DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration

Indications for Use

Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017 See PRA Statement below.

510(k) Number <i>(if known)</i>	
Device Name SavDenTM MTA Root Canal Filling Materials	
Indications for Use (Describe) - A root end filling material.	
- For the repair of root canals as an apical plug during apexification.	
- For repair of root perforations during root canal therapy or as a consequence of internal resorption.	
 As a pulp capping material. Pulpotomy of primary teeth in the child (ages >2-12 years) and adolescent 	ent (ages >12-21 years) nediatric natient
populations.	
Type of Use (Select one or both, as applicable)	
	er-The-Counter Use (21 CFR 801 Subpart C)
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CONTINUE ON A SEPARATE PAGE IF NEEDED.

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