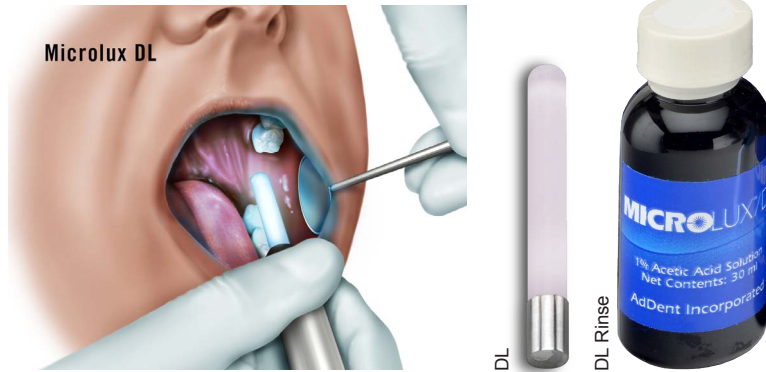


MICROLUX DL LIGHT GUIDE

Oral Cancer Screening



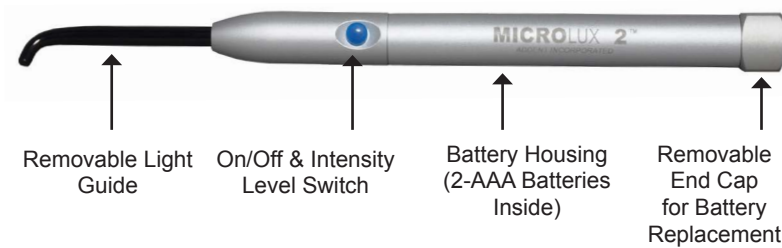
Oral Cancer Screening: For oral Cancer screening, have the patient rinse with 1% acetic acid and place the Microlux DL tip in mouth. Any acetowhite or leukoplakia lesions become more visible. **Shown above: DL Light Guide. P/N: 600053. DL Rinse P/N: 110030.**

SPECIFICATIONS:

Electrical Equipment	Class: 1
Operating Input voltage:	3 volts
Battery:	2 – 1.5V AAA Alkaline Batteries
Light Source:	Hi intensity light emitting diode
Color Temperature:	Approximately 6800° Kelvin
High Intensity Mode:	5000 Lux (465 ft-c) minimum using 2 mm or 3 mm light guide
Low Intensity Mode:	1500 Lux (140 ft-c) minimum using 2 mm or 3 mm light guide
Battery Performance:	Battery life in High Intensity mode, 5 Hrs. continuous use. Battery life in Low Intensity mode, 15 Hrs. continuous use.
Overall Unit Dimensions	
Length:	6.1 in (155 mm)
Diameter:	0.57 in (14.6 mm)
Weight	2.4 oz (68 grams) with light guide

REPLACEMENT PARTS / ACCESSORIES:

- P/N 600045 Micro Tip 2mm Light Guide
- P/N 630003 3mm Light Guide
- P/N 110066 Pedo Light Guide, 2mm
- P/N 640056 Lighted Mirror Attachment (Package of 5)
- P/N 640072 Proximal Caries attachment with 5 fiber light guides
- P/N 640071 Proximal Caries refill kit with 45 fibers
- P/N 600053 Microlux DL Light Guide
- P/N 630002 Alkaline AAA 1.5v battery (Package of 2)
- P/N 640035 Endo-Lite with 5 Fiber Light Guides
- P/N 640039 Endo-Lite Refill Kit (Qty 45)
- P/N 640041 Perio Kit with 5 Fiber Light Guides
- P/N 640042 Perio Guide Refill Kit (Qty 45)
- P/N 110066 PEDO 2mm Light Guide
- P/N 600027 Box of 250 Protective Sleeves
- P/N 110030 DL Rinse (Pack of six)



- PN 110080 Microlux 2 Transilluminator Handpiece Only
- PN 110080-2 Microlux 2 Transilluminator with 2mm Light Guide
- PN 110080-3 Microlux 2 Transilluminator with 3mm Light Guide
- PN 110080-DL Microlux 2 Transilluminator with DL Light Guide

MANUFACTURER

AdDent, Inc.
 43 Miry Brook Road, Danbury CT 06810
 Phone: 203-778-0200
 Fax: 203-792-2275
 Email: info@addent.com
 Website: www.addent.com



ISO CERTIFIED



ADDENT, INC. 43 MIRY BROOK ROAD, DANBURY CT 06810
 PHONE: 203-778-0200 | FAX: 203-792-2275
 EMAIL: INFO@ADDENT.COM | WEBSITE: WWW.ADDENT.COM

MICROLUX 2™

ADDENT INCORPORATED

MICROLUX 2 DIAGNOSTIC SYSTEM INSTRUCTIONS FOR USE



MICROLUX 2 TRANSILLUMINATOR

Items included in box: Microlux 2 unit, Light guide, 2 AAA batteries, sample protective sleeve and this instruction manual.



Not Sterile. Refer to cleaning and disinfecting section.

Warranty registration at www.addent.com

OPERATION AND FIRST TIME USE



Batteries: When replacing batteries, it is important that they be placed in proper polarity. Unscrew the End Cap and insert two AAA batteries with the positive (+) terminal in the front towards the LED. Replace the End Cap. If the Microlux 2 is not going to be used for more than 30 days, it is recommended that the batteries be removed. In order to save battery life and to avoid leakage you may disconnect the battery by rotating the end cap counter-clockwise by one full turn **until you see the red O-ring.**



Fiber Optic Light Guide: The focused image grade light guide is fragile – handle with care. Insert the glass light guide into the front end aluminum chuck, with firm pressure. The stainless steel ferrule at the end of the light guide should be completely inside of the chuck. To remove, rotate slightly and pull on the light guide at the same time.

Note: The Microlux 2 accepts all original Microlux light guides.

Operation: Press the blue on/off button to turn the unit on. The LED turns on in 'High Intensity' mode. If the button is pressed a 2nd time the light output is reduced to approximately one-third, or 'Low Intensity' mode for better photos. When the button is pressed a 3rd time the unit turns off.

Low battery indicator: The LED will blink twice when unit is powered up and automatically switches to low intensity mode to conserve power.


Auto Turn Off: The Microlux 2 unit will automatically turn itself off after 7 minutes of use to conserve battery power.


Constant Light Output: Built in regulator circuit produces constant light output regardless of battery charge level.


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CLEANING AND DISINFECTING

Cleaning – Housing

 The aluminum housing can be wiped down with most any disinfectant. Do not spray disinfectant onto unit. Be especially careful not to get disinfectant into the front of the chuck assembly, since this could damage the LED contacts and reduce the light output.

 DO NOT AUTOCLAVE THE LED HANDPIECE. DOING SO WILL DAMAGE THE UNIT AND VOID YOUR WARRANTY.

 DO NOT AUTOCLAVE THE ENDO & PROXIMAL CARIES PROBE WITH THE FIBER INSERT IN PLACE. DOING SO WILL DAMAGE THE ATTACHMENTS.

Cleaning – Fiber Optic Light Guide

The light guide can be wiped with disinfectant, cold sterilized or autoclaved. Autoclave at 270°F (134°C) for 15 min, or at 250°F (121°C) for 30 min.

It is not recommended the light guides be chemclaved.

APPLICATIONS FOR DIFFERENT SPECIALTIES

1. General Dentistry

- Assists in detection of caries. This technique is especially helpful for location of caries which may be blocked on x-ray due to existing fillings.
- Locates supra and sub gingival calculus.
- When composite removal is required, locates residual composite material which appears darker than surrounding tooth structure.

2. Prosthodontics

- Location of the dentino-enamel junction in crown preparations.
- Location of fractures in teeth and porcelain jackets.

3. Endodontics

- Location of the root canal orifice.
- Detection of broken instruments in the root canal.
- Location of root fractures.

4. Periodontics and Dental Hygiene

- Useful as an auxiliary light source during periodontal surgical procedures.
- Assists in detection of sub gingival calculus.
- Helps demonstrate decay and calculus directly in the patient's mouth and is a valuable aid in patient motivation.
- Oral hygiene instruction and routine screening procedures by the hygienist or assistant.

5. Oral Surgery

- Aids in detection of soft tissue lesions when used with DL Light guide and Acetic Acid Rinse-covered in our Microlux/DL sales literature.
- Location of bone chips and fractured root tips.
- Generally useful as high intensity auxiliary light.

6. Orthodontics

- Location of proximal caries when teeth are banded.

7. Pedodontics

- Diagnosis of crown fractures in traumatic injuries.

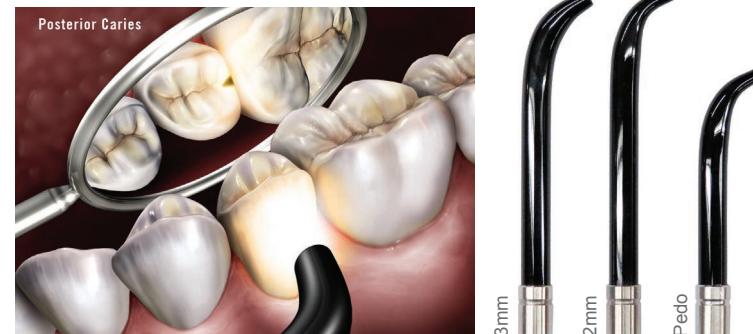
MICROLUX TRANSILLUMINATION TECHNIQUE GUIDE

For best results, all transillumination procedures should be performed with the room lights dimmed or turned off.

CARIES, CRACKS, CALCULUS

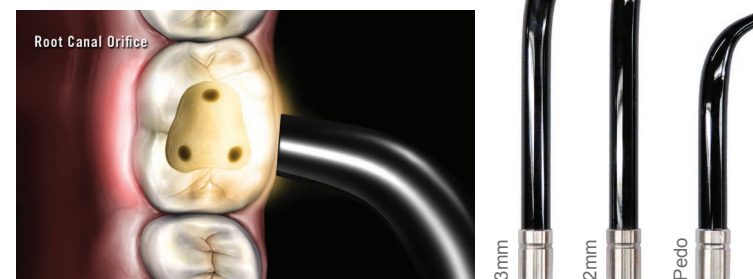


Anterior Caries: Anterior caries can be visualized by placing the probe on the labio-cervical region of the tooth and examine from the lingual. **Shown above:** 3mm P/N 630003, 2mm P/N 600045, Pedro P/N 110066.



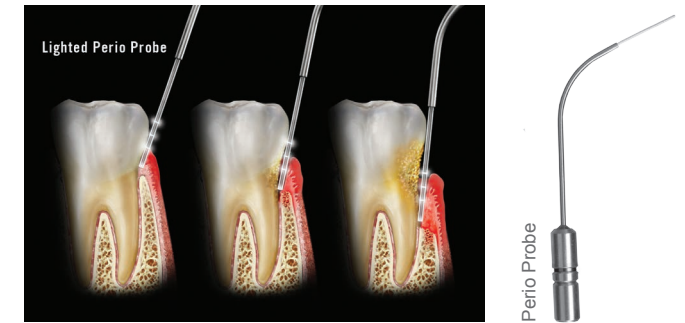
Posterior Caries: To visualize posterior proximal decay, place the probe on the cervical area of the tooth. Caries appear as a dark shadow on the occlusal surface. **Shown above:** 3mm P/N 630003, 2mm P/N 600045, Pedro P/N 110066.

ROOT CANAL ORIFICE



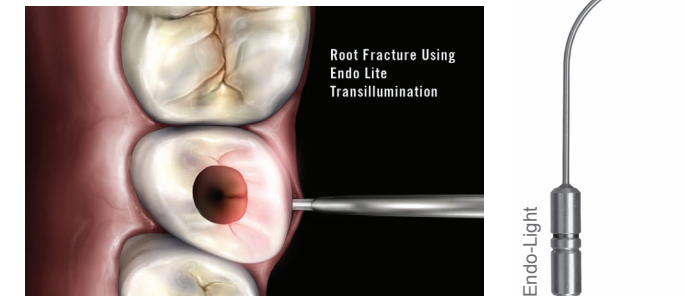
Root Canal Orifice: To help locate root canal orifice, place the light source on the buccal or lingual cervical region of the tooth. **Shown above:** 3mm P/N 630003, 2mm P/N 600045, Pedro P/N 110066.

MICROLUX PERIO PROBE



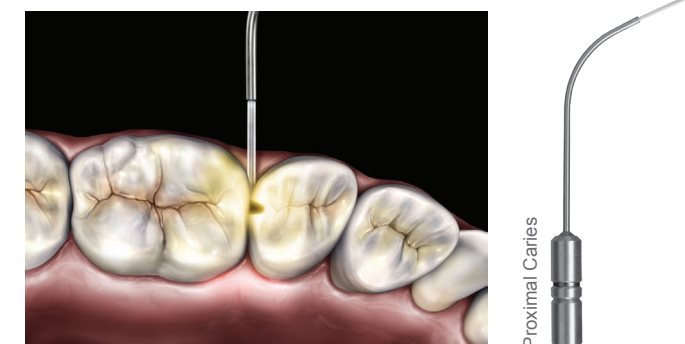
Periodontal Disease: To detect the depth of the periodontal pockets and gingival recession, use the lighted Perio Probe and insert the tip in the gingival sulcus. The depth indications are 3, 5, and 7mm. **Shown above:** Perio Probe P/N 640041.

MICROLUX ENDO-LITE



Root Fracture: Root fractures can often be detected by using the Endo Fiber tip. Place it either buccally or lingually in the gingival sulcus. A fracture line will appear dark via transillumination from the outside to the inside of the canal. **Shown above:** Endo-Light Guide P/N 640035.

MICROLUX PROXIMAL CARIES ATTACHMENT



Posterior Caries: Caries can be detected using the Proximal Caries fiber tip. Place the lighted fiber tip interproximally under the marginal ridge. View from the occlusal. This method often shows caries with high definition. **Shown above:** Proximal Caries P/N 640072.