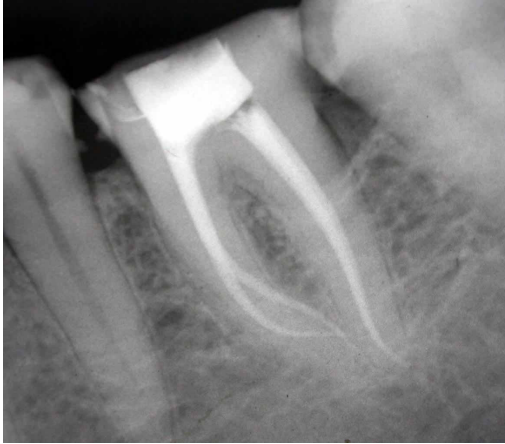


I could cook up a complicated sequence but the truth is I prefer to keep things as simple as possible.

Protapers are the only rotary system I use. I think they are fabulous instruments.

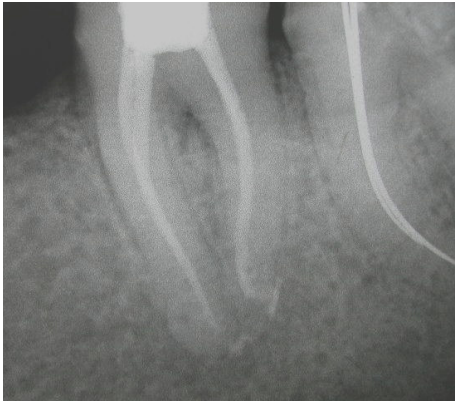
I can tackle most cases using Protapers and ISO tapered hand files.

Cases with mild to Moderate curvature:



1. Initial negotiation with size 10 files till resistance
2. # 15 files till resistance
3. Protaper S1 2mm short of where the size 15 file goes
4. Coronal flare with Gates #3, #4.
5. Repeat sequence till length and Patency is achieved.
6. Achieve length and Patency (1mm beyond apex) with #10 and #15 file.
7. Once Patency is achieved to #15 file, finish with protapers S1 S2 and F1, F2 to length. (Check for patency after each file).
8. Large canals can be finished to an f3 or #35, #40 or larger 02 tapered hand files.

Cases with severe curvature:



Steps 1 to 4 as above

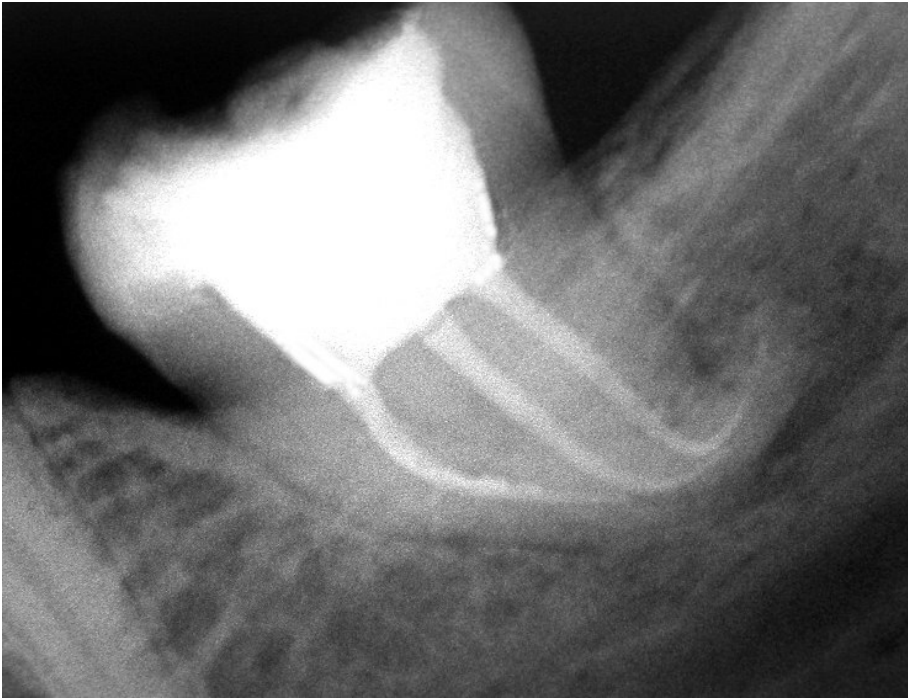
5. Negotiate curvature with precurved #10, #15, #20 ISO stainless steel files.
6. Ensure patency with #15 file 1mm beyond apex.
7. Finish with Hand protaper F1.
8. If extreme resistance is felt with Protapers, finish with #20 or #25 .02 tapered Hand Ni-ti files.
9. I do not like to enlarge more than #20 apically for cases with severe curvatures.
10. I do not like using rotary files with 02 taper because I feel I can achieve the same result with minimal risk using an 02 tapered hand instrument.

The importance of having extra length (I call it lead length):

When treating canals with curvature, I like to have what I call a lead length of about 2mm till I achieve patency with a #15 file.

For example if my #15 file goes in initially till about 15mm my rotary Ni-ti or any larger file would be used only till 13mm. This 2mm difference is maintained till I can get a #15 file 1mm past the apex. Once patency is achieved with a #15 file, there is very little chance of ledging these curved canals. I have also found that it reduces the risk of fracturing instruments.

Case below (one I did 4 years ago) shows the distal canal ledged because of not having a lead length.



(I hope this point is clear, if it isn't, let me know I'll try and explain again.)