

SCAN QR



PRODUCT INFORMATION

# Virtually Unbreakable

*Better margins, better wear, better strength...for less than PFMs!*

**\$226\***

per posterior crown



# BruxZir®

## Solid Zirconia Crowns & Bridges

An ideal solution for posteriors instead of PFM metal occlusals or full metal crowns. BruxZir has no porcelain overlay, is virtually unbreakable and resistant to chipping and cracking in the mouth.

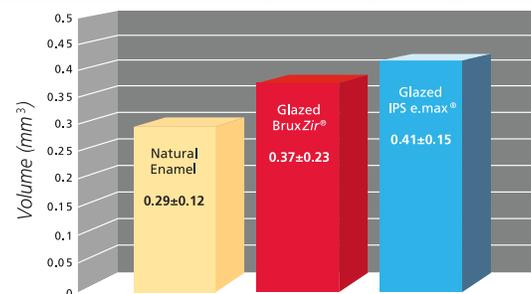
- STRONG** - virtually chip-proof solid zirconia
- PRECISION** - produced with CAD/CAM technology
- CEMENTABLE** - conventional or adhesive cementation
- BIOCOMPATIBLE** - Health Canada approved zirconia
- GUARANTEED** - a five-year warranty against breakage

### Hammer Test Video

Watch the Hammer Test  
BruxZir vs PFM



### Wear Compatibility Study



Results show that glazed BruxZir is wear compatible with enamel and virtually identical to IPS e.max

2018 *BRUXZIR PRICING	Posteriors	Anteriors
	Single Crowns	226
Bridge Units	236	284
Implant Units	305	352

**PROTEC**  
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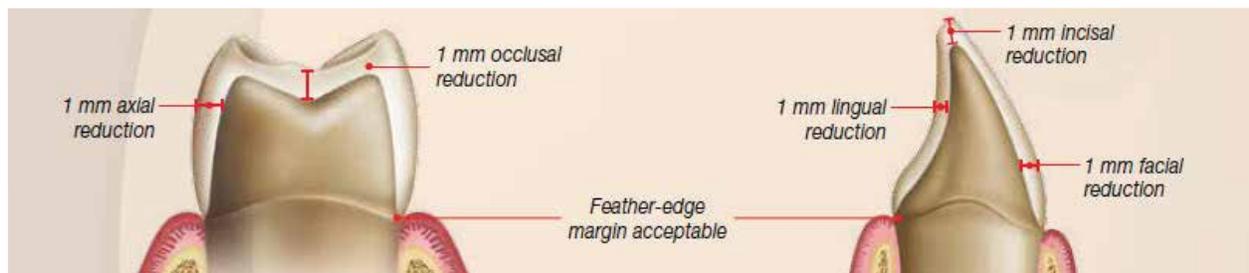
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# PREPARATION AND CEMENTATION

## PREPARATION RECOMMENDATIONS

A light chamfer or feather-edge margin preparation is recommended. The minimum of 1.0 mm of occlusal space is acceptable, but 1.0 mm clearance is recommended.



## CEMENTATION INSTRUCTIONS

Cement using Ceramir® Crown & Bridge or a resin-reinforced glass ionomer cement such as RelyX™ Luting Cement or GC Fuji Plus™. For short or tapered preparations, use a resin cement such as RelyX™ Unicem or Panavia™ F2.0.

## TRY-IN RECOMMENDATIONS

Bruxzir restorations are fabricated from solid zirconia oxide material, and like most metals, zirconia exhibits a strong affinity for phosphate groups. Most primers, such as Monobond Plus and Z-Prime™ Plus, or cements such as Ceramir® Crown & Bridge, all contain phosphates.

When a Zirconia restoration is tried in the patient's mouth and comes in contact with saliva, the phosphates in the saliva in the form of phospholipids, bind to the zirconia oxide and cannot be rinsed effectively. The best way to clean and remove these phosphate groups is with the use of Ivoclean.

**Ivoclean** (a zirconia oxide solution) is placed inside the restoration for 20 seconds and then rinsed. Due to the large concentration of free zirconia oxide in the Ivoclean, it acts as a sponge and binds to the phosphate groups that were previously bound to the restoration. Once the Ivoclean solution is rinsed, you will have a fresh bonding surface for adhesive luting.

## CLINICAL SEATING PROTOCOL

- Try in the zirconia-based restoration.
- Rinse saliva out of restoration.
- Place Ivoclean in restoration for 20 seconds and rinse.
- Cement restoration with the adhesive material of your choice.



Use a microbrush to ensure that the Ivoclean is evenly distributed.



After 20 seconds, rinse the Ivoclean from the crown with an air/water syringe.



Fill the crowns with cement and seat them simultaneously.