

Prior to use, carefully read the instructions for use.

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**everX Flow™**

SHORT-FIBRE REINFORCED FLOWABLE COMPOSITE FOR DENTIN REPLACEMENT

For use only by a dental professional in indications for use.

**INDICATIONS FOR USE**

everX Flow is a reinforcing dentin replacement material suitable for:  
 1. Deep cavities and endo-treated teeth, cavities with missing cusps or after amalgam removal and cavities where inlays and onlays are also recommended.  
 2. Core build-ups.

Note:  
 Although everX Flow features a high strength and fracture toughness, it should always be fully covered with a layer of light-cured universal restorative composite to ensure sufficient wear resistance.

**CONTRAINDICATIONS**

1. Direct pulp capping.  
 2. Composite resin product in patients with known allergies to methacrylate monomer or methacrylate polymer.

3. Do not use final approximolar and surface composite layer. Always cover a layer of light-cured universal composite.

**PRODUCT DESCRIPTION**  
 everX Flow is a high-cure, radio-opaque, flowable restorative material to be used intra-orally and classified as a Type 2 and Class 2 (Group 1) per ISO standard 4049.

This material has a radiopacity equivalent to 2.0-2.5 mm of aluminum (dentin = 1 mm, enamel = 2 mm).

The particle size of inorganic fibers is 0.02-0.13 µm.

The total length of fibers is 140 µm and the diameter is 6 µm.

The total amount of inorganic fiber is approximately 30 vol-%.

**COMPOSITION**  
 Barium glass, dimethacrylate, glass fiber, initiator, pigment, silicon dioxide, stabilizer.

**DIRECTIONS FOR USE**

- Preparations  
 a) Turn the springing tip upright and remove the cap by turning counterclockwise.  
 b) Turn the cap securely attach the dispensing tip to the dispensing tip turning clockwise.  
 c) Place the light protective cap until use.

Take care not to attach the dispensing tip too tightly. This may damage its screw. In order to ensure a tight connection, make sure that the dispensing tip is turned correctly.

2. Shape Selection  
 Clean the tooth with water and/or water. Light-curing for the respective depth of cure of each shade.

Note:  
 The selection of the final composite layer should be made prior to isolation.

The shade guide of everX Flow is available on the GC Website.

3. Preparation  
 Prepare the cavity using standard techniques. Dry by gently blowing with oil/water. The use of a rubber dam is recommended to prevent blood from contamination with saliva, blood or saliva.

Note:  
 Avoid capsizing, use calcium hydroxide.

4. Bonding treatment

For everX Flow to adhere well and/or dentin, use a bonding system such as G-Genial BOND, G-Bond or G-BOND (Fig. 2). Follow manufacturer's instructions.

5. Placement of everX Flow – see note for Class II and large cavities

a) Remove the light protective cap from the Note:  
 Prior to extruding the material into the cavity, make sure to check the following:

1) The dispensing tip is securely attached to the syringe.  
 2) The dispensing tip from the dispensing tip is removed by gently pushing forward the syringe with the tip pointing upwards until the material reaches the opening of the tip (Fig. 3).

b) Position the dispensing tip as close as possible to the prepared cavity, and slowly push the plunger to extrude material (Fig. 4). Note: Make sure to leave enough space for the overlaying composite on all surfaces of the cavity preparation.

Note – Class II and large cavities system to establish the proximal contact and contact area.

2) When placing everX Flow in a Class II or large cavity, use a light-cured restorative composite before placing everX Flow (Fig. 5b). The wall should be the same height as the restorative composite and the application pressure of everX Flow.

Note – Class II and large cavities

1) If the dispensing tip is plugged, remove it and extrude a small amount of material directly from the syringe.  
 2) After placement of the restorative composite, light can shorten the manipulation time.

3) After placement, immediately remove and dispose of the dispensing tip and tightly close the syringe with the cap.

**Clinical Hint**

In order to place effectively, use the surface tension of the material to ensure uniformly across the entire surface of the restoration during build up. Once the required amount has been placed, gently move the dispensing tip and plunger and withdraw the syringe in a direction perpendicular to the surface. This will allow the material to separate from the dispensing tip and provides a smooth surface over the restoration.

6. Light-curing

Light-cure everX Flow using a light curing unit. Keep the light guide as close as possible to the surface (Fig. 6). Refer to the chart for irradiation Time and Effective Depth of Cure.

Irradiation Time = 10 sec. (Hochwertig LED) (>1200 mW/cm²)

Bulk shade = 5.5 mm

Dentin shade = 2.0 mm

The effective wavelength range of each dental curing unit must cover 450-480 nm.

Note:  
 Only the Bulk shade can be placed using a bulk application. The Dentin shade should be placed and light-cured in layers as described in the above table.

Note:  
 Lower intensity may cause insufficient curing or discoloration of the composite.

7. Placement of the overlaying composite  
 Fill the remaining cavity space with a wear-resistant and polishable restorative composite, such as G-enial or Essentia. The composite material should be placed in the cervical margin.

8. Finishing and Polishing  
 Adjust the occlusion. Finish and polish using standard techniques.

**SHADES**

everX Flow is available in two shades: Bulk shade and Dentin shade.

**STORAGE**  
 Recommended for optimal performance, store in a cool and dark place (4-25°C / 39-77°F) away from high temperatures or direct sunlight.

**PACKAGES**

1. Dispensing tip (2.0 ml) x1, DISPENSING TIP III Plastic x 20, Light-protective cap x 1

Dispensing tip: 2.0 ml

Light-protective cap x 1

2. DISPENSING TIP III Plastic x 30, Light-shielding cap x 2

Light-shielding cap x 2

3. Dispensing tip: 2.0 ml

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