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CLINICAL TECHNIQUE FOR CLASS III, CLASS IV AND CLASS V

CAVITY PREPARATION FOR COMPOSITE RESTORATIONS

Three designs of tooth preparations for composite restorations, and sometimes they are used in combination. The designs include:

(1) Conventional (2) Beveled conventional (3) Modified

Class III Tooth Preparation:

There is a choice between facial or lingual entry into the tooth

Indications for Lingual Approach

- 1- To conserve facial enamel for enhanced esthetics.
- 2- Carious lesion is positioned lingually.
- 3- Lesion is accessible from the lingual.
- 4-Color matching of the composite is not as critical.
- 5- Discoloration or deterioration of the restoration is less visible.

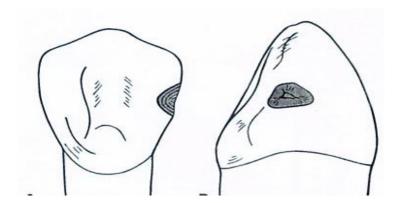
Indications for Facial Approach

- 1- The carious lesion is positioned facially
- 2-Teeth are irregularly aligned, making lingual access undesirable.
- 3- Extensive caries extent into the facial surface.

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Modified Class III

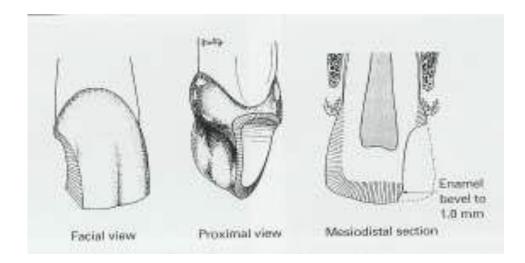
- most used type of cavity preparation.
- indicated for small and moderate lesions or faults.
- designed to be as conservative as possible.
- preparation walls have no specific shapes or forms.
- preparation design appears to be scooped or concave
- 1. Use a 1/2, 1, 2 round bur, point of entry is within the incisogingival dimension of the lesion, perpendicular to the enamel surface.
- 2. Remove all remaining caries or defect.



- 3. No attempt is made to create a uniform axial wall.
- 4. Place cavosurface bevel or flare at the enamel except at the gingival margin area.
- 5. Use a flame shape or round bur resulting in a 45 degrees angle to the external tooth surface.
- 6. Bevel width should be 0.25 to 0.5mm.
- 7. Clean the preparation of any debris and inspect final preparation.

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Class IV Tooth Preparation



- preoperative assessment of occlusion is very important (placement of margin in noncontact areas)
- shade selection is more difficult.
- preparation is similar to Class III except that the preparation for class IV is extended to the incisal angles

For fracture: If no caries or pulpal involvement a bevel is the only preparation necessary 1.0-2 mm enamel bevel should be placed around the periphery of the cavity

Use of Pins:

* Retentive pins are not needed because the adhesive technique provides sufficient retention for the restoration

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Class V Tooth Preparation

Modified Class V

- indicated for small and moderate lesion and lesion entirely in the enamel
- no retention grooves
- lesion is scooped out
- preparation has divergent wall
- axial wall does not have uniform depth
- prepare tooth with round or elliptical instrument
- preparation is extended initially no deeper than 0.2 mm
- no effort is made to prepare a 90 degree cavosurface margins.
- infected enamel is removed with a round bur or excavator.

