Used Products

IMPLANT - Abutment made of zirconium oxide - Bridge - Metal - Non-retentive abutment shape - Multilink Speed

☐ **Multilink Speed**

The self-adhesive, self-curing composite resin cement can be optionally light-cured

☐ **OptraStick**

Application instrument that features a flexible adhesive tip

☐ **Telio CS Inlay**

Temporary light-curing filling material for deep inlay preparations with parallel walls and sealing of implant screw access holes

☐ **OptraGate**

Allows lips and cheeks to be retracted completely and ensures relative isolation

☐ **Ivoclean**

The universal cleaning paste Ivoclean effectively cleans the bonding surfaces of prosthetic restorations after intraoral try-in

☐ **Liquid Strip**

Glycerine gel to prevent the oxygen-inhibited layer of composites with composite or ceramic restorations

☐ **OptraPol**

OptraPol is excellently suitable for finishing and polishing all popular composite materials in a single step
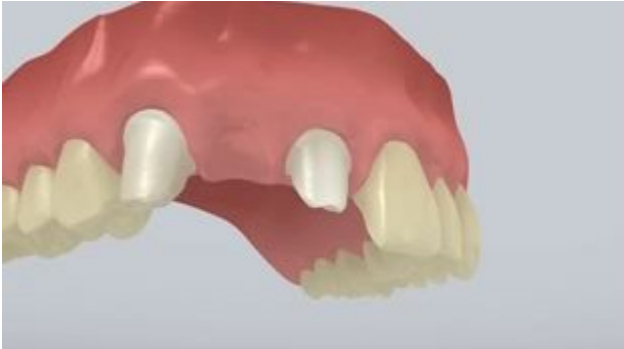
☐ **Cervitec Plus**

The protective varnish containing chlorhexidine and thymol protects exposed root surfaces and controls bacteria

Ivoclar Vivadent AG, Bendererstrasse 2, FL-9494 Schaan, Liechtenstein
www.ivoclarivadent.com, Phone +4232353535, Fax +4232353360
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1

Flowchart Multilink Speed

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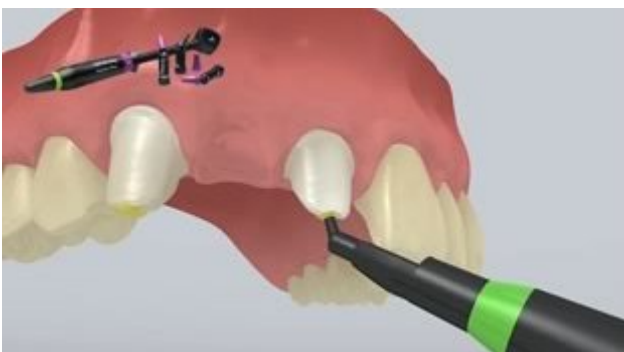
1 Preoperative situation

The abutments are screwed in place.
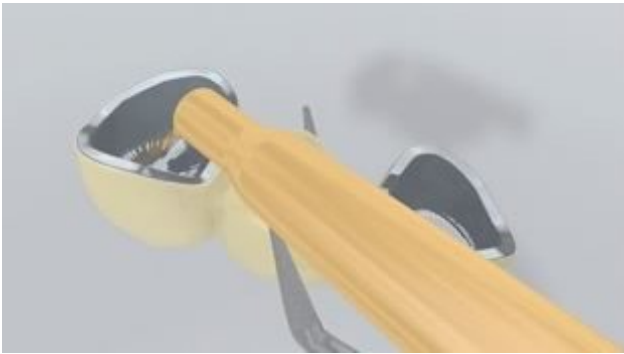
2 The restoration is tried in

The permanent restoration is tried in. At this stage, the shade, accuracy of fit and occlusion of the restoration are checked.

3 The screw access opening is cleaned and sealed.

The screw access opening is thoroughly rinsed with water spray and dried with oil-free air. Subsequently, the screw access opening is sealed with cotton wool or a foam pellet and **Telio CS Inlay**. For all further treatment steps, relative isolation of the operating field, e.g. with **OptraGate,** is indispensible. A retraction cord may optionally be placed.

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2

4 The restoration is pretreated

The inner surfaces of the restoration are sandblasted (e.g. **IPS InLine**, 2 bar, Al_2O_3 100 µm or as directed by the manufacturer of the restorative materials).

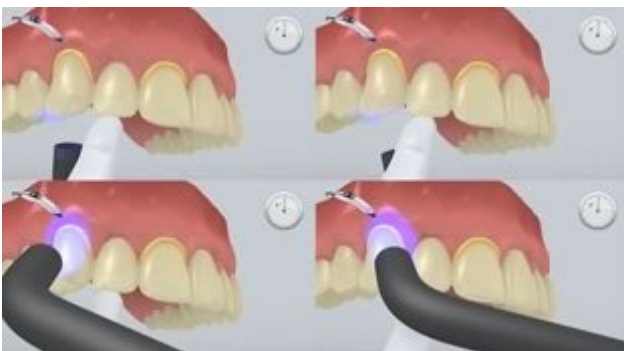### 5 Multilink Speed is applied

Multillink Speed is dispensed from the automix syringe and the desired amount is directly applied to the bonding surface of the restoration.

6 The restoration is seated and excess cement is removed

The restoration is seated and held in place using light constant pressure.
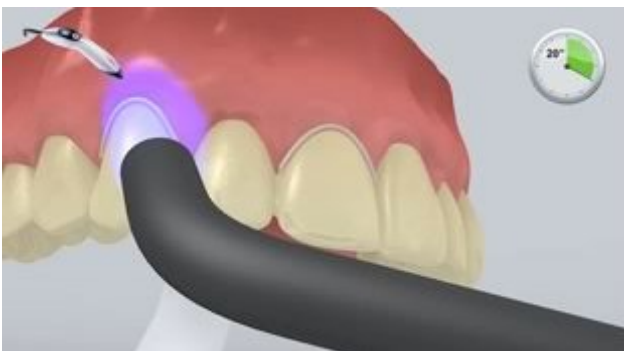

Excess cement is light-cured with a polymerization unit (e.g. **Bluephase N**, 650 mW/cm^2, LOW mode) for 1 second per quarter surface (mesio-oral, disto-oral, mesio-buccal, disto-buccal) at a distance of approx 0-10 mm.

The gel-like excess material can be easily removed with an implant scaler.

Like all composites, **Multilink Speed** is subject to oxygen inhibition. In order to avoid this problem, it is advisable to cover the restoration margins with glycerine gel/air block (e.g Liquid Strip) immediately after the removal of excess cement.
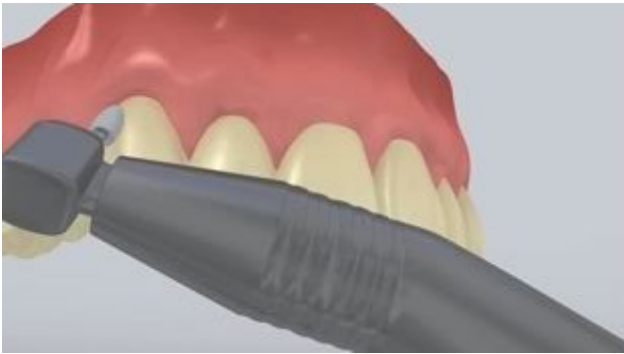

Subsequently all the cement margins are light cured for another 20 seconds (e.g. **Bluephase N** in the HIGH mode, approx. 1,200 mW/cm^2). Materials that are opaque, in other words, impervious to light, should be allowed to self-cure.

Liquid Strip is rinsed off and where required OptraGate or the absorbent pads and retraction cords are removed.

7   **The completed restoration is finished**

Proximal areas are adjusted with finishers and polishers. The occlusion and functional movements are checked and adjusted if necessary. The restoration margins are polished with polishers (**OptraPol**) or discs.

8   **Follow-up care**

A thin layer of **Cervitec Plus** is applied where it is needed with the help of a Vivadent applicator or a brush. The varnish sets by itself or with the application of a stream of air.