



CELEBRACE

BONDING CHECKLIST

1. Isolation

- Use NOLA for optimal isolation.

2. Cleaning

- Use prophy cup or brush with non-fluoridated pumice to remove all plaque.
- Avoid gingival bleeding, especially if gums are inflamed, since this may compromise bonding.
- Rinse thoroughly with water/air syringe and dry.
- This step can be skipped if oral hygiene is perfect and there is no dental plaque on the teeth.

3. Microetching (mechanical roughening)

- Use 50-micron aluminum oxide to sandblast and roughen enamel surfaces. The roughening is proven to
- make the bonding stronger.
- Hold high-speed suction close to the microetcher nozzle to minimize dust on the patient's face.
- Rinse thoroughly to remove all aluminum oxide particles.

4. Etching (chemical roughening)

- Apply 35–37% phosphoric acid with etch tips or brushes.
- Remove the bulk of the acid with high speed suction to prevent the sour taste in the mouth.
- Rinse and dry thoroughly.
- Verify a chalky/frosted enamel surface; if not visible, re-etch.

5. Bonding Agent

- Apply bonding resin (preferred: Assure Plus) with microbrushes. Assure Plus is resistant to moisture to some extent.
- Use gentle air to create a thin, uniform layer—this improves bond strength.
- Light cure to prevent bonding tray adhesion to the tooth.

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6. Composite

- Apply adhesive paste (preferred: Transbond XT) to bracket bases inside the trays.
- Butter composite into bracket grooves for stronger retention, maintaining a uniform composite layer across the bases.
- Composite can be placed in advance or during tooth preparation by another person. If applied in advance, store trays in a dark box to prevent premature curing (otherwise the composite will set and bonding will fail).

7. Curing

- Use bonding trays (3 per arch by default: 2 posterior + 1 anterior, unless otherwise specified by the doctor in the instructions).
- Recommended sequence:
 - a. Start with upper arch (NOLA suction keeps the lower arch drier).
 - b. Position posterior tray (one side), cure, remove.
 - c. Position posterior tray (opposite side), cure, remove.
 - d. Position anterior tray, cure, remove.
 - e. Repeat sequence for lower arch.

8. Occlusal Collision Check

- If brackets interfere with occlusion:
 - Use anterior bite block (preferred for deep bite tendency).
 - Use posterior bite block (preferred for open bite tendency).
- Anterior bite blocks can be prefabricated metal or built up with Band-Lok. Posterior bite blocks need to be built up with a material like Band-Lok.

9. Cleanup

- Use a scaler or a high speed handpiece to remove excess composite/flash. "Excess composite" indicates too much composite placed at the bracket base.
- Use floss for interproximal cleanup to make sure the bonding material is not cured in the contacts.

10. Post-Bonding

- Place initial archwire.
- Secure with ligation materials (ties or chains as indicated).
- Provide the patient with care instructions: appliance care, oral hygiene, and food restrictions.

PREFERRED MATERIALS



NOLA Dry Field System - Isolation



Edge-Ease - Cushion Device



Light Protector Box - Curing Protection



Bite Block - Prevents biting on lower brackets



Aluminum Oxide 50 μ m - Abrasive Powder



Microetcher IIa - Microetching



3M Transbond Plus - Bracket adhesive



Assure Plus - Bonding Resin



Pumice (Fluoride-Free) - Cleaning



Composite Filling Instrument #4 - Restorative Paddle Tool

