

ESSENTIALS

- * **STERILIZE ONLY with distilled water** to prevent staining.
- * **SOMETIMES** when you try to tighten a bur in the hand-bur handle, **the handle turns but it doesn't tighten the bur (see back).**
- * View [Gentle Hand-Bur Basics](#) video
- * Operate safely and painlessly following IFU: **deep decay is not removed** (instead, treat with SDF)
- * Follow enamel-perforation precautions (below)
- * **Before clinical use, practice on a plastic pen or spatula (with opposite hand bur-shielding) for enamel perforation**
- * **Check bur security** at insertion; **before** use; **during** use at + / - 15 min. Intervals

ENAMEL PERFORATION enlarges a lesion to access infected dentin; opens it for self-cleansing or for glass-ionomer. Start with the smallest bur which cannot fit into a cavity, then progress to the next size and the next as needed. Use round-burs sizes 2-4-6-8. Only two or three sizes are normally used: 2-4-6; 4-6-8; the most common are 4 and 6.

ENAMEL PERFORATION STEPS

Lubricate handle end, **Insert** it into hand-guard. **Place** bur over the cavity.

Firmly grip handle so hand-guard is secure.

Align handle as perpendicular to the surface as possible. This prevents slipping.

Shield burs with fingers (from sliding off tooth) **while Twisting** handle back & forth till the bur tip is securely anchored.

Test status of bur-tip anchor with light circular pressures.

Once anchored: securely, release the bur-shielding hand in order to apply light counter-pressure.

Resume twisting (gradually) adding pressure with equal counter-pressure, til lesion is opened sufficiently for GIC insertion.

Increase bur sizes only as needed as current SMART protocol calls for the absolute minimum enamel removal for a good GIC seal.

PRECAUTIONS FOR ENAMEL PERFORATION AND PATIENT COMFORT

- * **HP burs are highly recommended for enamel perforation.** See HP benefits at dcfai.org/ifu
- * **Grip handle firmly without hovering hand-guard precariously over the mouth.** Hand-guards facilitate thicker enamel penetration.
- * **Maintain perpendicular alignment—Shielding burs til solidly anchored—TEST.** These steps prevent slipping & injury.
- * **DO NOT PINCH THE LIPS—be extremely vigilant as it is so easy to do! Also, prevent lip friction** with a 2x2 gauze or vaseline.
- * **To apply counter-pressure** on upper teeth: gently push down on the head; for lower teeth: support the mandible.
- * **Twist bur handle with a steady hand**—the hand-guard facilitates this. **No wrist rocking** as it may disquiet our patients.

EXCAVATION removes only soft, infected dentin that is not in proximity to the pulp. Avoid using dull burs. If you use short-stem LA burs, do so only for easy-to-access areas—otherwise use long stem HP burs—they are perfect for all applications once you get used to them.

Let the patient be your guide! At the first sign of discomfort, STOP excavation! Apply SDF or SMART. See dcfai.org/mmc

Grip handles comfortably. With your opposite hand, retract the cheeks or lips; add finger or hand rests, etc.

Scrape caries **Back & Forth in 1/4 Turn Twists.** **Stabilize** your arm against your side (if need be) for maximum control.

THIRD MOLARS: HP Burs enable access to difficult areas—especially useful when posterior visibility is compromised.

Open mouth half-way. **Place** bur tip over lesion. **Rely** only on your tactile senses as visibility is compromised.

Stabilize your operating hand with a finger or hand rest or resting your hand lightly on your patient's face.

Follow enamel perforation steps above. **Do not pinch the lips!** Clean cavo-surface margin with same HP burs used for Enamel Perforation. If cavity is larger than a #8, then lightly scrape DEJ circumferentially 360° (by wrist action alone) to attain a good GIC seal. Do not excavate deeper than DEJ. Apply SDF (or Silver Nitrate), then add GIC (=SMART).

HAND-BUR OPERATION TIPS

1. Do not cross arches except for lingual or palatal lesions.
2. For best visibility and access: rotate your patient's head as needed; sit lower or higher, make use of standing—it is only for a few moments.

MAINTENANCE

- * **STERILIZE hand-burs ONLY with distilled water.** Prevents staining. To remove water stains from aluminum: [Try This](#)
- * **SOMETIMES**, when you try to tighten a bur in the hand-bur handle, **the handle turns but it doesn't tighten the bur.**
Solution: **1** Clamp collar tightly. **2.** Twist handle clockwise while pulling handle backward til collet is tightly against the collar. (See image)
- * Rub handles with a soft cloth to restore shine or super fine #0000 steel wool.
- * Do not remove burs from multi-handle operation handles in order to sterilize. It is not necessary.
- * Annually: disassemble handle components to inspect for corrosion. If noted: assure dryness, coat surface with a light film of petroleum jelly, reassemble. Keep jelly away from collet (bur-gripping) prongs (which have a threaded mail end).

[Bur] [bur-gripping Collet] [Collar or compression collar] [Handle]



- * Dale Ott, of Trusted Design Services—designer of our All-In-One model collar, states that all his industrial drilling machines operate on the same micro-chuck gripping technology as seen above. He marvels at their superb gripping force for such extremely light, economical devices.

INSTRUCTIONS

FOR USE

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