



# Best practices for using Rayplicker Handy



- ✓ Grey edges parallel to screen edges
- ✓ Mouth opened and breathing through the nose
- ✓ Saliva limitation
- ✓ Centering the tooth, without angle nor inclination
- ✓ Tip under the lip
- ✓ Tip in contact with adjacent teeth
- ✓ Tip in contact with the gengiva

## Incorrect practices





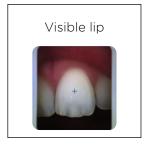
















Scan me to watch the best practices video tutorial.



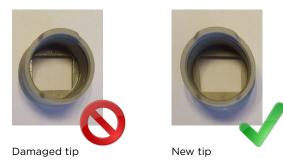
#### The Rayplicker Handy device:

To clean the Rayplicker Handy, it is recommended to use cleaning and disinfection wipes for medical devices. Type FD 350 from Durr Dental.

### **Calibration tips:**

The calibration tips (Clipped onto the measuring head) are delivered by batches of 6. These must be decontaminated / disinfected and sterilized before use.

- For decontamination / disinfection, it is recommended to use wipes type FD 350 from Durr Dental (contains alcohol) on the interior and exterior parts of the calibration tip or any equivalent product. Attention, take care to respect the manufacturer's specifications: for wipe type products: type of rinse, type of drying, drying time, ... for soaking bath type products: dilution, soaking time, rinsing type, drying type, drying time, renewal, ...
- For sterilization: autoclave at 134 ° C for 20 min (Prion Cycle). Life checked for 100 cycles.
  - If the manufacturer's specifications for the use of the decontamination product before autoclaving are not respected, degradation of the calibration tip may be noted. It is then necessary to change it.
- The sterilizable tip has a life-time validated for 100 autoclave sterilization cycles. Beyond this recommended sterilization quota, the calibration tip may be damaged and discoloration of the gray pattern may occur. It is then necessary to change the tip.



#### **Brightness:**

If the positioning of the tip is too far from the reference tooth, it no longer serves as a dark room and external light interferes in the taking of color.

In the case of the use of the Rayplicker Handy with a retractor, it is preconnised to make the decision in hue in a low light environment.

The operating light or direct sunlight.

We recommend that the operating light be deflected from the patient's mouth or turned off, and that the patient should be turned to the window in case of significant sun exposure.