



imagen®
DENTAL PARTNERS

The Imagen Way Curodont Protocol

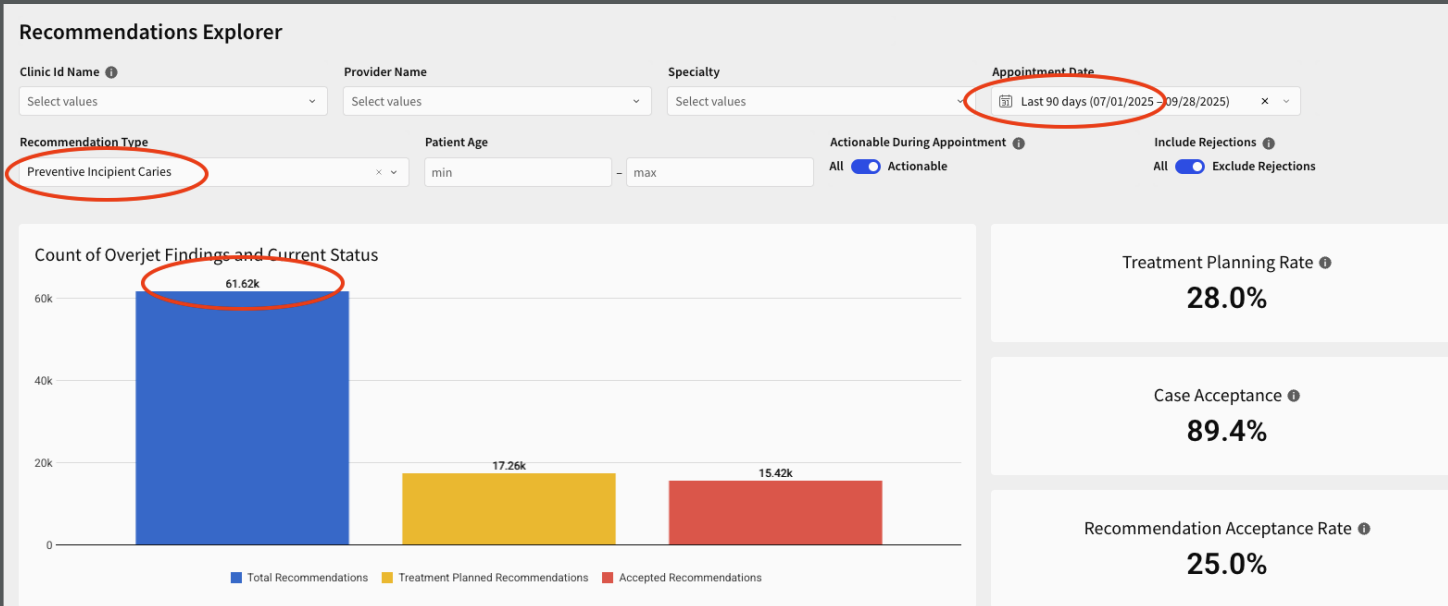
V VARDIS
SWITZERLAND

BIOMIMETIC DENTAL SCIENCE

Anticavity Therapy via Guided Enamel Remineralization with
Curodont™ Repair Fluoride Plus



Executive Summary - The “WHY”



As of the last 90 days in Imagen C Partners, there are **61,620** instances of incipient decay recognized by the AI software. There is an opportunity to treat these cases with Curodont to reverse decay instead of watching them.

No more **“Watch and Wait”** for caries that will potentially only get worse. Treat incipient lesions with Curodont and prevent larger issues

Treatment Options

Wait and Wait - \$0 Potential Damage to tooth

Treat with Curodont
-\$75-\$125/site

Wait for filling - \$300

Wait for crown- \$1000



Quick Links

Curodont Training Videos

- [How to Apply Curodont on Interproximal Surfaces](#) (3:09)
- [How to Apply Curodont on Occlusal Surfaces](#) (2:53)
- [How to Apply Curodont on Smooth Surfaces](#) (2:50)
- [In-Depth Curodont Training](#) (30 mins)

Forms

- [Curodont Billing Protocol](#)
- [Curodont Patient Consent Form](#)

Curodont Ordering Information

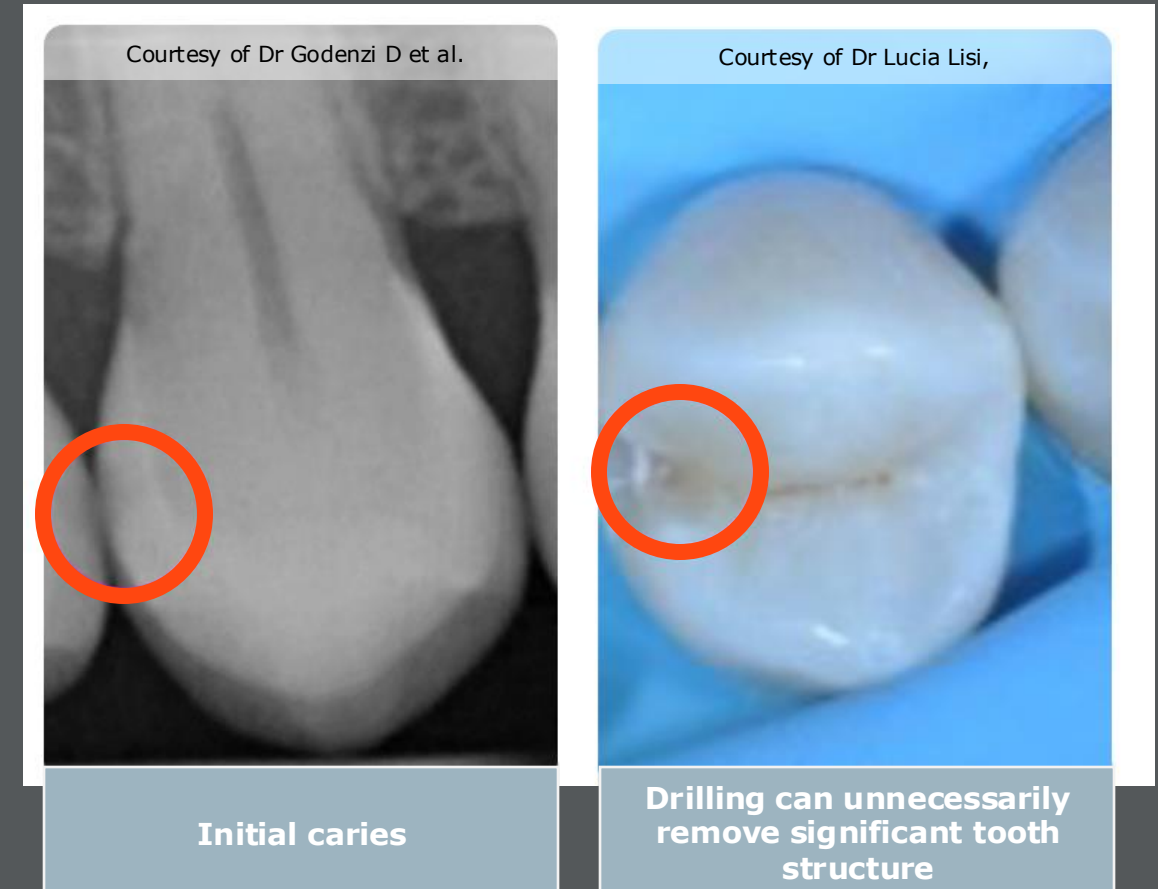
1. Navigate to the [Coupa homepage](#)
2. Click on the Patterson Dental punchout icon (under Additional Stores)
3. Type “Curodont” in the Patterson search bar and click enter
4. Return the item(s) in your Patterson cart to the Coupa cart
5. Submit Coupa cart for approval

Disclaimer: Imagen Dental Partners is committed to patient safety, quality and standards of care, and patient experience as top priorities that are never to be compromised. All services must be performed in accordance with clinical guidelines and a patient’s clinical needs. Nothing herein is intended to interfere in any way with the independent professional judgement of the diagnosing and/or treating provider. Each provider must adhere to the highest standards of professional conduct at all times.



Incidence of Caries in the Dental Office

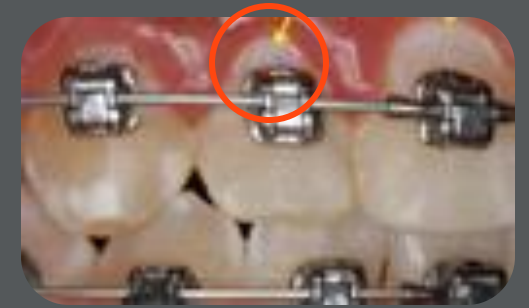
- **Caries remains the #1 preventable non-communicable disease (NCD)¹:**
 - Despite improvements in prevention and dietary habits, and may be associated with systemic health & secondary diseases
- **Nearly 80% of all patients have initial caries^{2,3}**
 - The so-called ***watch areas***
 - Initial, incipient, non-cavitated caries lesions
 - Enamel lesions, intact tooth surface
 - Found in areas prone to plaque accumulation
 - Generally doesn't cause pain
- **Majority of patients leave the office without any treatment³**



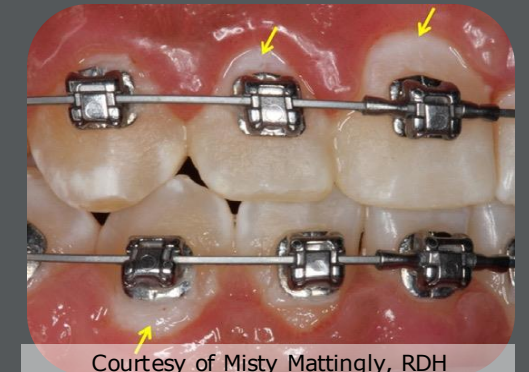
Incidence of Caries in the Dental Office



- **More than 80% have initial caries on proximal surfaces**
- **Remaining are buccal (white spots), often appearing after orthodontic treatments**
- **Placing definitive restorations would remove a fair amount of healthy tooth structure**



Courtesy of Misty Mattingly, RDH



Courtesy of Misty Mattingly, RDH

Curodont Repair - Overview and Mode of Action



CURODONT™ REPAIR FLUORIDE PLUS

- A unique biomimetic system for treating watch areas through Guided Enamel Remineralization
- Diffuses throughout the lesion, providing targeted remineralization
- Non-invasive and painless application
- Fast & easy to apply
- Works on all enamel surfaces (buccal, proximal, occlusal)
- Non-staining & tasteless
- Suitable for all patients, including children
- Safe-to-use



Curodont Repair is available on the Imagen Coupa platform

1 box contains 10x single-use applicators

Before and After Results



Before

10-year-old patient undergoing orthodontic treatment with white spot lesions



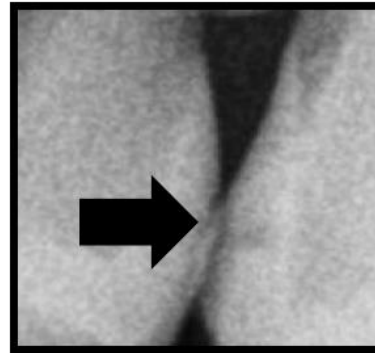
Result

5-month follow-up after a one-time CRFP treatment revealed a significant reduction in the size and appearance of the white spot lesions

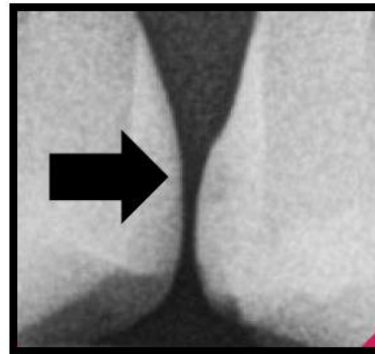
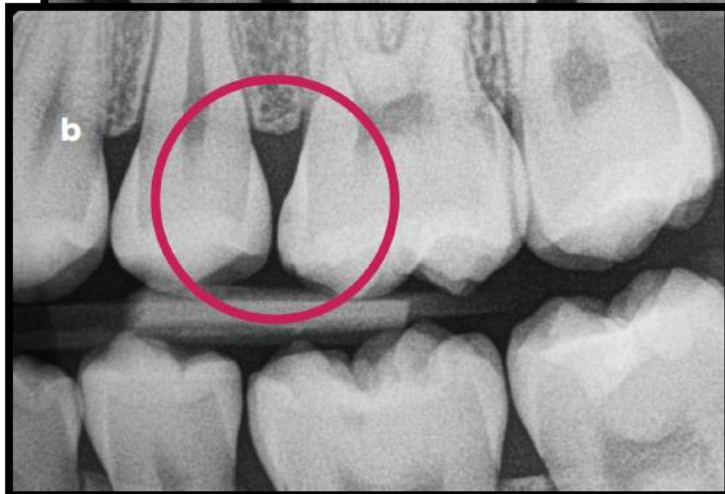
Before and After Results



Results – Incipient lesion on interproximal surface with x-ray

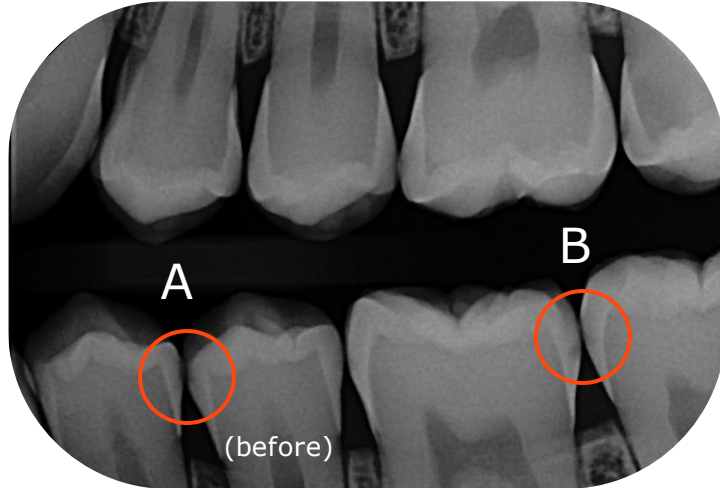


CASE:
Adolescent with an **initial** interproximal **lesion** on the **maxillary left first molar** (#14) on the inner half of the enamel (**E2**) (Fig. a).



RESULT:
Radiographs at 17 months post Repair treatment revealed a **significant reduction and remineralization** of the lesion to **E1** (Fig. b).

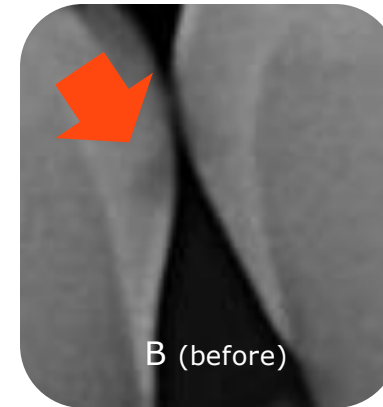
Before and After Results



Interproximal
lesions on teeth
#20-M & #21-
D

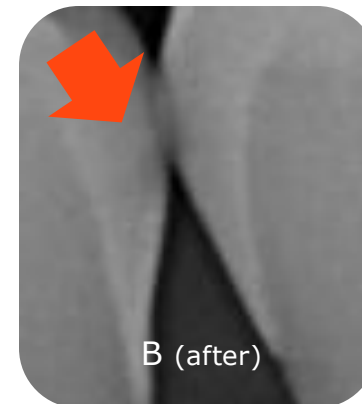
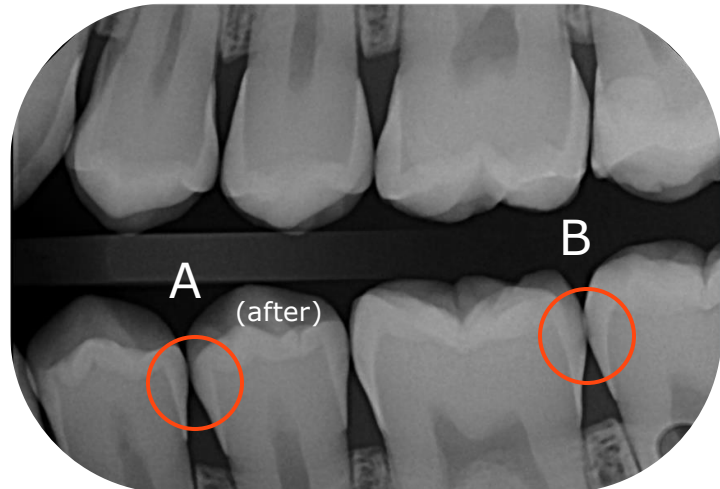


Interproximal
lesions on
teeth
#18-M & #19-D



Before:

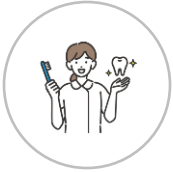
14-year-old patient with interproximal lesions on teeth #18 (mesial), #19 (distal), #20 (mesial), #21 (distal).



Result:

6-month follow-up post Curodont Repair Fluoride Plus treatment
revealed reduction in the size of the lesions.

Curodont Repair - Overview & Utilization in Office



Hygiene

Review X-rays during hygiene appointment



Observe for any incipient lesions



**Confirm diagnosis with doctor -
Sign consent form and billing
authorization**



**Complete Curodont treatment
after prophylaxis**

- No more “watch and wait”
- Can be done same day
- Single application
- Visible results
- Available on Coupa



Dentist

**Review X-rays during
new patient or regular
appointment**



Observe for any incipient lesions

**Confirm diagnosis, Sign consent
form and billing authorization**



**Can be delegated to support
staff* or performed along with
other procedures**
(state dependent)

Curodont FAQs



Curodont FAQs



Q: What is Curodont Repair Fluoride Plus and how does it work?

A: Curodont Repair Fluoride Plus is a professionally applied solution for managing early, non-cavitated tooth decay (incipient carious lesions) in a non-invasive way. It contains a proprietary peptide-based formula and fluoride that diffuse into the porous early lesion and stimulate guided enamel remineralization (also called guided hydroxyapatite generation) throughout the lesion's depth. In simple terms, it helps attract calcium and phosphate from saliva into the weakened area, enabling the tooth to repair itself from the inside out by restoring lost mineral, rather than drilling and filling. This approach preserves natural tooth structure and can stop an early cavity from progressing, all with a quick, drill-free application in the dental office.

Q: What are the indications for using Curodont Repair Fluoride Plus?

A: The product is indicated for **early-stage tooth decay** in the first and second half of enamel. The cavity is physically formed, it just has not cavitated into dentin yet. These lesions often show up as white spot areas of demineralization on enamel (which can sometimes appear light brown). Curodont Repair Fluoride Plus can be used on incipient caries on **any tooth surface** – whether on smooth facings, biting surfaces, or between teeth (interproximal lesions detected on X-rays or other devices) In formal terms, it's suitable for lesions in the outer to inner enamel and very shallow dentin involvement as long as there is **no cavity or hole in the tooth**. It is a therapeutic medicament to arrest and reverse early decay (often what dentists call "watch" areas) before they turn into cavities.

Q: Can Curodont Repair Fluoride Plus fill cavities or replace a dental filling?

A: No – Curodont is **not a filler or adhesive**, and it cannot restore a tooth that already has a cavitation (a physical hole). It works only on the **early, non-cavitated carious lesions** and cannot "fill" an actual cavity in the way a filling would. If a tooth has a frank cavity or advanced decay into dentin, that lesion will still require traditional treatment (drilling out the decay and placing a restoration). The idea of Curodont is to intervene **early** – by treating incipient lesions it can stop their progression **before** a cavity develops, potentially avoiding the need for a filling in the future. It's a complement to, not a replacement for, normal restorative dentistry when a cavity is already present.

Q: Do I need to drill or anesthetize the tooth before applying Curodont?

A: No drilling or local anesthetic is needed. One of the advantages of Curodont Repair Fluoride Plus is that it's completely **non-invasive and painless** – you do not remove any tooth structure when using it. The procedure involves only topical application to the enamel surface after cleaning the area; there's no cutting, no needles, and typically no sensitivity during application. Because it's so conservative, it's very comfortable for patients (particularly children or anxious individuals), and you won't need to numb the tooth. Simply ensure the tooth is clean and isolated, then apply the Curodont per instructions – **no drill, no shot, and no post-operative discomfort** for the patient.

Curodont FAQs



Q: What is the application protocol for Curodont Repair Fluoride Plus?

A: The 3-minute application is straightforward and quick. A typical protocol is as follows:

1. **Prepare the tooth:** After a routine cleaning or prophylaxis, isolate the tooth with cotton rolls (a rubber dam is **not required** in most cases). : It's recommended to remove the organic pellicle on the enamel to aid penetration- for example with prophy paste, polish or an air polisher. This step helps expose the micro-pores of the lesion.
2. **Apply Curodont:** Curodont comes in a two-component package (liquid and applicator sponge). Mix/activate it as directed and apply the liquid **directly onto the lesion** with the sponge applicator. The material's low viscosity helps it soak into the enamel.
3. **Finish up:** Have the patient spit out any excess. There is **no need to rinse**; in fact, instruct the patient **not** to rinse, eat, or drink for at least 30 minutes afterward to allow the product to fully absorb and initiate remineralization. No light-curing is needed. The entire in-chair application can be done in one short visit (often **3–5 minutes of chair time** for the actual application)

Q: Is rubber dam isolation or special equipment needed for using Curodont?

A: No, a rubber dam is generally **not necessary** for Curodont applications. The manufacturer notes that basic isolation using cotton rolls and suction is sufficient to keep the area dry while applying the material. This makes the procedure quicker and more comfortable, especially for children (since no bulky isolation is required). Of course, use your clinical judgment – if you're treating multiple lesions or the patient's saliva control is an issue, you could use a dam, but it's not a requirement.

Q: How long does a Curodont treatment take, and how many applications are needed per tooth?

A: The active application time is only about **3–5 minutes per tooth**, and it can be done in a single appointment.. In most cases, **one application per lesion is sufficient** to achieve the desired remineralization effect.

Q: Are multiple coats necessary?

A: You do not need multiple coats or multiple visits for the same lesion in the majority of situations. After one treatment, the lesion is re-evaluated at future check-ups to ensure it has arrested or remineralized. If the lesion is still active or the patient is at high risk, you **may reapply Curodont on that spot after some time** (see next question on retreatment), but you wouldn't typically apply it repeatedly in the same session – one thorough application is enough. The key is that it works over time after that application to rebuild enamel, so you simply monitor the tooth in subsequent visits.

Curodont FAQs



Q: When and how often should Curodont be re-applied (retreatment timelines)?

A: Generally, you will **evaluate the lesion at the patient's next recall** (e.g. 6 months later) to decide if another application is needed. Many lesions won't need a second treatment if the first was successful – they will have hardened or at least not grown. However, in patients with **high caries risk or multiple incipient lesions**, a common recommendation is to reapply Curodont on the tooth **in 6 months** (or at the next cleaning appointment) as a booster, especially if the area still shows signs of demineralization. The official instructions note that for patients with active or rampant caries, the treatment can be repeated **once or twice every six months** on those teeth. In practice, you should use clinical judgment: if a spot looks like it could benefit from another round, it's safe to re-treat. But there's no need for very frequent applications on the same lesion

Q: Are there any contraindications or cases where I should not use Curodont?

A: The main contraindication is a lesion that has already progressed to a **cavity (cavitated lesion)** or decay that is too advanced. Curodont is not indicated if there is a hole or break in the enamel surface – those teeth need a traditional filling after decay removal. It's also **not intended for purely cosmetic use** on white spots that are not caused by active caries. For example, a white spot from fluorosis or from a past orthodontic bracket (if there is no active demineralization) would not be a Curodont case. Other than that, there are few contraindications. In summary: **do not use it on cavitated lesions or non-caries spots**, and use your normal judgment for patient cooperation and allergies. There are otherwise no significant systemic contraindications noted.

Q: Does Curodont Repair Fluoride Plus cause any side effects or stain the teeth?

A: No significant side effects or staining have been reported. This product has been applied to over million teeth in the US and has had no reported adverse events"

It contains a low concentration of fluoride (about 500 ppm, which is roughly one-half to one-quarter of the fluoride in regular toothpaste) along with gentle biocompatible ingredients, and is applied topically and then expectorated. Unlike some other non-invasive caries treatments such as silver diamine fluoride (SDF) which can blacken the lesion, Curodont is **colorless and does not stain** the tooth at all. It's also essentially **tasteless and odorless**, so patients do not experience any unpleasant flavor during or after the application. In terms of side effects, the product has **not shown systemic effects**; the amount of fluoride is small and used in-office under supervision. The main "effect" the patient might notice is that the treated area could appear a bit shiny after application (since it's wet) and over time the white spot may dull or fade in color as it remineralizes. There is no etching or drilling, so teeth are not sensitive afterward due to the procedure. Overall, it's a very safe and benign treatment when used as directed.

Q: Is Curodont Repair Fluoride Plus safe for children, and can it be used on baby teeth?

A: Yes, Curodont is **safe for pediatric use** and is actually a great option for children. It's suitable for **patients of all ages**– In clinical practice, we use it on young children's primary (baby) teeth or newly erupted permanent teeth that have early lesions. The fact that it's drill-free and needle-free is a huge advantage for kids. The application is quick and painless, so pediatric patients tolerate it much better than a filling appointment. Just be sure the child can spit out effectively, since we don't want them swallowing the material; if a child is too young to spit or cooperate for the few minutes, you might wait until they are a bit older or manage the lesion with other measures temporarily.

Team Scripts

Curodont Repair Fluoride Plus is a new non-invasive treatment we offer for early-stage cavities (incipient lesions). Instead of the old “watch-and-wait” approach, we can proactively treat early decay to **remineralize enamel and reverse the cavity** before it needs a drilling and filling. Below are role-specific talking points and sample scripts to help each team member explain this to patients clearly and professionally.

Hygienist – Early Cavity Education and Introduction



- **Proactive vs. "Wait and See":** Emphasize that we now treat early "weak spots" in enamel immediately, rather than just monitoring them until they become cavities. This helps avoid the spot turning into a bigger problem.
- **Non-Invasive Solution:** Explain that Curodont Repair Fluoride Plus is a **drill-free, non-invasive** treatment – no needles, no drilling, and no pain. It simply involves applying a liquid to the tooth.
- **Quick and Easy:** The application only takes a few minutes (about 3–5 minutes) during the appointment. It can even be done right after your cleaning, so it's very convenient.
- **Enamel Repair Technology:** Mention that this treatment helps the tooth **repair itself by restoring lost minerals** in the enamel. It uses fluoride plus special minerals and proteins to *rebuild* the enamel from within, stopping the decay from progressing.
- **Comfort for All Ages:** Reassure that it's **completely painless and safe** for everyone – kids and adults alike. There's no odd taste or staining, so patients stay comfortable.

"Good news – Although you have a small cavity, we have a medication we can place in about 3 minutes in the chair today to treat it and the goal is to avoid having to get a filling later"

*In the past we might have just watched it and asked you to keep it clean, but now we use a treatment called **Curodont Repair Fluoride Plus**. It's a special liquid we can **brush on the tooth to help rebuild the enamel** and stop the cavity from forming.*

*It's **quick, painless, and no drilling** at all. I can do it for you right after your cleaning – it only takes about 3 minutes to work. There's no need for any numbing or anything like that. This way, we can **strengthen that weak spot** now so you likely **won't need a filling later**. How does that sound? I'll let the doctor know we're interested in doing the Curodont treatment today."*

Dentist – Explanation and Recommendation



- **Early Diagnosis & Recommendation:** Point out the early decay (white spot or incipient lesion) and **recommend treating it now with Curodont Repair Fluoride Plus** instead of waiting. Emphasize this is a chance to fix the problem *before* it becomes a cavity that needs a filling
- **How Curodont Works (Layman's Terms):** Explain that Curodont is a **fluoride-based gel with a special peptide**. When applied to the cleaned tooth, it **encourages the enamel to absorb calcium, phosphate, and fluoride from saliva to rebuild itself**. In short, it helps the tooth **remineralize and heal** naturally, almost like giving the tooth new armor.
- **No Drill or Anesthetic Needed:** Reassure that this treatment is **non-invasive** – it requires no drilling of the tooth and no injections. It's completely **painless** and only takes a few minutes to apply. The process involves simply cleaning the area and brushing on the Curodont liquid; the patient won't feel a thing.
- **Proven Results:** You can mention that Curodont has been used successfully in Europe for years and has a very high success rate in stopping early decay (studies show about **95% success for early lesions**, making it **13× more effective than standard fluoride treatments** alone) This gives patients confidence that it's an evidence-based solution.
- **Benefit – Preserve Tooth Structure:** Emphasize the big benefit: by doing this now, we **preserve your natural tooth structure** and **avoid drilling** and filling the tooth. If Curodont works as intended, you might never need a filling on this tooth. It's a much more conservative and comfortable approach.
- **Cost-Effective & Convenient:** It's also a **cost-effective** option for the patient – generally costing much less than a filling would. And it can be done **right here, right now** in the same visit, which is convenient and saves you a future appointment.

*"During your exam I noticed a **small area of decay** on your upper molar. It's what we call an incipient lesion – not a full cavity yet. In the past, we might have just kept an eye on it, but now I **recommend we treat it early** so it doesn't get worse.*

*We have a newer treatment called **Curodont Repair Fluoride Plus** that can **reverse that early decay** for you. It's pretty neat – it's a special medicated gel that we apply to the tooth, and it **helps your enamel heal itself by adding minerals back into the weak spot**. This means the tooth can harden up again without us having to drill it at all.*

*The best part is **there's no drilling or numbing needed**. It's completely **painless**. We literally just paint the liquid on and let it sit for a few minutes. **Over the next several weeks your tooth will rebuild new enamel** in that spot. Studies have shown it's extremely effective – in fact, it works much better than just fluoride alone. It's been used in Europe for nearly a decade with great success.*

*By doing this now, we can hopefully **avoid ever having to do a filling** on that tooth. It will save you tooth structure and money in the long run, since the treatment is less expensive than a filling would be. I strongly recommend we take care of this today. It only takes a few minutes. Do you have any questions about how it works? I think you'll find it's a simple and smart solution."*

Chairside Dental Assistant – Explanation and Recommendation



- **Set the Patient at Ease:** Reinforce to the patient that *"this will be easy."* Remind them **no needles or drilling** are involved, so they can relax. The tone should be friendly and calming.
- **Briefly Explain the Process:** Outline what will happen in simple terms – for example, *"We'll dry the tooth and brush on the Curodont liquid, let it sit for a couple of minutes, and that's it."* Emphasize it's **quick and painless**, very much like getting a fluoride treatment or a polish.
- **Sensory Details:** Reassure the patient that there's **no bad taste or stinging**. The Curodont solution is odorless and tasteless, and it won't stain their teeth. Many patients say they don't feel anything during the application.
- **Aftercare Reminder:** Let the patient know of any simple aftercare, e.g. *"We'll ask you not to eat or drink for about 30 minutes after we finish, just to let it fully absorb."* (No special care beyond that – they can resume normal brushing that evening.)
- **Positive Encouragement:** Highlight the benefit as you work: *"This will strengthen your tooth so you **won't need a filling**,"* or *"You're doing something great for your tooth."* Keep the conversation upbeat, letting them know this is a hi-tech, beneficial treatment to protect their smile.

*"Alright [Patient Name], I'm going to do the Curodont treatment that Dr. Jones talked about. It's super easy, so there's nothing you need to worry about. There's **no drilling or needles or anything scary** – I'm literally just going to **brush a liquid on your tooth and let it sit for a few minutes**.*

*First, I'll dry the tooth and clean it a bit... good. Now I'll apply the Curodont gel. You might feel me touching the tooth with the little brush, but it **shouldn't taste like anything** and it won't hurt at all. We'll leave it on for about 3–4 minutes to soak in and work its magic.*

*You're doing great! This **medicine is strengthening your enamel** from the inside out. The nice thing is it's so quick – much better than getting a filling, right? Once I'm done, we'll just ask you to **not eat or drink for 30 minutes** so the tooth can absorb all the minerals. After that, you're all set. This will help make sure that tiny cavity we saw doesn't turn into a big one. If you have any discomfort (which is unlikely), let us know, but you should be perfectly fine. Almost done... And that's it – **no pain, and no drill!**"*

Front Desk— Explanation and Recommendation



- **Simple Explanation:** Be ready to explain **what Curodont is** in one or two sentences for patients who may have questions. For example: *"It's a **new treatment we offer to fix early cavities without drilling**. The doctor just paints a mineral-rich liquid on the tooth to help rebuild it, so you don't have to get a filling later."* This addresses the basics (non-invasive and preventive) clearly.
- **Highlight Convenience:** Emphasize that it's a **quick, same-visit procedure**. Patients can often get it done during a checkup or come in for a very short appointment just for the treatment. It usually takes only 5–10 minutes total, so it doesn't require a lot of time.
- **Reassure about Comfort:** Let patients (or parents) know that Curodont treatment is **painless and easy**. For instance: *"Don't worry, it doesn't involve any drilling or shots – it's completely comfortable, almost like getting a fluoride application."* This can help overcome any hesitation to schedule.
- **Scheduling and Flexibility:** Offer to schedule it at a convenient time. If the patient is due for a cleaning or just had one, mention that it can be done in conjunction with their hygiene visit. If not, assure them it's a quick standalone visit. Being flexible and accommodating encourages them to follow through with the treatment.
- **Cost/Insurance Information:** Be proactive in explaining **cost benefits**. For example: *"The treatment is relatively inexpensive – roughly about a third of what a filling would cost. Some insurance plans are beginning to cover it under preventive care; we can check yours for you."* Even if insurance doesn't cover it yet, patients often appreciate knowing it's affordable and can save them money long-term by preventing more serious work.
- **Positive Framing:** Frame it as a **positive, advanced service** the office provides: *"We're really excited to offer this because it helps patients avoid more invasive treatments."* A friendly, enthusiastic tone can help patients feel confident about saying yes.

Patient: "The dentist said I should get some kind of fluoride... Curodont? What is that exactly?"

Front Desk: "Sure! Curodont Repair Fluoride Plus is a **new preventative treatment we have to stop early cavities**. Basically, if you have a tiny bit of early decay, the doctor can use Curodont to **strengthen the tooth and reverse the decay without drilling**. They just **paint a special fluoride-based liquid on the tooth**, and it helps your enamel rebuild itself so you hopefully **won't need a filling later on**."

Patient: "Oh, okay. And this can be done quickly?"

Front Desk: "Absolutely. It's a very quick procedure – usually about 5 minutes. We often do it during the same visit as your exam or cleaning. Looking at the schedule, we could even do it **today** before you leave, if you have a few extra minutes. If not, we can book a short appointment soon – it doesn't take long at all."

Patient: "Does it hurt or anything? I'm not a fan of drills..."

Front Desk: "It's completely **painless** – no drills involved at all, and no numbing needed. Most patients say it just feels like we're brushing something on the tooth. There's no bad taste or anything weird, so it's very easy to tolerate."

Patient: "That sounds great. What about the cost?"

Front Desk: "We'll check your insurance for coverage. It's a new treatment, so not all plans cover it yet, but the good news is it's **much cheaper than a filling** would be. It costs roughly a third of a typical filling. And if it prevents a cavity, it saves you the expense and the experience of having a filling later on. We'll review the fee with you and answer any questions, of course."

*"Dr. Jones really recommends it because it can save your tooth from further decay. We're excited to offer Curodont – patients love that they can fix a small cavity **without any drilling or fear**. Would you like to go ahead and get that done today? I can get the clinical team to prepare for it right now."*