftClamp - Fixafloss

The easy solution for the restorative process

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Moisture control is critical when placing an adhesive restoration, adaptation of the cervical matrix (especially on mesial 14 and 24), and then to achieve good contact points, and a functional occlusal design are also important.

When rubber dam is used for this purpose, it is important that there is sufficient clearance around the cavities and that the rubber-dam sits freely, and is well fixed, and importantly feels comfortable for the patient.

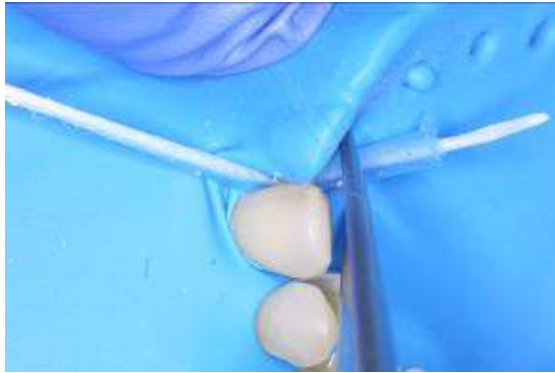
OptiDam™ makes placing a rubber dam easier with “nipples” already provided, opposed to having to use a hole-punch, and a design that matches the contours of the oral cavity. Identify the tooth to be isolated and simply cut off the „nipples“ (**Picture 1**) and the clamp is then applied. Metal clamps do not always have the right design, causing tension and discomfort in the cervical region, the **SoftClamp™** overcomes this problem by using soft plastic that is also autoclavable (**Pictures 2, 4**).



Picture 1: *OptiDam™: cutting off the nipples*

Picture 2: *SoftClamp™*

The operator's view of the working area is further enhanced by the anatomically designed frame with which the OptiDam™ is fixed (**Picture 4**).



Picture 3: Placement of Fixafloss™



Picture 4: Placement of SoftClamp™ and Fixafloss™

With the help of **Fixafloss™** (**Picture 3**), the rubber dam is not only fixed but the tapered end performs a wedge function which “kills two birds with one stone”: fixing the OptiDam™ and cervical adaptation of the matrix tape. The pictures clearly show that despite the incision, the matrix tape connects well mesially on 14 (**Pictures 5, 6, 7 and 8**).



Picture 5: Fixafloss™ for matrix tape adaptation



Picture 6: Application of matrix tape



Picture 7: Matrix tape and Fixafloss™



Picture 8: End result of the restoration

Step-by-step procedure:

1. Dry and isolate the working area using OptiDam™, cut off the required number of nipples for an optimum view, and access to those parts of the teeth to be restored **(Picture 1)**.
2. Insert SoftClamp™ through the most distal nipple and secure with standard forceps.
3. The forceps cannot slip out because the SoftClamp™ provides guide grooves for the forceps **(Picture 2)**.
4. The SoftClamp™ is placed on the molar and a clear view and access is established. **(Picture 4)**.
5. The OptiDam™ is fixed with Fixafloss™ so far as possible to the mesial aspect. **(Pictures 3 and 4)**.
6. The next step is to place the autoclavable and anatomically designed frame, the edges are designed so that the frame stays firmly in position and there are adequate fixing points for the OptiDam™ **(Picture 4)**.
7. The matrix band is applied and fixed with a wedge or Fixafloss™ **(Pictures 5, 6, 7 and 8)**.

The cavities can then be filled with composite and the anatomy can be restored, any corrections to the design are predictable and safe to carry out with dry contouring and polishing, after which adhesive is applied again as a surface sealant.