Barricaid® Periodontal Surgical Dressing is available in syringe form for direct placement. The syringe is also suitable for an alternate indirect technique. Use of a visible light-curing unit is required for an acceptable dressing.

**Product Description**
Caulk Barricaid® Visible Light-Cure Periodontal Surgical Dressing is an advanced concept in the protection of periodontal surgical sites. This single-component, light-activated periodontal dressing eliminates time-consuming mixing of pastes. Furthermore, Caulk Barricaid® gives the clinician total control over the placement and setting of the periodontal packing material. Curing of the material can be accomplished with a visible light-curing unit to form a non-brittle, but firm, protective elastic covering. Incremental additions of the material, which bond adherently, can be made in the mouth without any special prior surface preparation. The dressing is tinted pink, is tasteless, and has a translucent character which allows for superior esthetics, as well as site monitoring.

**Step 1**
The Barricaid® syringe is designed for both Direct and Indirect Placement. If the syringe is used in direct intra-oral placement, the syringe must be discarded to avoid any potential patient cross-infection.

For **Direct Dispensing** - Using a sterile, dry 2 x 2 gauze, dry the buccal or lingual tooth surfaces adjacent to the surgical site. Remove the tip from the disposable syringe. Dispense the material at the juncture of the cervical one-third of the teeth and the margin of the surgical site.

For **Indirect Placement** - Using a sterile, dry 2 x 2 gauze, dry the buccal or lingual tooth surfaces adjacent to the surgical site. Place a thin layer of lubricant on a clean mixing pad. Dispense the desired amount onto the pad. If the application will be delayed more than 1 or 2 minutes, cover the dispensed dressing to prevent premature curing by extraneous light. With your gloved finger, lightly lubricated (sterile surgical jelly, such as K-Y Jelly, J&J), roll the ribbon of dressing off the pad. Place it on the cervical area to the teeth and the surgical site as per your normal placement technique.

**Step 2**
The material can be contoured and shaped in a variety of ways. The material may be muscle molded, contoured with a plastic instrument, carver, or finger pressure. Gloved fingers may be lubricated with patient’s saliva obtained from the buccal vestibule. Remove any uncured material that may have extended onto occlusal contact areas.

**Step 3**
Expose Barricaid® to a visible light-curing unit for at least 10 seconds per tooth per side (buccal or lingual). Move the light probe in a continuous motion over the surface of the dressing. Uncured material can be detected with an explorer or a blunt instrument. Repeat exposure, as needed, until the entire dressing is cured. (A segment of approximately four teeth requires 40 seconds per side, buccal or lingual).

**Step 4**
Repeat Steps 2 and 3 for the opposing side (buccal or lingual) of the surgical site.

**Step 5**
Check occlusion and coverage of material. The material may be curved and contoured with finishing burs in a low-speed hand-piece.

**Step 6**
Additional material may be added to cure dressing at any time during the placement appointment and incrementally cured for an additional 40 seconds.

**Step 7**
Check the dressing coverage and the occlusion prior to dismissing the patient.

**Hints**
1. Barricaid® can be handled and manipulated effectively, provided gloved fingers are moistened with water, a biocompatible lubricant (K-Y Jelly, J&J), or the patient’s saliva. Failure to lubricate gloved fingers in this manner will cause the material to stick to gloves, making application to the surgical site more difficult.

2. If direct access with the syringe to certain areas intra-orally is difficult, a sufficient amount of the material may be deposited
adjacent to that location and molded with finger pressure or a plastic instrument to extend to the desired location.

3. Barricaid® should be stored, at room temperature, protected from ambient light and, if possible, it should be stored away from products containing eugenol.

Cautions

1. Barricaid® contains polymerizable monomers which may cause skin sensitization (allergic contact dermatitis) in susceptible persons. If skin sensitization occurs, discontinue use. Do not use if a known allergy to methacrylate exists.

2. Eye protection should be worn while curing with a visible light unit.

“If Barricaid® is locked into deep interproximal undercuts, removal may involve separating the buccal and lingual halves of the dressing by cutting the interproximal bridges of the dressing with suture scissors. Similarly, Barricaid® can, on occasion, become incorporated into exposed sutures. Careful cutting of the suture will allow removal without pulling tissue excessively.”

Caution: U.S. Federal Law restricts this device to sale by or on the order of a dentist.