





Glide Path Technique

- 1. Locate the canal orifices using straight-line access with an endo explorer and obtain patency with a #10 K-file.
- 2. Establish working length with the #10 K-file, an apex locator, or a radiograph as needed.
- Establish the glide path. Start with the Traverse Orifice Opener .25/.08/17mm, then the Traverse Rotary Glide Path File.
 - In small canals, start with a .13/.06
 - In larger canals, start with .18/.06
- We recommend using a lubricant during instrumentation and irrigation with NaOCI in between instruments.

Shaping Technique

(ZenFlex and Traverse instruments can be used in Rotary or Adaptive Motion)

- 1. If using rotary motion, use the recommended torque and speed settings according to Table 1.
- Select between a .04 or a.06 taper. Instrument the canal using a ZenFlex 25 size file. If needed and depending on the canal anatomy, you may need to continue shaping the canal with a 30, 35, 40, 45 size file until the desired shape is achieved.
- 3. Irrigate with NaOCI and then reconfirm patency with a #10 K-File.
- 4. Irrigate the canal with NaOCI to clean and EDTA to open the dentinal tubules.
- 5. Additional Clinical Tips:
 - Use of a rubber dam is strongly recommended when using these instruments for root canal procedures to avoid accidental aspiration or ingestion.
 - Use light pressure and avoid force. When the instrument no longer advances apically, proceed to a smaller file. Never apply apical pressure on the rotary file.
 - In canals with severe or sudden apical curvature, (30 degrees or higher) additional caution should be exercised when negotiating these canals.

Table 1°

Recommended Torque and Speed Settings for Traverse'' and ZenFlex'' in Rotary Motion.

File Type	Speed (RPM)	Torque (g-cm)	Torque (N-cm)
Traverse Orifice Opener	500	350	3.43
Traverse Glide Path	500	150	1.47
ZenFlex 04 taper, 20 & 25 tip	500	100	1.00
ZenFlex 04 taper, 30, 35, 40, 45, 50 & 55 tip	500	300	2.94
ZenFlex 06 taper, 20 & 25 tip	500	200	1.96
ZenFlex 06 taper, 30, 35, 40, 45, 50 & 55 tip	500	350	3.43
*This speed and torgue only applies to retary motion			

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NOTE: Techniques suggested are guidelines for the average case. It is imperative that clinical judgment always be exercised, appropriate setting adjustments are made, and additional care is taken to prevent any adverse events. All measures implemented should be based on individual case requirements.



