Technique Multilink®

Universal adhesive cement

Features

- Multi-purpose, self-etching, and self-curing adhesive cement
- High bond strength
- Quick and easy to use
- Exceptional clean up
- Indicated for cementation of indirect inlays, onlays, crowns, bridges, and posts; compatible with metal and metal-ceramics, metal-free, strengthened core ceramics, and composite
- Three shades (White Opaque, Yellow, and Transparent) to meet clinical indication needs

Packaging

Available in a system pack containing a Double Syringe, Primer A, Primer B, Metal Primer, and accessories, including brushes, mixing pad, and instructions. Double Syringe refills are available in each shade and for each primer.



Ivoclar Vivadent Inc. www.ivoclarvivadent.us.com email@ivoclarvivadent.com

U.S. 175 Pineview Drive Amherst, N.Y. 800-533-6825

Canada

2785 Skymark Ave., Unit 1 Mississauga, Ontario L4W 4Y3 800-263-8182

Select 48.

Cementation

Placing all-ceramic crowns using Multilink universal adhesive cement

By Dr. Christopher Ramsey, Palm Beach Gardens, Fla. Information provided by Ivoclar Vivadent Inc.

ollowing are the step-by-step procedures for placing all-ceramic crowns using **Multilink** universal adhesive cement.

A 55-year-old female patient presents with failing amalgam restorations on teeth 3, 4, and 5 (Fig. 1). A thorough clinical examination was performed, no contraindications to indirect restorative treatment were found, and all alternatives and their respective risks and benefits were reviewed with the patient. The patient elected to pursue treatment with full-coverage IPS Empress all-ceramic crowns (Ivoclar Vivadent) (Fig. 2).

Take impressions according to standard clinical protocol, anesthetize the patient, and remove the defective restorations. Prepare the teeth for the all-ceramic restorations, and take an impression. At this time, note appropriate shades. Fabricate and place provisional restorations.

At the follow-up appointment:

- 1. Remove the provisional restorations and cleanse the preparations using a chlorhexidine scrub (Fig. 3). Then rinse and dry.
- 2. Try-in the restorations and verify margins to

- ensure complete seating and desired interproximal contacts.
- 3. Remove the restorations, etch the internal aspects using a 35% phosphoric acid solution, and thoroughly rinse and dry. *Note:* During this time, the assistant mixes the Multilink Primer A and Primer B in a well.
- 2. Scrub the primer onto the preparations (Fig. 4), with the clinician returning to the well occasionally for fresh primer to thoroughly condition the preparations. *Note:* During this time, the assistant dispenses and mixes the base and catalyst of the Transparent Multilink universal adhesive cement into the internal aspects of the restorations (Fig. 5).
- 5. Seat the restorations individually, applying firm pressure and allow the cement to self-cure for 45 to 60 seconds (Fig. 6).
- 6. Remove any excess cement from the gingival margins by peeling it away with a hand scaler (Fig. 7).
- 7. Fig. 8 is an immediate post-operative view of the final restorations.



Fig. 1 Preoperative view of the patient's teeth.



Fig. 2 Full-coverage IPS Empress crown restorations on the stone model.



Fig. 3 Remove the provisional restorations and cleanse the preparations using chlorhexidine.



Fig. 4 Scrub the self-etching primer onto the preparations.



Fig. 5 Place Multilink universal adhesive cement into the internal aspects of the restorations.



Fig. 6 Seat the restorations individually and allow the cement to self-cure for 45 to 60 seconds.



Fig. 7 Remove any excess cement from the gingival margins by peeling it away with a scaler.



Fig. 8 Seat the definitive restorations