

# Frequently Asked Questions (FAQ)

### **Clinical Applications**

- Class I Class V cavity preparation, cleaning & decay removal
- Crown preparation before cementation
- Preventive Resin Restoration (PRR)
- Composite/porcelain repair and restoration
- Orthodontic bracket etching
- Cleaning & polishing, removing tea/tobacco staining
- Removing vegetal plugs or other matter prior to diagnosis of hidden caries

### Aquacut AquaCare without drill or anaesthetic

Removal of glass ionomer and composite restorations, conservative preparations, etching porcelain and cleaning and etching of tooth surfaces before fissure sealing can all be done without the drill; often without the use of anesthetic.

#### How does Aquacut AquaCare compare for speed?

Speed, powder and water volume can be varied within very wide limits, giving the Clinician complete control and high versatility of operation: mostly used without anesthetic, in most cases there will be a saving of time with each patient.

#### How safe is Aluminium Oxide?

Aluminium Oxide is not toxic and will not cause respiratory problems. Aquacut works with 53 micron powder and 29 micron, and this places them well clear of the allowable (legal) safe level in the event of any accidental inhalation.

## Is soft tissue affected?

Soft tissue is not likely to be damaged since the energy of the abrasion process is absorbed by any soft tissue coming into contact.

#### Sensitivity of teeth under treatment

Sensitivity in the dentine is usually swiftly controlled by a slight reduction in air pressure. Cutting with short abrasive bursts will help to avoid any patient reaction. Cutting near the pulp exposure this is especially important – with low air pressure the experienced Clinician can prepare cavities without patient sensitivity.

# Controlling the depth when cutting

The tip should be in motion and with short bursts of the abrasive stream. If the tip is held stationary with active abrasion the depth of cut increases.

#### If soft decay is encountered

Soft decay is best removed with Sodium Bicarbonate or using your usual method. For some patients anesthesia may be necessary, but most will tolerate the mild discomfort once the procedure has been explained to them.

### Using Aquacut AquaCare for diagnosis of caries

In "cleaning/polishing" mode using Sodium Bicarbonate, foreign matter e.g. a vegetal plug may be concealing a carious lesion within a fissure or pit. At the twist of a control the Clinician can change to the chosen cutting medium – WITHOUT REMOVING THE HANDPIECE FROM THE ORAL CAVITY – and proceed with treating the lesion. This diagnostic use of Aquacut Quattro has proved to be a great attribute for the dental practitioner, especially for its assistance in conservative dentistry.

# Versatility of control

The Clinician has a wide range of settings in his control, with air pressure, powder and water volume variable to suit all his abrasion procedures. Conservative, time-saving, patient-friendly.

