

Pediatric Crowns



KIDZO

STAINLESS STEEL CROWNS

Reliable full coverage for primary molars

Made in Korea



PRIMARY MOLAR Design

Kidzo Primary Molar Crown

Preformed stainless steel crowns made in Korea for restoration of primary molars.



Full Coronal Coverage

Covers the entire clinical crown to protect compromised tooth structure.



Adaptable Margins

Contouring and crimping can support close cervical adaptation and retention.



Multiple Sizes

Choose the smallest crown that restores the pre-existing proximal contacts.



Clear Crown Identification

Visible crown codes support organized chairside selection.

WHY STAINLESS STEEL?



Highly Durable

A long-established full-coverage restoration for compromised primary teeth.



Full Coronal Coverage

Covers the clinical crown and protects remaining tooth structure.



Cost-Effective

A relatively economical restorative option for pediatric posterior teeth.



Predictable Placement

Preformed crowns can require minimal modification when the correct size is selected.



A practical full-coverage option for primary molars with extensive decay, developmental defects, or after pulp therapy.

CLINICAL Indications

01

Decayed Primary Tooth

Full-coverage restoration when primary tooth structure is extensively affected.

02

After Pulpotomy or Pulpectomy

A crown option following indicated pulp therapy.

03

Developmental Problems

Localized or generalized developmental defects affecting the crown.

04

Extensive Loss of Tooth Structure

Coverage for a primary tooth with major coronal loss.

05

High Caries Susceptibility

Protection for children with elevated caries susceptibility.

06

Abutment for an Appliance

May serve as an abutment when appliance support is required.



CROWN SELECTION & Fit

Aim: choose the smallest crown that fully seats and restores proximal contacts.

01

Measure the Mesio-Distal Width

Evaluate the prepared tooth and use its mesio-distal dimension to guide crown selection.



02

Select the Smallest Suitable Crown

The selected crown should restore the pre-existing proximal contacts without excessive bulk.



03

Seat Lingual to Buccal

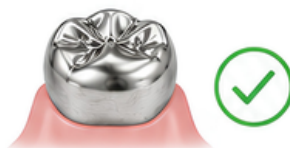
Seat the crown over the lingual surface first, then push it over the buccal bulge for a snap fit.



04

Check Margins and Occlusion

Confirm close cervical adaptation, complete seating, stable contacts, and acceptable occlusion.



PREPARATION Technique

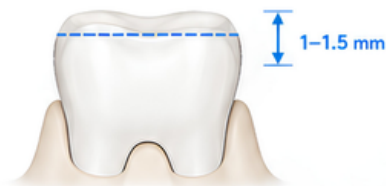
Aim: create adequate clearance while preserving primary tooth structure.

01

Occlusal Reduction

Reduce the occlusal surface approximately 1–1.5 mm while following the natural cuspal anatomy.

- ✓ 1–1.5 mm reduction
- ✓ Follow natural occlusal anatomy



02

Proximal Reduction

Break proximal contacts with vertical walls and slight occlusal convergence. Maintain a feather-edge finish line.

- ✓ Break proximal contacts
- ✓ Feather-edge finish line

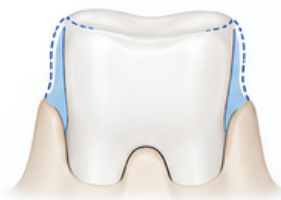


03

Contour and Line Angles

Round all line angles. Buccal and lingual reduction is generally limited and performed only when required for seating.

- ✓ Round all line angles
- ✓ Limit buccal / lingual reduction when needed



CEMENTATION & Final Check



Clean and Dry

Rinse and dry the crown before cementation.



Load the Crown

Fill approximately two-thirds with glass ionomer cement and coat the internal surfaces.



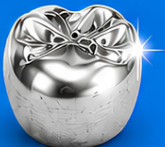
Seat Completely

Seat the crown fully and maintain gentle pressure until the cement stabilizes.



Finish and Verify

Remove excess cement, floss contacts, and re-check complete seating and occlusion.



FINAL CHECK

Complete seating • Clean margins • Clear contacts • Acceptable occlusion

CLINICAL

Case

FOLLOW-UP



Posterior primary molars restored with stainless steel crowns

Clinical follow-up image from the supplied crown training deck

Clinical applications shown:



After pulp therapy



Extensive
tooth loss



High caries
susceptibility



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