

JOHNS DENTAL TECHNICAL BULLETIN

SPRING-SUMMER 2003

MONODONT TECHNOLOGY

PRODUCT-

The Monodont® Bridge is a resin pontic with a patented stainless steel framework. The framework has small retentive "talons" on each side that fit into undercut preps on the adjacent abutment teeth. Available for both anterior and posterior applications, the Monodont® is a conservative, economical and easy solution for your patients and your practice.

Our Experience has shown that dentists of all specialties have embraced these components and the procedures they make possible. The reversibility of the procedure allows greater flexibility in a dynamic treatment plan as in developing dentitions, long-term reconstructive therapy and periodontal maintenance. The patient base includes not only those with economic considerations, but also those engaged in any treatment plan requiring potentially long term fixed prosthetics.

CLINICAL INDICATIONS-

The Monodont® is indicated whenever there is a missing tooth, a failed Maryland Bridge, a congenitally missing tooth needing a flipper, a need for an implant temporary (and for tissue sculpting), an implant that may have failed, emergency avulsions, periodontal involved dentitions, elderly or medically compromised patients or patients with economic considerations.

The Monodont® can be used to replace a single missing tooth anywhere in the dental arch... anterior, posterior, maxillary, or mandibular... provided that there is a mesial and distal supporting abutment tooth.

CLINICAL CONTRAINDICATIONS-

- Resin Allergy
- Intra, extra-oral piercing (i.e.tongue balls.)
- Insufficient tooth structure to adequately prepare a distinctly undercut Class III type prep in the anterior, or a Class II type box prep with an undercut in the posterior.

ADVANTAGES-

- Great long-term provisional for implant sites
- Reliable alternative to flipper partials, nesbits
- Esthetic, yet cost effective option for the patient on a budget
- Short two appointments process with minimal tooth preparation required.



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PROCEDURE- First Appointment

1. No tooth preparation.
2. Take impression, including opposing arch, and a bite registration.
3. Select shade.

{Enter Lab Name} will pour the models and fabricate the Monodont. The bridge and the prepped model with the prep guide/pontic positioning stent are returned to you for insertion.

PROCEDURE- Second Appointment

1. Place the prep guide/pontic positioning stent over the abutment teeth and "spot" the preps from the lingual (occlusal) through the pilot holes with an undercut diamond bur.
2. Remove the stent, and finish the preps **from the proximal** to insure as conservative a prep as possible but still with a distinct undercut. **The undercut is critical to this technique.**
3. Try in the Monodont. Use the stent again for checking position. Remove the Monodont and stent to prepare for bonding sequence.
4. Etch preps. Apply a thin coat of primer/bonding agent on the retentive talons.
5. Apply initial layers of flowable composite into preps.
6. Seat Monodont, then position it using the stent.
7. "Tack" the Monodont into the preps by light curing through the stent.
8. Remove stent, and back fill preps with stiffer bodied hybrid composite of your choice. Finish and Polish as you would any composite.

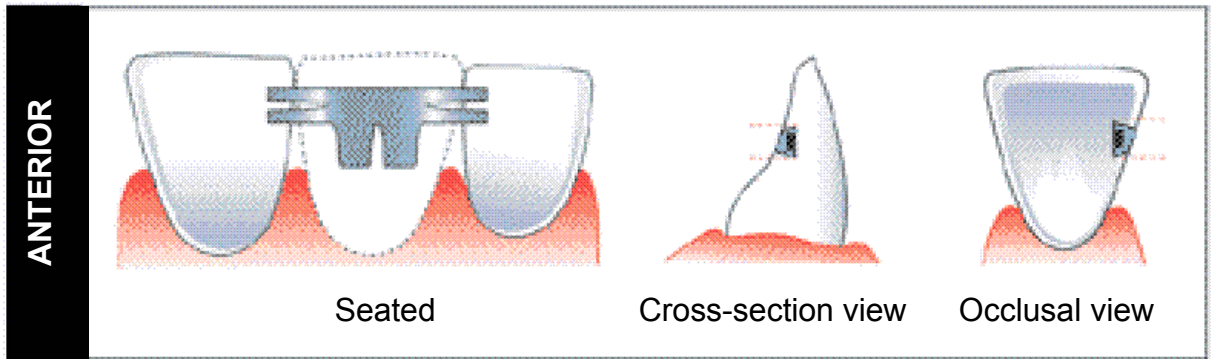


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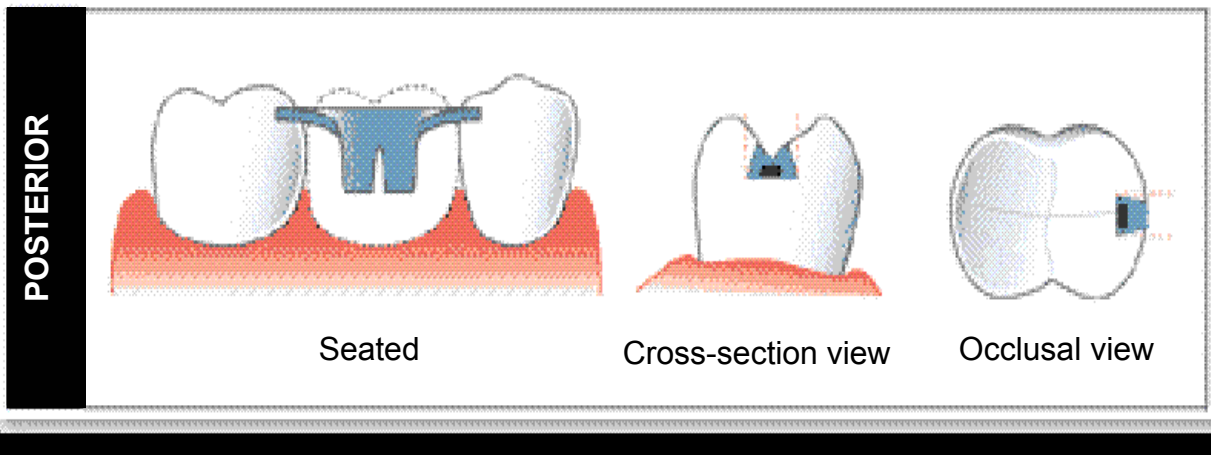
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PREPARATION- Anterior abutments – Deliberate, well defined Class III preparation “spotted” from the lingual using the stent, but cut from the proximal to keep the prep conservative, yet with a distinct undercut.



PREPARATION- Posterior abutments- Again, “spotted” through the stent from the occlusal, but cut from the proximal. The stent is not (and indeed cannot) be used as a depth gauge. It is designed to help you locate the prep without excessive tooth reduction.

The preparations must be of adequate depth and dimension to allow for the thickness of the retentive talons (.025) and the composite retentive material. A 37 or a 38 inverted cone diamond is usually the ideal but for cutting these preparations.



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INSURANCE CODES-

6251	Pontic- Resin/Base Metal
2330	Single Surface Composite resin (for anterior abutments)
2386	Two surface composite resin (for posterior abutments)
2390	Note that CDT-4 Codes have replaced 2386 with 2390. Best to check with the insurance carrier prior to submitting claim to determine which code they are currently using.

The support for the pontic is a pre-fabricated stainless steel component. The retainers for this pontic assembly are composite, utilizing the retentive talons of the component for retention as well as reinforcement. Anterior prostheses of this design are generally retained in abutments using single surface composite restorations. Cuspid and first bicuspid applications are retained using a single surface restoration on the mesial, and a two surface restoration on the distal. Posterior applications utilize a two surface restoration on both the mesial and the distal.



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