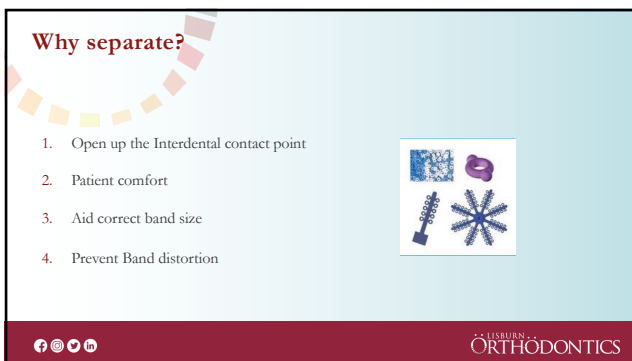




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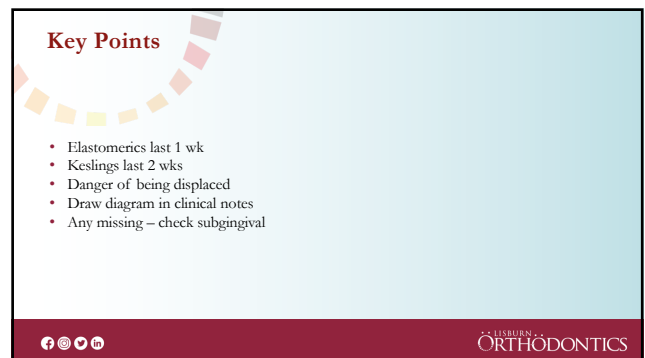
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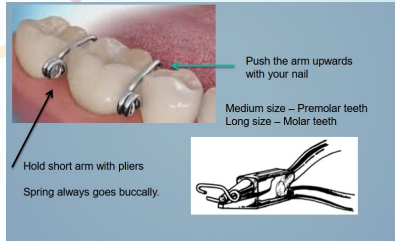


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Kesling Separators



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Brass Wire Separators

- When all else fails
- Rarely used
- Must tuck neatly away to avoid soft tissue trauma
- Pt's find more uncomfortable than other forms of separation



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Placing elastomeric separator

Separating pliers



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Placing elastomeric separator

Floss Insertion



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Separation advice and removal

- No sticky toffees or chewing gum
- Brush as normal
- Pain relief if required
- They will be annoying don't remove them or patient will experience discomfort when banding
- To remove pull out with a straight probe



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Band placement

1. Place Separators
2. Select & size band
3. Cement correct size band

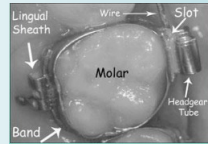


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Bands

- Stainless Steel
- Preformed with attachments
- Can be formed by operator & bracket welded on
- Usually used on the molars



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Banding

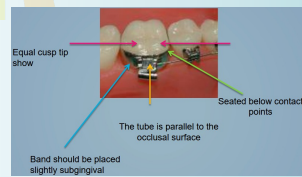
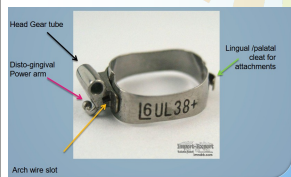
- Approximate size on SM
- Correct size is one that needs stretching to fit
- Seat with band pusher
- Ensure that the bracket/tube is correctly orientated on the buccal surface



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Band Orientation



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Banding Kit



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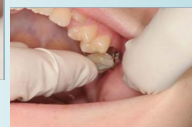
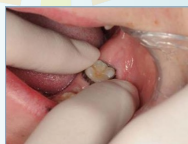
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Band seating

Firstly get a firm grip on the band

Position with finger:

- Upper teeth palatally first
- Lower teeth lingually first



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Using the bite stick

Use the flat end of the stick first, then seat mesially/ distally using the corner of the triangle, and the patient biting gently into position



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Ideal Band Position

- Band level bucco-lingually
- Doesn't extend onto occlusal surface
- Placed just subgingivally
- Tube parallel to occlusal surface

Tips:

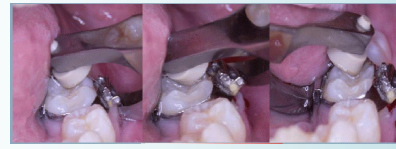
- Avoid pressure on the molar tube
- Seat distolingually first
- Avoid soft tissue trauma



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Band removing



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Indications for banding

- Head gear
- Transpalatal/ lingual arch
- Quad helix
- Tooth has amalgam restoration
- Amelogenesis
- Porcelain or Gold crown
- Fluorosis



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Advantages and disadvantages of banding

Advantages	Disadvantages
Lasts the duration of treatment	Needs Separation appt
Can insert heavy arch wires without any failures	Less aesthetic than bonds
Cement releases fluoride	Irritated Gingiva
	Slower to place than bonds



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Cement

- Zinc Phosphate
- Glass Ionomer
 - Fluoride Release
 - Adheres to Enamel
 - Protect from moisture
 - Mix on cold slab
 - 24hr full setting time



- Blue Glue - it is a one-paste, light curing, resin based cement with fluoride. Easy detection during clean up and band removal.



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Cementation

1. Clean tooth surface
2. Dry with 3 in tip or cottonwool
3. Thin coating of cement on band
4. Place band
5. Remove excess with cotton wool
6. Position, wipe with wet cotton wool
7. Blow air down tubes to prevent blockage
8. Use probe to remove any unwanted excess



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