

# Tissue Goo™

## Hemostatic Gel



Unlike runny liquid hemostatic agents, **Tissue Goo™** is a gel that stays where you place it, offering exceptional hemostasis without compromising the health of the gingival tissue.

**Tissue Goo's** active ingredient is 25% aluminum sulfate, which will control bleeding throughout the cord placement and tissue management processes. Aluminum sulfate is much kinder to soft tissue than other hemostatic agents. During retraction cord placement, **Tissue Goo** acts as a lubricant. Place **Tissue Goo** in the sulcus, or saturate the Re-Cord™ retraction cord with **Tissue Goo**, then proceed by gently packing the Re-Cord knitted retraction cord into the sulcus. The hollow design of Re-Cord holds more hemostatic agent (**Tissue Goo**), and will compress when packed into the sulcus. Re-Cord will expand in the sulcus to provide ideal tissue displacement.

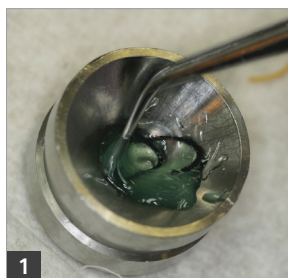
**Tissue Goo** is especially effective for veneer cementation, where minor bleeding often occurs. **Tissue Goo** stops bleeding without contaminating the marginal bonding surface or discoloring the soft tissue, a problem commonly experienced with ferric sulfate hemostatic agents. **Tissue Goo** will not interfere with the set of your impression material. **Tissue Goo** is gooseberry flavored and makes tissue management a more pleasant experience, unlike the caustic flavor of ferric sulphate materials.

The **Tissue Goo** Big Shot is a 60mL refill syringe designed to allow you to refill your **Tissue Goo** 3mL syringes in just seconds without mess.

## CLINICAL TECHNIQUE

*Dentistry and photography courtesy of Brad Carson, DDS.*

### Effective and Efficient Gingival Retraction using a Double Cord Technique



1

Tissue Goo™ may be placed directly into the sulcus to control bleeding, however, if Re-Cord is saturated with Tissue Goo, it acts as a lubricant as well, ensuring easier placement of the retraction cord.



2

Gently massage the cord into the bottom of the sulcus, making sure that the ends of the Re-Cord do not overlap but meet end to end.



3

This occlusal view shows that the first cord meets end to end, but neither the Re-Cord nor the margins are entirely visible, indicating that a double cord technique is indicated.



4

After saturating the second larger Re-Cord with Tissue Goo, it is placed over the first cord, to laterally displace the tissue. Only this cord is removed just prior to the impression.



5

Note that the entire cavo-surface of the preparation is visible indicating sufficient retraction to capture the margin. Prior to impressing and cord removal, the preparation is treated with Detail™ to cleanse and alter the surface tension for the most accurate, detailed impression.

#### TISSUE GOO 4-PACK (641904)

4 x 3mL syringes Tissue Goo, 50 x 20 gauge needle tips, instructions/SDS

#### TISSUE GOO BIG SHOT (641960)

1 x 60mL syringe Tissue Goo, 4 x 3mL empty refillable syringes, instructions/SDS

#### TISSUE GOO/DETAIL TRIAL PACK (642403)

2 x 3mL syringes Tissue Goo, 2 x 3mL syringes Detail, needle tips, instructions/SDS