Using Calibra® Universal

**STEP 1**
CLEAN AND DRY
Follow dental lab instructions for pre-treatment of the intaglio surface of the restoration, if required.

**STEP 2**
APPLY CALIBRA UNIVERSAL CEMENT
Dispense and discard a small amount of material from the dual-barreled syringe. Attach mixing tip. Apply a thin, uniform layer of Calibra Universal Cement to the entire internal surface of the restoration.

**STEP 3**
SEAT RESTORATION
Protect restoration from contamination and movement until the final set of the cement (6 minutes from start of mix or completion of light curing).

**STEP 4A**
CLEAN UP MARGINAL EXCESS: SELF CURE
The excess cement will reach the “gelled” state after approximately 1-2 minutes in the mouth. Excess cement will remain in the gelled state for approximately 1 minute. Do not move, torque, or disturb the crown during cleanup.

**STEP 4B**
CLEAN UP MARGINAL EXCESS: DUAL CURE
Light curing to facilitate cleanup must be accomplished within the first minute following intraoral insertion. Light cure excess cement all areas for 10 seconds from each direction – buccal, lingual, and occlusal.

**STEP 5**
REMOVE EXCESS CEMENT
Protect restoration from movement during the gel phase cleanup through the final set.

**STEP 6A**
SELF CURE AND DUAL CURE FOR NON-LIGHT TRANSMISSIBLE RESTORATIONS
Light cure margins for 20-40 seconds (in dual cure mode). Allow Calibra Universal Cement to self-cure without disturbing for 6 minutes from start of mix.

**STEP 6B**
LIGHT CURE LIGHT TRANSMISSIBLE RESTORATIONS
Light cure all areas for 10 seconds from each direction – buccal, lingual, and occlusal.

**STEP 7**
FINISH AND POLISH
Complete all finishing with the Enhance® Finishing System and polish using PoGo® Polishers (see complete Directions for Use).

**Ordering Information**
Dual Cure Automix Syringe Refill Package
- 607402 Light Shade
- 607403 Medium Shade
- 607405 Translucent Shade
- 607406 Opaque Shade
- 607407 Bleach Shade
- 607086 Calibra® Cement Automix Syringe Mixing Tip Refill (50)

Calibra®: It’s a Snap.
Cementation is a Sticky Situation.

To tack cure or not, that’s the question for most dentists using a resin cement. Either way, you’re still stuck having to remove excess cement. And if you don’t clean up completely, especially interproximally, you can compromise clinical results. The smallest bit of residual cement can jeopardize gingiva health and cause irritation and inflammation. It can also greatly influence surface roughness and contribute to biofilm accumulation, which can reduce the longevity of restoration. That’s why 97% of dentists say that excess cleanup is important to ensure health of the gingiva.

Cleanup is Now a Snap.

New Calibra Universal Cement is designed to be a very efficient resin cement. Now you can benefit from the swiftness of tack curing without the stress of over-curing. Once initiated, you then get a long gel phase, so you can completely remove excess cement for pristine restorations.

Tack Cure with Confidence

Up to 10-second initiation phase

More Cleanup Time

45-second gel phase

Up to 85% of dentists find light-curing a faster way to clean up excess cement.

75% of resin cement users have used a bur to remove excess resin cement.

EVERLASTING ESTHETICS

You take the time to restore a natural looking tooth. We want to make sure it stays beautiful. The Shade Stable technology in Calibra Universal virtually eliminates shade shifts over time.

ROBUST BONDING PERFORMANCE

Teeth are put to the test daily, which means your restorations will be too. Get the reliability and predictability of proven immediate and short-term bond strength for long-lasting results.

ONE CEMENT FOR NEARLY ANY RESTORATION

Get the efficiency of a cement that can be used for a wide array of indications, and clean up your armamentarium as well.

Ready for a cement that goes beyond strength? Visit www.CalibraCement.com

1. The Key Group, Inc.: 2015 Dental Omnibus: Quarter 1 Voice of Customer Reports.
2. 10-second tack cure window equals five-second wave cure per surface.
3. For excess cement cleanup, monowave output LED lights with a single peak output around 470 nm are recommended. High power, dual or broad spectrum lights may cause premature hardening of excess cement. Check curing light effect on mixed cement in the laboratory prior to clinical use.

AVOID MISDIAGNOSIS

High radiopacity can aid in providing a clear view of the material within the crown. This helps avoid a misdiagnosis of gaps or voids, which can lead to costly redos.