

PRODUCT FACTS

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Dodge



THE DODGE COMPANY

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INR-TONE

For Professional Embalming Use Only.
Before using, read Material Safety Data Sheet.

| <u>Item No.</u> | <u>Shade</u> | <u>16 oz. Btl.</u> |
|-----------------|--------------|--------------------|
| 525014 | #1 | Blonde |
| 525022 | #2 | Brownette |
| 525030 | #3 | Brunette |
| 525048 | #4 | Latin |
| 525055 | #5 | Darker |

Inr-Tone was developed to give embalmers who use tissue tints a choice of colors so they can more closely duplicate the natural coloring of the body. Unlike some tinctorial agents, Inr-Tone does not promote dehydration. Rather, it acts to retard it. And it diffuses rapidly and evenly, which reduces spotting.

Inr-Tone is truly different from other tinctorial chemicals. When added to the embalming solution, each shade will produce an individual coloring that appears unusual. For instance, #2 Brownette appears greenish in the tank. And #3 Brunette will change the solution to a murky brown color. But these undesirable shades will not be produced in the tissues; the embalmed body will look natural and lifelike.

Suggested Usage Chart for Inr-Tones

The choice of shades to produce the best results for each individual body must, of course, be left to the discretion of the experienced embalmer. The following chart may serve as a guide. However, each embalmer can vary the color of the individual case according to his or her preference.

#1 Blonde: Infants and younger children, elderly individuals with white hair and fair complexions, or Nordic and ash blondes.

#2 Brownette: Complexions that are between blonde and brunette.

- Alone or in equal parts with #1 Blonde for gray-haired elderly individuals that do not have a true dark or brunette complexion.
- Alone or in combination with #3 Brunette for middle-aged individuals that are not of a swarthy or true brunette complexion. (This is often termed the “average complexion.”)

#3 Brunette: Dark-haired individuals with a true brunette complexion. In combination with #4 Latin for complexions usually found in the male Italian and other Latin races.

#4 Latin: Darker Latin complexions.

- Alone or in combination with #3 Brunette for a slightly darker coloration than #3 will produce by itself.
- Alone or in combination with #5 Darker for light complected African-American.
- In combination with #5 Darker for a lighter coloration than #5 will produce by itself.

#5 Darker: African-Americans with a very dark skin or white and Latin complexions deeply tanned by the sun. In combination with #4 Latin for African-American with average or medium skin.

For “Normal” Cases

The first half gallon of arterial solution should not contain any Inr-Tone. It may be added in any or all subsequent half-gallon solutions in proportions of from one to two ounces per half gallon. Finer skin textures and lighter complexions require less Inr-Tone than do coarser skin textures and darker complexions.

Jaundiced Cases

The proper shade (or shades) should be used in the first gallon or half gallon of arterial solution. This allows Inr-Tone to camouflage the jaundice discoloration in the superficial tissues and make the subsequent cosmetic application less complicated. The possibility of color spotting is, of course, increased when any chromatic agent is added to the first injection. But the potential danger of spotting is outweighed by the value of placing the coloring into the jaundice-stained tissues before any fixation occurs. The amount of Inr-Tone used should be governed by the intensity of the discoloration. An average amount of Inr-Tone would be one ounce for each half gallon of arterial solution. If the discoloration is especially intense, add as much as two ounces of Inr-Tone per half gallon.

Color Control

Because Inr-Tone does not immediately become fixed in the tissues, a better control over coloring is possible than with other tinctorial agents. If enough color – or even too much – is obtained before the arterial injection has been completed, the amount can be controlled or lessened by reducing or eliminating Inr-Tone in subsequent solution. If too much color, or a noticeable spotting of color, is present upon completion of the arterial injection, it can be considerably lessened by immediately aspirating the heart or chest vessels. Conversely, if the color attained is satisfactory, cavity aspiration should be delayed until sufficient time has elapsed to allow Inr-Tone to become fixed in the tissues. If the color is satisfactory, but for some reason it becomes necessary to aspirate the trunk cavities immediately following arterial injection, direct aspiration from the heart and large chest vessels should be avoided until at least six (and preferably twelve) hours after the arterial injection has been completed. If, as a result of faulty circulation, spotting should still be present after aspirating, a more even coloring may be obtained by externally applying a small amount of the same shades of Inr-Tone as were used in the arterial solution. Mix a small amount of the proper shades with an equal amount of warm water and brush over the lighter areas until they assume the same coloring as the spotted areas. After the external application has dried, cosmetics may be applied directly over it. A cream type cosmetic is preferred for this purpose to a liquid cosmetic or, especially, to an alcohol base liquid tint. In using Inr-Tone, a slightly tinted tissue is preferable to a more heavily colored effect. Use only enough Inr-Tone to produce a slight coloring or a natural “undertone” of color in the tissues.