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**CLINICAL STEPS IN CAVITY  
PREPARATION II**

OR

▪ THE OPERATIVE TRILOGY

EPISODE 1



## Objectives

- Cavity preparation for
  - ❖ amalgam
  - ❖ composite
  - ❖ Glass ionomer
- New methods for cavity preparation



## AmaIgam

- The **Convenience** form

To gain access but to conserve tooth structure



## The outline form

- What to consider:
  - All caries visible
  - Fissure management



## Caries removal

- Areas to remove
  - Infected area
  - Decalcified load bearing areas
  - Decalcified cavo-surface margins

## Resistance and retention forms

- ❑ Enough tooth structure to retain amalgam.
- ❑ adding retentive features.
- ❑ Amalgam bonding



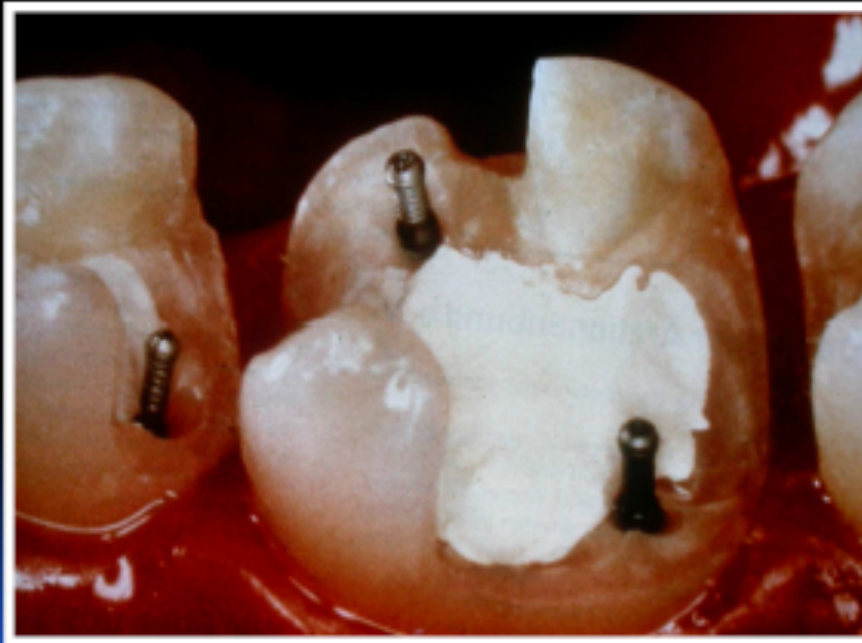
- ❖ Adequate bulk of tooth structure.
- ❖ Adequate bulk of amalgam.
- ❖ Reduce or redirect force (Complex amalgam restorations)



**Any suggestions?**



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## Finishing and surface conditioning

- Finishing burs
- Slow speed HP
- Application of antimicrobial
- Desensitizers

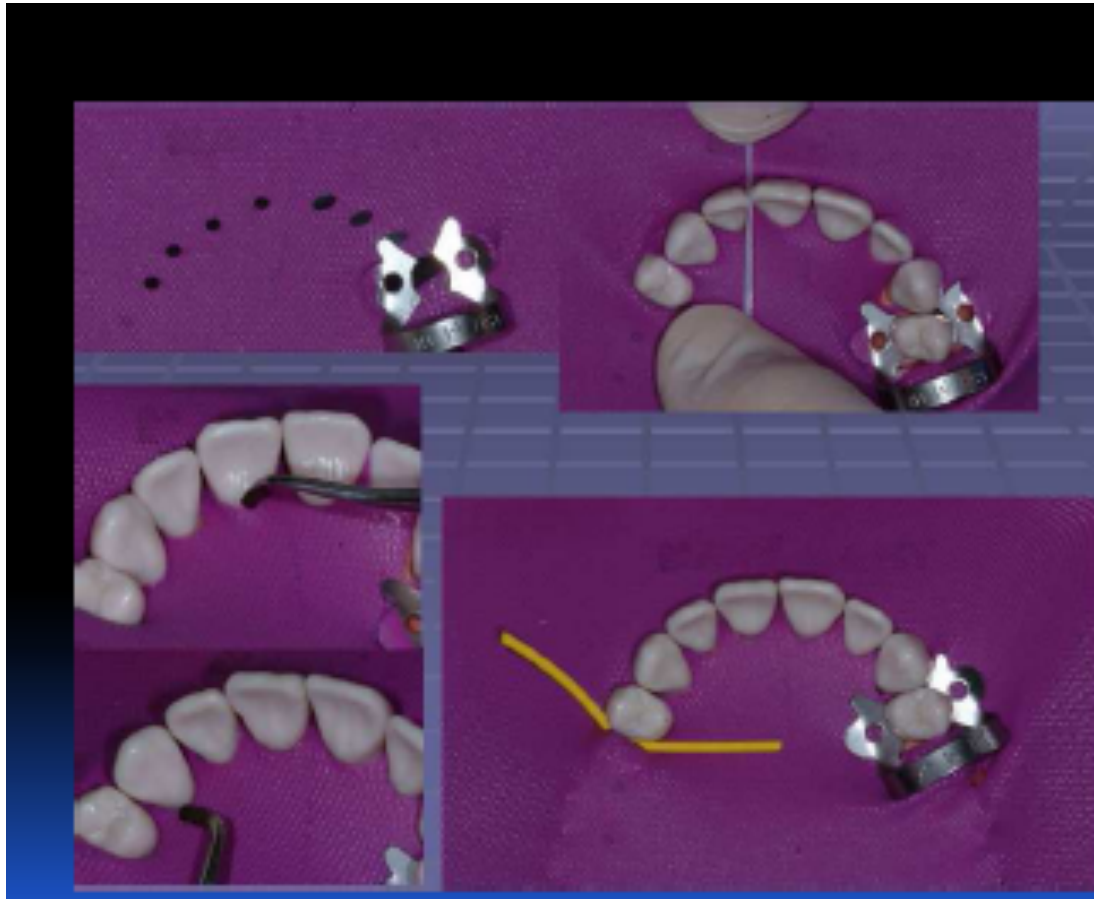
## Composite restorations

- Rubber dam placement

## Armamentaria







## Composite cavity preparation

- Convenience form:  
Lingual access for the proximal lesions in anterior teeth







- Outline form
- Retention and resistance form?

## GIC fillings

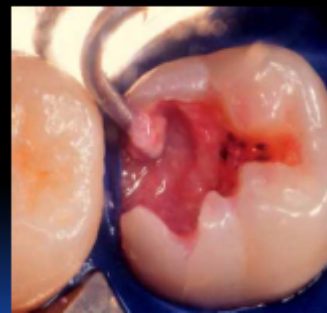
- Any difference from composite?

## New methods for cavity preparation

- Chemo mechanical
- Air abrasion.
- LASER

## Chemo mechanical

- Carisolv



## Air abrasion



**LASER**



Thank you

