Titanium Splinting Bars



STERILIZATION

Prior to use, the Zeza Bar should be sterilized in either an autoclave or dry heat sterilizer. Use of a cold sterilizing solution is not recommended.

PREPARATION

The preparation of the teeth to be splinted should be done in a conservative manner. The depth of the prep should be just deep enough to allow for a thin layer of composite to cover the Zeza Bar. The width of the prep should only be wide enough to allow the Zeza Bar to be placed and removed without rubbing the walls of the preparation.

The suggested length and position of the Zeza Bar in Bicuspid/Bicuspid, Molar/Molar and Bicuspid/Cuspid situations is shown in diagrams 1-2-3 below.



DIAGRAM 1 FOR BICUSPID TO BICUSPID:

The ideal length of Zeza splinting bars for teeth is a length containing three retentive

normal size teeth is a length containing three retentive holes when splinting bicuspid to bicuspid.



DIAGRAM 2 FOR MOLAR TO MOLAR:

Here the ideal length of splinting bar is a

length containing at least three, but usually four, retentive holes as shown above.



DIAGRAM 3 FOR BICUSPID TO CUSPID:

When splinting the cuspid, adequate strength is attained when one retentive hole (with no excess length of bar) is placed within the preparation as shown in the diagram.

FILLING WITH A COMPOSITE

Once the teeth to be splinted have been prepped, a base/pulp protection material of your choice is placed to avoid sensitivity. Place composite in the preps so they are two-thirds full. There is no need to condense the material at this time. The seating of the Zeza Bar will act as a condenser when it is put in place. When the preps are two-thirds filled with composite, the Zeza Bar is laid over the composite and seated with an amalgam plugger using gentle but firm pressure to seat the Zeza Bar and at the same time condense the composite into all areas of the prep.

After the Zeza Bar has been properly seated, the occlusal one-third of the prep is filled using a plastic filling instrument. Place a mylar strip over the occlusal surface until the composite has set.

FINISHING OF THE RESTORATION

We do not suggest that anything be placed interproximally while the composite is being placed in the adjacent preparations. This means excess material will be left between the teeth that will now have to be removed. Since the apical depth of the preparation has been made very shallow, the removal of this excess is easily accomplished with the use of a long, thin, very fine diamond high speed bur. How much of the composite should be cut away interproximally while trimming is determined by the cross sectional dimensions of the bar. Only a minimal amount of material need cover the bar thus giving you a very small contact point. This cannot be stressed enough, for this small contact point is what will permit the patient to keep the area clean and avoid gingival irritation. The occlusal surface can be finished using any of the conventional methods.