

SR Vivodent® S PE | S DCL

The exceptionally esthetic tooth for sophisticated needs



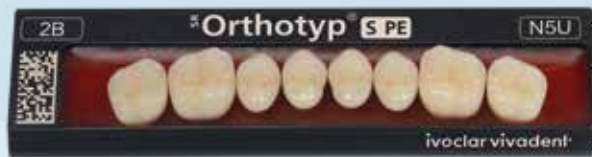
Tooth mould chart

- SR Vivodent® S PE
- SR Orthotyp® S PE
- SR Vivodent® S DCL
- SR Orthotyp® S DCL
- SR Ortholingual® S DCL



Two tooth lines – one esthetic result

SR Vivodent® S PE



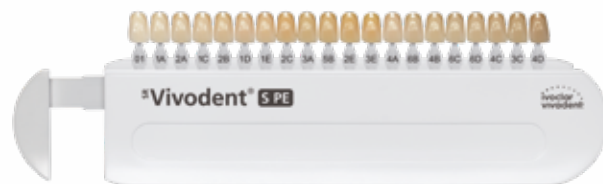
Exceptional design

Each of the anterior moulds is specifically designed to suit the characteristics of the individual tooth:

- True-to-nature dimensions
- Physiological curvatures
- Vivid surface characteristics
- Shape-specific layering
- Pronounced tooth necks

The posterior tooth moulds have been further developed to feature a modern appearance and meet the high requirements placed on the prosthetic and esthetic qualities of modern prostheses. The proven functional occlusal design, however, has remained unaltered.

20 PE shades



The PE shades reflect the shade characteristics typically found in older patients.

SR Vivodent® S DCL



Expressive and individual

The shade intensity, brilliance and translucency of these tooth lines closely imitate the properties of natural teeth, resulting in dental prostheses that integrate exceptionally well into the oral surroundings.

16 A–D and 4 Bleach shades



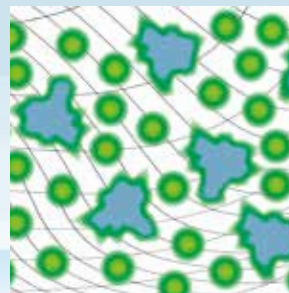
A–D and Bleach shades are frequently used in combination prosthetics.



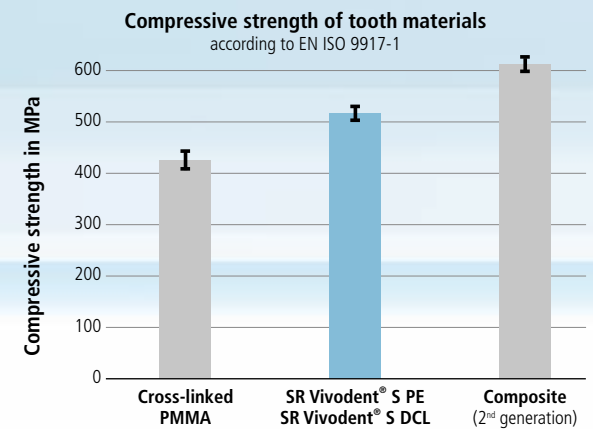
Highly cross-linked DCL material

The new SR Vivodent® S PE and SR Vivodent® S DCL tooth lines are entirely made of highly cross-linked DCL acrylic (Double Cross-Linked). This material consists of a distinctively modified variant of polymethyl methacrylate in which both the polymer and matrix are cross-linked.

The result is a material that does not only feature higher compressive strength but also similar flexibility to conventional PMMA. For this reason, improved denture longevity can be expected. A sound bond of the denture teeth to the denture base material is another advantage of the DCL material.



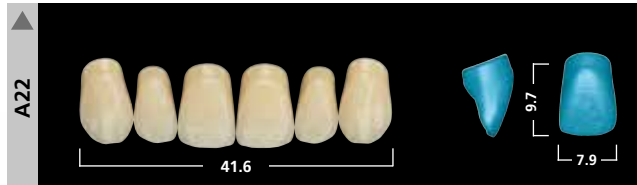
- Cross-linked PMMA matrix
- Diffusion layer
- PMMA pearl polymer fillers
- Highly cross-linked prepolymer fillers



Source: R&D Ivoclar Vivadent AG, Schaan, 2015

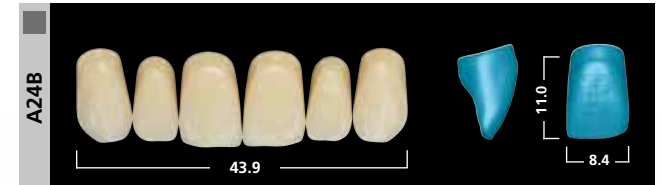
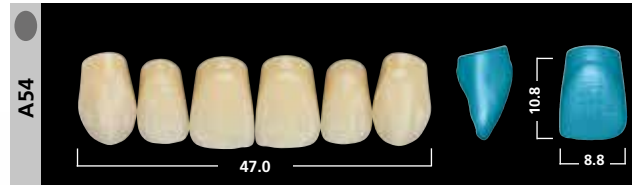
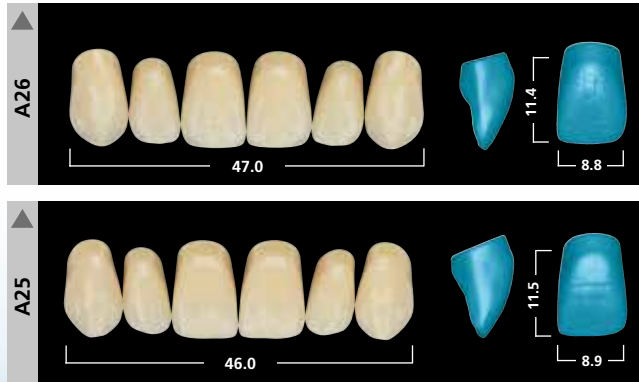
SMALL

SR Vivodent® S PE | SR Vivodent® S DCL



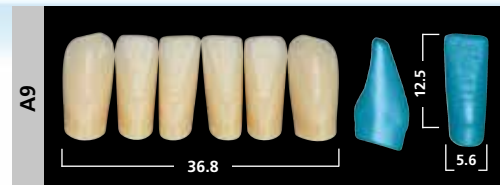
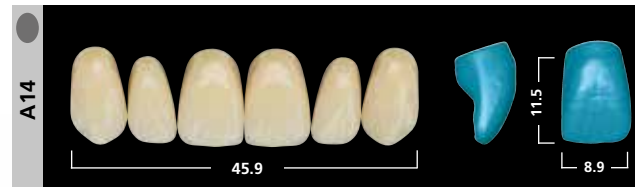
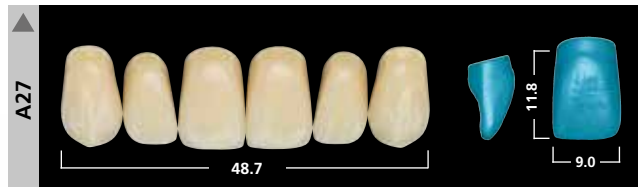
MEDIUM

SR Vivodent® S PE | SR Vivodent® S DCL



LARGE

SR Vivodent® S PE | SR Vivodent® S DCL



POSTERIOR

SR Orthotyp® S PE | SR Orthotyp® S DCL



SR Ortholingual® S DCL



The offer may vary from country to country.

PROCESSING INSTRUCTIONS

Shades

SR Vivodent® S PE:

- 20 PE shades (01, 1A, 2A, 1C, 2B, 1D, 1E, 2C, 3A, 5B, 2E, 3E, 4A, 6B, 4B, 6C, 6D, 4C, 3C, 4D)

SR Vivodent® S DCL:

- 16 A–D shades (A1, A2, A3, A3.5, A4, B1, B2, B3, B4, C1, C2, C3, C4, D2, D3, D4)
- 4 Bleach shades (BL1, BL2, BL3, BL4)

Shade selection

The tooth shade is determined with the help of a shade guide according to the A–D or PE shade system of Ivoclar Vivadent.



The sample teeth of the SR Vivodent S PE and SR Vivodent S DCL shade guide feature the same layering structure and material as the marketed original teeth. Shade deviations will be consequently reduced to a minimum. The shade selection with the patient should be carried out under defined light conditions (5,500 K colour temperature) or during daylight (preferably light from the north).

Anterior teeth

Anterior tooth selection

If possible, the anterior teeth should be selected directly with the patient according to anatomical and mimic characteristics.

The anterior teeth are categorized into triangular, oval and square shapes. However, it should be noted that each mould has its own distinctive character.

• Triangular tooth moulds

This group is characterized by teeth having a crown which tapers towards the cervical ridge. The vertical curvature is moderate.

• Oval tooth moulds

The teeth of this category have a pronounced curvature. The labial curvature is particularly marked.

• Square tooth moulds

With this angular shape, the central incisor is dominant. The vertical labial curvature is moderate.

Chairside

The facial meter allows fast and targeted selection of the appropriate anterior tooth size.

Step 1: Measure the interalar width of the nose with the facial meter and select the appropriate tooth size S/M/L.

Step 2: Select between triangular, oval and square tooth shapes within this size range.

The papillameter is the ideal device for the definition of the length of the upper lip and the lip closure line. Especially for the length of the anterior teeth, the lip closure line provides one of the most important pieces of information.

Labside

The following reference points are determined with the help of a model analysis:

a) Position of the canines

Identify the first large pair of palatine rugae; the midpoint of the labial surface of the upper canines is aligned at a distance of approx. 9 mm.

b) Contact point of the central incisors

The labial surface of the central incisors is aligned at a distance of approx. 7 mm from the centre of the papilla incisiva.

The length of the arch measured across these three points can be used as a reference to select a set of anterior teeth with an appropriate width from the tooth mould chart.

PROCESSING INSTRUCTIONS

Posterior teeth

This tooth mould chart facilitates the selection of posterior tooth sizes to match the selected anterior teeth. Ivoclar Vivadent offers a variety of posterior teeth, which give the clinician the opportunity to select a tooth shape that will best meet the functional and esthetic needs of the patient.

Occlusal concept

1. Classic occlusion

SR Orthotyp S DCL and SR Orthotyp S PE are the classic choice for use in complete, partial, hybrid and implant-supported dentures. The Orthotyp teeth are set up in accordance with a normal bite situation in a one-to-two-tooth relation. In this way, the primary contacts in the centric position are located in the central fossa in the mandible as well as on the marginal ridges.

One-to-two-tooth setup



Classic occlusion



2. Lingualized occlusion

Set up in a lingualized occlusion, the **SR Ortholingual S DCL** teeth provide enhanced stability in implant-supported removable dentures. The teeth are set up in a tooth-to-tooth relation, resulting in a centric engagement of the lower fossa and the upper palatal working cusps. The buccal cusps, however, are set up without contact points. The Ortholingual teeth are also suitable for being set up in a one-to-two-tooth relation in accordance with a normal bite situation.

Tooth-to-tooth setup



Lingualized occlusion



Minimum layer thickness

It must be ensured that the stability of the teeth and the correct shade effect are maintained. It is therefore recommended to observe the minimum layer thickness.

- **Anterior teeth: min. 2.5 mm**
- **Posterior teeth: Central fossa min. 2.0 mm, cusp tips min. 2.5 mm, cervical area min. 2.5 mm**

Important

To ensure that removable dentures remain functional over longer periods of time, the following prerequisites should be met:

- The dentures should be planned and fabricated in close cooperation with the dentist.
- Dentist and dental technician should ensure a balanced occlusion and articulation.
- All dental products should be used according to the instructions of the manufacturer. Denture teeth, in particular, should not be weakened by excess grinding.
- In order to ensure a reliable bond with the denture base material, the teeth are cleaned with steam, roughened and wetted with monomer. When completing the denture with an auto-curing polymer, we recommend using additional mechanical retention.
- The application of a glaze varnish or denture cleaning spray is not recommended.
- The teeth should not come into contact with a flame or direct heat.
- Heat development as a result of too much pressure during grinding must be prevented.
- We recommend wearing a face mask and using extraction equipment for protection against grinding dust.
- Dentures should be cleaned with commercial cleaning agents. Contact with solvents must be prevented.
- If an allergy against components of the product is known, prefabricated teeth should not be used.
- When using C&B veneering materials, the corresponding Instructions for Use must be observed.
- We recommend wearing protective goggles to protect your eyes from grinding chips.

COMBINATION TABLE

		Anteriors		Posteriors	
		SR Vivodent® S PE S DCL		SR Orthotyp® S PE S DCL (22°)	SR Ortholingual® S DCL (15°)
		Upper	Lower	Upper/Lower	Upper/Lower
SMALL	▲	A22 A42	A3, A4, A5 A3, A4, A5	N3U/N3L, N4U/N4L N3U/N3L, N4U/N4L	LU3/LL3 LU3/LL3
	●	A44	A3, A4, A5	N3U/N3L, N4U/N4L	LU3/LL3
	■	A11 A13	A3, A4, A5 A3, A4, A5, A6	N3U/N3L, N4U/N4L N3U/N3L, N4U/N4L	LU3/LL3 LU3/LL3
MEDIUM	▲	A25 A26	A6, A7, A8 A7, A8	N4U/N4L, N5U/N5L N4U/N4L, N5U/N5L	LU5/LL5 LU5/LL5
	●	A54	A7, A8	N4U/N4L, N5U/N5L	LU5/LL5
	■	A12 A24B A66	A6, A7, A8 A6, A7, A8 A6, A7, A8	N4U/N4L, N5U/N5L N4U/N4L, N5U/N5L N4U/N4L, N5U/N5L	LU5/LL5 LU5/LL5 LU5/LL5
LARGE	▲	A27 A68	A9, A10 A9, A10	N5U/N5L, N6U/N6L N5U/N5L, N6U/N6L	LU6/LL6 LU6/LL6
	●	A14	A8, A9	N5U/N5L, N6U/N6L N5U/N5L, N6U/N6L	LU6/LL6 LU6/LL6
	■	A15 A17	A10 A9, A10	N5U/N5L, N6U/N6L N5U/N5L, N6U/N6L	LU6/LL6 LU6/LL6

This combination table is recommended as a guideline. In case of particular anatomical conditions, deviations are possible.

The offer may vary from country to country.

Ivoclar Vivadent Training Centre



Always being on the latest standard of knowledge is a sign of your competence. Ivoclar Vivadent supports you in achieving this goal by conveying to you both knowledge about the latest products and know-how with regard to practice-oriented application and working techniques. The Ivoclar Vivadent ICDE continuously offers basic and advanced training courses tailored to your needs.

Have a look at our website.

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