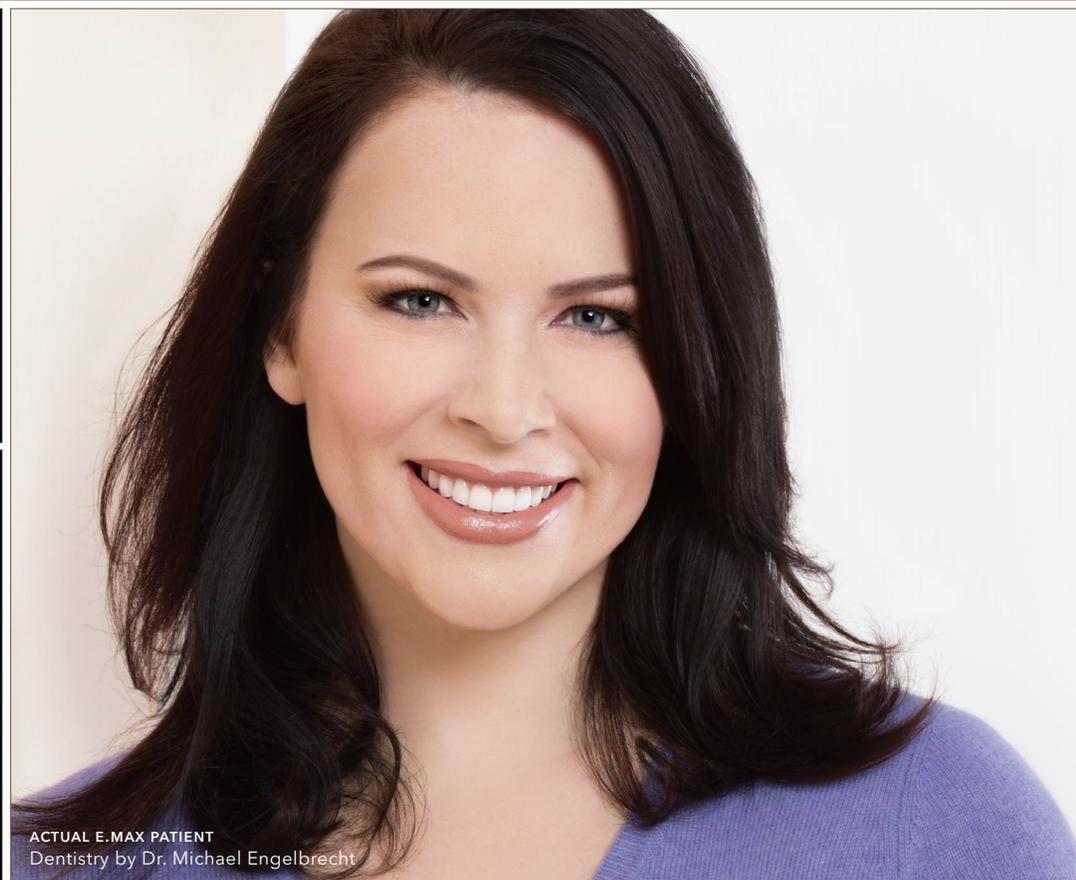


# MICRODENTAL E.MAX®. A BEAUTIFUL ALTERNATIVE TO PFM.



## ADVANTAGES

- All-Ceramic Esthetics
- Natural Translucency
- Double The Strength Of Empress
- Excellent Margin Adaption
- Highly Biocompatible
- Excellent Soft Tissue Response
- Conventionally Cementable and Bondable
- Strength And Beauty Without Fluctuating PFM Metal Costs
- Versatility And Strength For Both Anterior And Posterior Restorations

## When esthetics can't be compromised, MicroDental e.max offers many benefits over PFM.

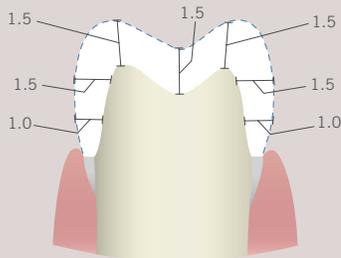
Known for our advanced techniques in all-ceramic dental fabrication, our technicians apply that expertise to the IPS e.max product line. Our technicians are capable of bringing IPS e.max from good to great through their expert use of this revolutionary product. From the team that introduced the IPS Empress line, revolutionizing esthetics in ceramics, IPS e.max is twice the strength, with both milled and pressed capabilities. With a strength of up to 400MPa, IPS e.max is an exceptional option for your translucency requirements.

Contact MicroDental at 613.829.8290 for more information.

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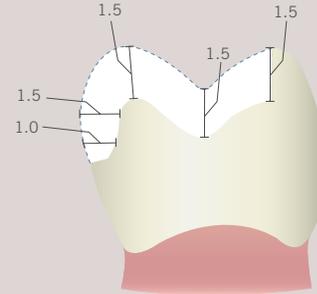
## PREPARATION GUIDELINES

### Posterior Crown



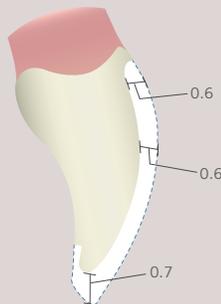
The anatomic shape is evenly reduced while observing given minimum framework thickness. A circular shoulder is prepared with rounded inner edges or chamfer at an angle of 10-30°, width of 1.0mm. Reduce occlusal surface by 1.5mm. Lingual reduction is 1.5mm. Incisal edge of the prep should be at least 1.0mm (milling tool geometry).

### Onlay



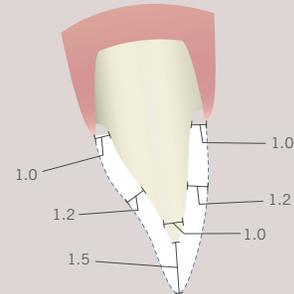
Provide at least 1.5mm in cusps or cusp areas. Partial crowns are indicated if the prep margin is less than approx. 0.5mm away from cusp tip, or if enamel is severely undermined. Should be prepared without a chamfer, i.e. in a 90° angle to the residual tooth structure.

### Veneer



For prep involving reduction of the incisal edge, (only labial reduction), the preparation depth in the cervical and labial area should be at least 0.6mm. The incisal edge must be reduced to 0.7mm.

### Anterior Crown



The anatomic shape is evenly reduced while observing given minimum framework thickness. A circular shoulder is prepared with rounded inner edges or chamfer at an angle of 10-30°, width of 1.0mm. Reduce incisal edge by 1.5mm. Lingual reduction is approx. 1.0mm.

## GENERAL CEMENTATION AND BONDING GUIDELINES

1. Dual Cure resin cements with Total-Etch adhesives will provide stronger bonds to enamel.
2. Light cure only cements are designed for restorations with less than 2mm in thickness and high translucency (e.g. IPS Empress®, IPS e.maxCAD® and IPS e.maxPress®). The absence of self-cure amines eliminate shade shift and provide the highest level of shade stability.
3. Resin cements with Self-Etching adhesives will provide strong bonds to dentin and prepared enamel and offer reduced post-op sensitivity. These systems are excellent for crowns and bridges.
4. Self Adhesive cements and Glass Ionomer cements are indicated for high-strength restorative materials only (e.g. Lithium-disilicate, Zirconia, Metal) and often have lower bond strengths. Resistance form in preparation design is critical to retain restorations (e.g. minimum height of 4mm and a taper of less than 8 degrees.) They are easier to use than true adhesive systems and offer reduced post-operative sensitivity.
5. Glass-based ceramics (e.g. IPS Empress, IPS e.max) require proper etching and priming to establish adequate bonding.
6. Disclaimer: For maximum performance and esthetics, Ivoclar Vivadent recommends the use of Ivoclar Vivadent brands of cements for the placement of all IPS Empress and IPS e.max restorations. This is because the cements were developed to be compatible with the ceramic identified. Ivoclar Vivadent provides no assurances that the non-Ivoclar Vivadent brands mentioned in this document will perform as indicated and review of the cement manufacturer's Indications and Instructions for Use is highly recommended.