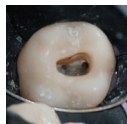


TruNatomy® Shaping Sequence

All TruNatomy® files require a speed of 500rpm and a torque of 1.5 Ncm

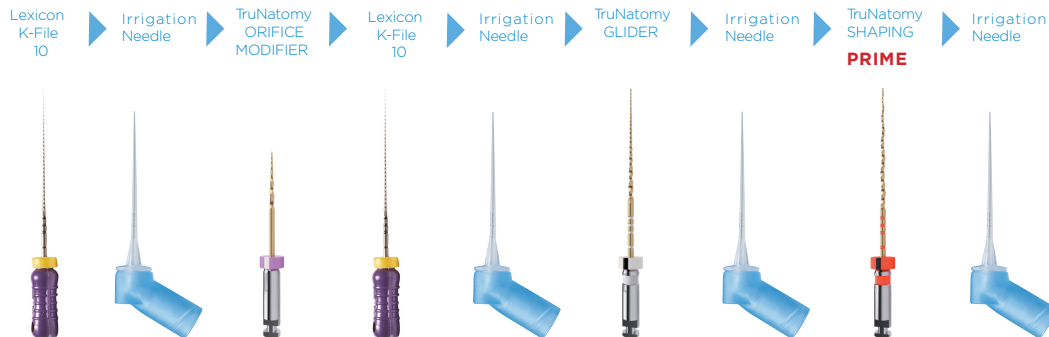


B



CONSERVATIVE
ENDODONTIC
CAVITY

Photos courtesy of Dr. Ahmed Salman



TruNatomy® shaping options to treat other cases:

SMALL

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

MEDIUM

- After finishing with the Prime (if the apex is larger than current shaping file), continue with the **Medium**

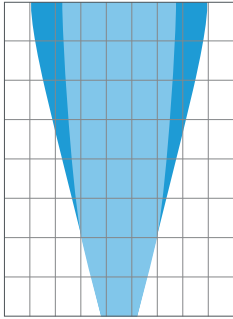
LARGE

- Continue shaping with the **Large** if needed, only in larger and straighter canals

- 1) Estimate the working length using well-angulated preoperative radiographs
- 2) Prepare a **conservative access cavity** sufficient enough to reveal all root canal orifices
- 3) Scout coronal 2/3 of canals with a # 010 K-file in the presence of lubricant such as PROLUBE® and irrigate.
- 4) Continue with the coronal modification using **TruNatomy® Orifice Modifier**. With irrigant in the canal, advance the **TruNatomy® Orifice Modifier** in an apical direction for only **2-3 gentle amplitudes** approximately **2-5 mm in-and-out of the canal**. Irrigate and repeat as necessary until the coronal third is shaped. The Orifice Modifier should not be taken further apically than the length of cutting flutes. Irrigate the canal and clean the cutting flutes routinely.
- 5) Scout the whole root canal with a # 010 K-file, determine Working Length (WL) using an Electronic Apex Locator (EAL) in combination with radiographs. Irrigate and confirm patency.
- 6) With irrigant in the canal, create and confirm a reproducible glide path using a **TruNatomy® Glider** in an apical direction for only **2-3 gentle amplitudes** approximately **2-5 mm in-and-out of the canal**. Irrigate, clean cutting flutes and repeat as necessary.
- 7) ALWAYS begin shaping with the **TruNatomy® Prime** file passively in the presence of irrigant with no more than **2-3 gentle amplitudes** approximately **2-5 mm in-and-out of the canal**. Irrigate, clean cutting flutes and repeat as necessary to WL (approx. 3-5 sets of 3 amplitudes).

TruNatomy® Obturation Techniques

“Removing dentin only where clinically needed.”¹



- TruNatomy® Prime
- Generic progressive tapered file



TRADITIONAL
ENDODONTIC
CAVITY

Photos courtesy of Dr. Ahmed Salman

Combine with your office irrigation protocol (including activated irrigation, for example the **SmartLite Pro EndoActivator™** with the small yellow tip).



Use dedicated **TruNatomy® Absorbent Paper Points** to dry the root canals and dedicated **TruNatomy® Conform Fit® Gutta-Percha** points or **GuttaCore® for TruNatomy®** to obturate.



TruNatomy® Absorbent Paper Points PRIME



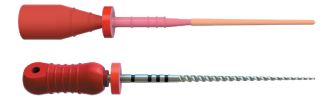
TruNatomy® Conform Fit® Gutta-Percha PRIME

GuttaSmart™

The warm vertical compaction can be achieved with the matching **TruNatomy® Conform Fit® Gutta-Percha** and the **Gutta-Smart™** small pluggers and small **Conform Fit®** cartridge.

GuttaCore® for TruNatomy®

- 1) When using **GuttaCore® for TruNatomy®** confirm straight line access.
- 2) Select **Shape Verifier (SV)** and confirm passive fit.
- 3) If not passive, use the **Shape Verifier (SV)** to refine and gently enlarge the canal.
- 4) Irrigate the canal to remove debris. Dry the canal with the **TruNatomy® Absorbent Paper Points**.
- 5) For a canal prepared with the **TruNatomy® Prime** and/or the **TruNatomy® Medium shaping files**, select the **GuttaCore® for TruNatomy®** red obturator.
- 6) Follow the **GuttaCore®** technique as described in the DFU: www.dentsplysirona.com/en-us/categories/endodontics/guttacore-obturators.html



¹ Internal Data