

Advancing Dentistry

THROUGH INNOVATIVE AWARD
WINNING PRODUCTS

DIAGNOSTIC PRODUCTS

*Advanced Diagnostics and
Better Composite Handling*

MADE IN THE USA

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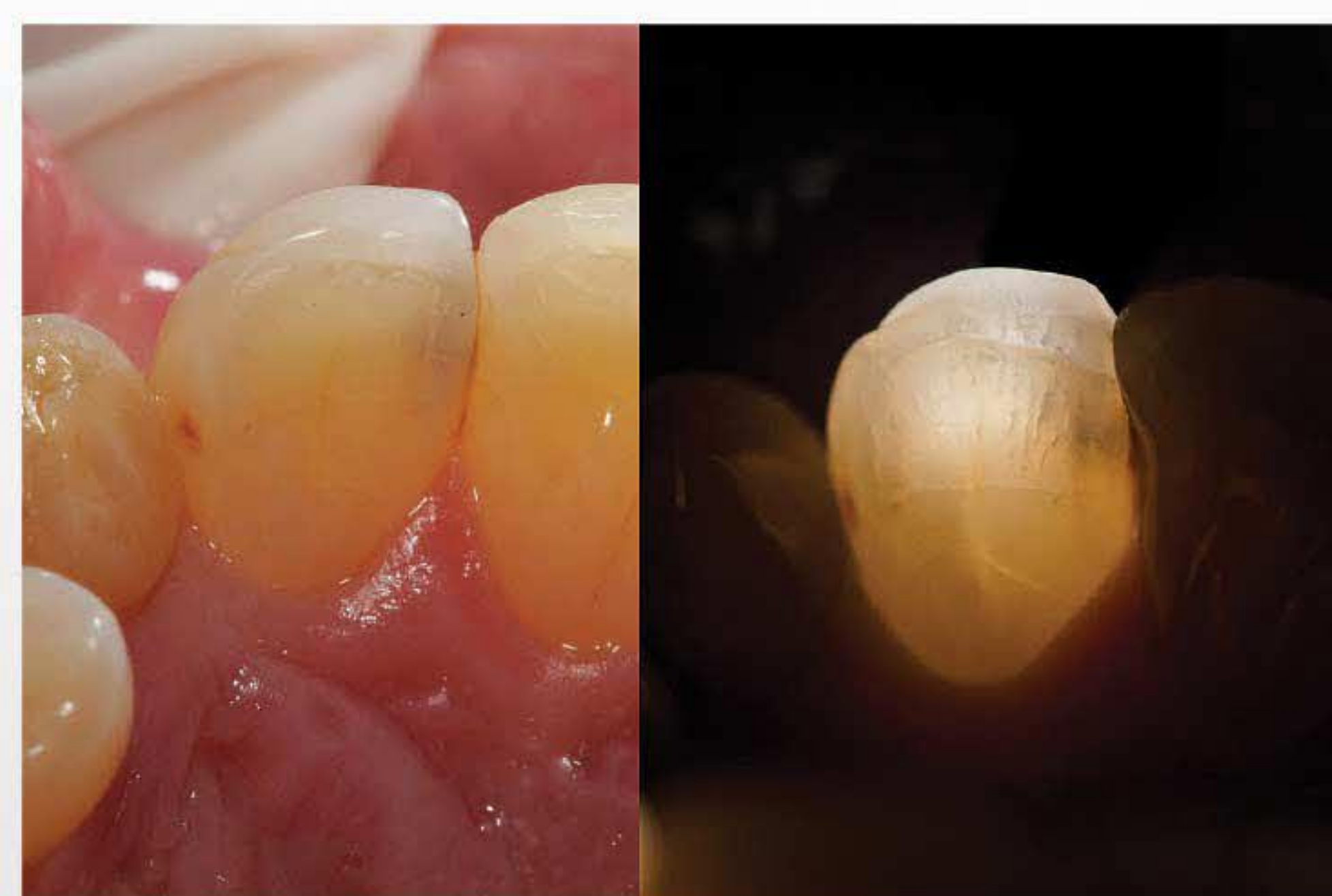
MICROLUX™



MICROLUX TRANSILLUMINATOR DESCRIPTION:

The Microlux Transilluminator is used for detecting Anterior and Posterior Caries. It also helps to visualize crown fractures, root canal orifice, and root fractures. Microlux applications include an accessory for Proximal Caries detection, and Oral Cancer Screening.

The unit comes with either a 2 or 3mm light guide. The light guides are autoclaveable, but protective sleeves are also available. The unit is powered by 2 "AAA" style batteries.



Photos courtesy of Mark L. Pitel, DMD



P/N 110019 w/3mm
P/N 110026 w/2mm

FEATURES

- Autoclavable light guide, available in 2mm and 3mm
- High output L.E.D
- Battery operated
- Portable and easy to use
- Protective sleeves available

BENEFITS

- Helps to visualize remaining composite removal
- Helps to visualize crown fractures and root canal orifice

ATTACHMENTS AVAILABLE FOR THE MICROLUX/MICROLUX 2:



3mm
P/N 630003

2mm
P/N 600045

Pedo
P/N 110066

Lighted Mirror
P/N 640056

Endo Light
P/N 640035

Perio Probe
P/N 640041

Proximal Caries
P/N 640072

MICROLUX 2™

DIAGNOSTIC SYSTEM

MICROLUX 2 TRANSILLUMINATOR DESCRIPTION:
The ergonomic high intensity Microlux 2 Transilluminator has added features. An easy to use push button controls the dual intensity operation and provides for better visualization. The battery has a low level indicator, and a voltage regulator for constant light output. It uses 2 AAA batteries. The Microlux 2 comes with either a 2 or 3mm light guide. The ergonomic design provides an anti-roll feature.



Photos courtesy of Howard E. Strassler, DMD



P/N 110080-3 w/3mm
P/N 110080-2 w/2mm

FEATURES

- Slim ergonomic design
- High & low output levels
- Conveniently located control button
- Battery voltage regulator
- Battery low level indicator
- Accepts all existing Microlux attachments
- Auto turn off after 7 minutes

BENEFITS

- Easy handling
- Better visualization (high setting), better photos (low setting)
- Easy one finger operation
- Constant light output
- Advanced notification to change the battery
- Multiple applications with one device
- Extends battery life

“Every practice should have the Microlux 2 as part of their diagnosis protocol. It is a great adjunct to radiographs or as a stand-alone option to evaluate suspect areas. Thanks to AdDent for providing such a useful and practical diagnostic tool.”

Dr. Douglas Lambert, Edina MO

“One of the most valuable tools in the office—we use it all the time, especially for finding fractures and often anterior caries can be shown to the patient.”

Dr. Paul Feuerstein, Chelmsford, MA

NEW IMPROVED

BIO/SCREEN[®]



Demonstration video
available on our website:
www.addent.com

P/N 110090

BIO/SCREEN DESCRIPTION:

The Bio/Screen Oral Exam Light is a device intended for use as an adjunct to traditional oral examination to enhance the visualization of oral mucosal abnormalities.

The Bio/Screen uses 5 powerful violet LEDs that show biofluorescence in the oral cavity without turning off the room lights. It is powered by an internal rechargeable lithium ion battery. An on/off push button is located on the viewing side. A battery charge indicator is located on the viewing side of the handle. Reimbursement via (CDT code D0431, BC fee code 04403).



BIO/SCREEN FEATURES:

- The Bio/Screen has a special optical filter to improve contrast between healthy and abnormal tissue and to improve visualization. It does not require a special rinse.
- Bio/Screen battery – The lithium ion battery pack is rated for 500 full recharge cycles, approximately 5 years of use. The battery pack is protected by means of a built-in safety circuit.
- Improved thermal design has no fan for quiet operation.
- Light output regulation – the Bio/Screen output LEDs maintain full power until battery is depleted.
- Auto shut off – To conserve battery power, once activated and after five minutes of continuous on time, the LEDs will automatically turn off and the unit will return to standby mode.



Top: Mild Dysplasia Clinical
Bottom: Mild Dysplasia with
Bio/screen

* Product testimonials on the back

ORABLU[™]

ORABLU DESCRIPTION:

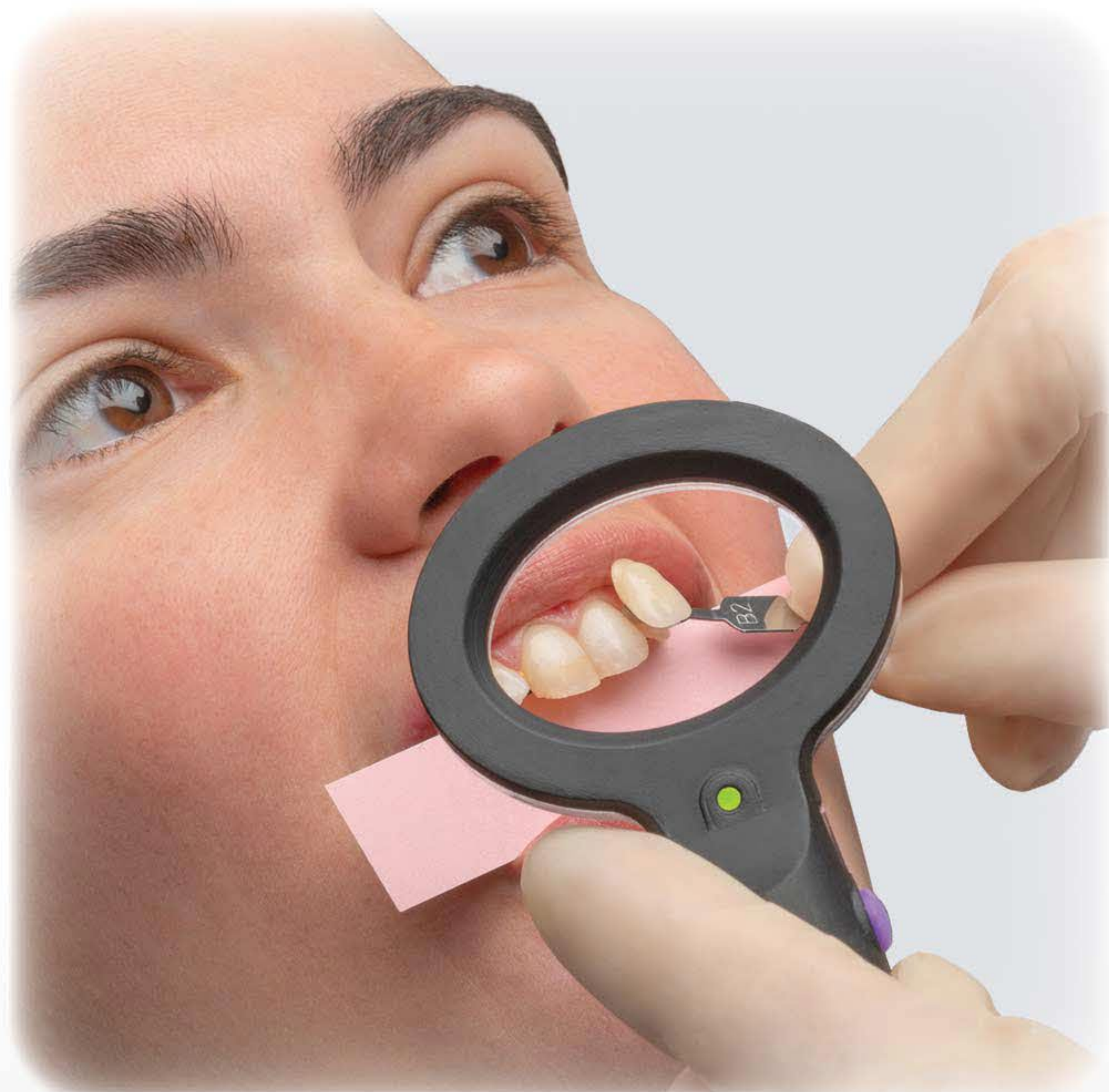
The ORABLU Oral Lesion Marking System is a three component swab system intended to be used by a dentist or physician as an adjunct to traditional oral examination by incandescent light. The ORABLU is used as an aid to enhance the visualization of oral mucosal irregularities by physically marking areas of oral mucosa that may warrant further investigation. The OraBlu kit contains enough materials for approximately 10 applications. Commonly known as Toluidine Blue, the stain can accelerate the decision to biopsy, and save lives with a timely diagnosis.



P/N 112001

FEATURES

- One bottle of ORABLU dye (0.5% Tolonium Chloride)
- One bottle of Pre & Post Dye Solution (1.0% Acetic Acid)
- 30 individually packaged applicator swabs



P/N 140001

Rite-lite PRO™

MULTISPECTRAL/HI CRI SHADE LIGHT

RITE-LITE PRO: PERFECTING SHADE SELECTION

- Tri-Spectra HI CRI LEDs (5500°k, 3200°k, 3900°k)
- Three intensity levels for better visualization
- Blacklight setting for matching composite & porcelain to natural dentition fluorescence
- Larger viewing area
- Rechargeable Li-Ion battery
- Available Polarizing Filter eliminates reflection

Rite-Lite PRO offers three different light spectra to simulate varying lighting conditions:
(Photos courtesy of Lorin F. Berland, DDS)

DAYLIGHT - for initial shade taking. Daylight that is seen in an outdoor environment on a cloudy bright day is an industry standard color temperature of 5500°Kelvin.



ROOM LIGHT - for verification of shade taking. Warm, incandescent light that is found in many indoor environments. Approximately 3200°Kelvin.



AMBIENT LIGHT - for verification of shade taking. Mixed lighting conditions of daylight and room light that exist in many indoor environments. Approximately 3900°Kelvin.



RESTORATION VIEWED WITH BLACK LIGHT:

Research shows that natural teeth fluoresce at wavelengths below 400 nm, i.e.- black light. Wavelengths below 400 nm are part of the spectrum of various indoor and outdoor lighting environments. Therefore, if we are to get a perfect shade match for porcelain or composite materials, they should fluoresce in the same manner as natural teeth. The cell phone photos show the effect of this mismatch when viewed with the Rite-Lite PRO.



Clinical



Black Light

“Great product. I have used it to verify my own shade selections.
Every single shade selection I chose was verified.”
 - Steven Balloch, DDS, Glastonbury, CT

“**We love this light.** We haven’t been off on one shade since we started using this light.”
 - Dennis Lempke, Lempke Dental Laboratories, Maplewood, MN

ADDENT DIAGNOSTIC PRODUCTS REFERENCES:

SCAN CODES TO DOWNLOAD REFERENCES ONLINE



MICROLUX/MICROLUX 2 RESEARCH REFERENCES

An in vitro Comparison of the Ability of Fibre-Optic Transillumination, Visual Inspection and Radiographs to

Detect Occlusal Caries and Evaluate Lesion Depth – D.F. Cortes

Dental Economics, Pearls for your Practice – Joshua Austin, DDS, FAGD

Identification of Resected Root-End Dentinal Cracks

Incomplete cusp fractures: Early diagnosis and communication with patients using fiber-optic transillumination and intraoral photography – Samer S. Alassaad, DDS

The Use of Fibre-Optic Transillumination in General Dental Practice – G.M. Davies

Transillumination of the Oral Cavity – Dr. J. Friedman & Dr. M. Marcus 1970



RITE-LITE RESEARCH REFERENCES

Increased Predictability in Tooth Shade-Matching – Kelvin I. Afrashtehfar, DDS

Influence of Light Source, Polarization, Education and Training on Shade Matching Quality – Jacqueline A. Clary, DMD, MSD, Joe C. Ontiveros, DDS, MS, Stanley G. Cron, MSPH, and Rade D. Paravina, DDS, MS, PhD

Light-Correcting Device for Increased Predictability Tooth Shade-Matching – Dr. George Freedman and Dr. Kelvin I. Afrashtehfar

Optimizing Your Shade-Matching Success – Mark L. Pitel, DMD

Performance Assessment of Hand Rite-Lite – Joe C. Ontiveros

Shade-Matching Challenge: A Single Central Incisor – Lorin Berland, DDS and Sami Yared, CDT



BIO/SCREEN RESEARCH REFERENCES

Advances in Optical Adjunctive Aids for Visualisation and Detection of Oral Malignant and Potentially Malignant

Lesions – Nirav Bhatia, Yastira Lalla, An N. Vu, and Camile S. Farah

Dental Economics, Pearls for your Practice – Joshua Austin, DDS, FAGD

Fluorescence Visualization Detection of Field Alterations in Tumor Margins of Oral Cancer Patients – Catherine F. Poh, et al

Fluorescence Visualization Guided Surgery – Catherine F. Poh, DDS, PhD; Donald W. Anderson, MD; J. Scott Durham, MD; Jiahua Chen, PhD; Kenneth W. Berean, MD; Calum E. MacAulay, PhD; Miriam P. Rosin, PhD

Narrow band (light) imaging of oral mucosa in routine dental patients. Part I: Assessment of value in detection of mucosal changes – Edmond L. Truelove, DDS, MSD, et al

Objective Detection and Delineation of Oral Neoplasia Using Autofluorescence Imaging – Darren Roblyer, et al

Optimal fluorescence excitation wavelengths for detection of squamous intra-epithelial neoplasia: results from an animal model – Lezlee Coghlan, et al



ORABLU RESEARCH REFERENCES

A reason for the use of toluidine blue staining in the presurgical management of patients with oral squamous cell carcinomas – Missman M, Jank S, Laimer K, Gassner R

In vivo toluidine blue staining for the detection of oral cancer and precancer – Wong PN

The adjunctive role of toluidine blue in detection of oral premalignant and malignant lesions – Epstein JB, Guneri P

The use of toluidine blue in the detection of premalignant and malignant oral lesions – Cancela-Rodrigues P, Cerero-Lipiedra

The utility of toluidine blue rinse in the diagnosis of recurrent or second primary cancers in patients with prior upper aerodigestive tract cancer – Epstein JB, Feldman R, Dolor RJ, Porter SR

Toluidine (toluidine blue) rinse – a screening method for recognition of squamous carcinoma. Continuing study of oral cancer IV – Mashberg A

Toluidine blue staining identifies high-risk primary oral premalignant lesions with poor outcome – Zhang L, Williams M, Poh CF

“The Bio/Screen Oral Cancer Screening Instrument does not require a patient to rinse with a messy liquid. Simply look through an optical filter in the middle of 5 high power LEDs. Although the light is bright, it does not generate enough heat to require a fan. Consequently, **the rechargeable Bio/Screen is quiet, lightweight, and easy to use.** All Dentists must become experts in oral cancer screening and the AdDent Bio/Screen can help.”

– Ben F. Warner, MS, DDS, MD, Houston, TX

“Clinical identification and evaluation of oral lesions is important in patient care. The AdDent unit is compact, easy to use, and images are easy to capture, allowing easy follow up of oral lesions.”

– Joel B. Epstein, DMD, MSD, FRCD, FDS RCSE, Beverly Hills, CA



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