

# SURGICAL GUIDE

THE KEYS TO A SUCCESSFUL PROCEDURE

# \*\*\*\*\*\*\*\*\*\*

ENGINEERED BY DENTISTS - FOR DENTISTS



# TABLE OF CONTENTS

Introduction	
Initial Appointments	
Treatment Planning	5
Presurgical Restorative Appointment	5
Implant Design	6
Implant Types	7-9
Temporary Healing Abutments	
Surgical Drills	11-12
Drill Sequence and Implant Tools	
Drill Stoppers	
Surgical Tools	
Instruction for Surgical Procedure	
Cleaning and Sterilization	



# Surgical Guide





# Introduction

### **Device Description**

The SpiralTech implant system is a comprehensive product line that includes implants, corresponding abutments, and cover screws. SpiralTech dental implants are grade 5 titanium (Ti 6Al-4V ELI, conforms to ASTM F136) implants that come in 2 different surface treatments - SLA and RBM.

SpiralTech dental implants come in four product lines with three based on their thread designs. The ESi has sharp, square, and rounded threads. The Ultimate implant also has sharp threads. The Premium implant features square and sharper threads in a more conventional design. The implants have diameters ranging from 3.0 mm to 6.0 mm, and the lengths from 8mm to 15 mm. ESi and Ultimate are intended to be used for immediate loading. The fourth implant type is the Solo One Piece, which comes with an abutment and cannot be used with low mechanical stability cases. Abutments are available in various types including straight, shoulder, angulated, ball attachments, multi-unit, temporary and healing. All abutments come in both hex and conical connections. Temporary abutments come in PEEK and zirconia. Healing abutments come in titanium alloy and zirconia abutments come in titanium alloy and as a titanium base with zirconia abutment. Ball attachments and multi-units are titanium alloy. No SpiralTech abutments are intended to be modified.

### Indications For Use

The SpiralTech Dental Implants are endosseous implants intended to be surgically placed in the upper or lower jaw arches to provide support for prosthetic devices. The implants are designed to restore a patient's esthetics and chewing function. SpiralTech implants are intended for single or multiple unit restorations on splinted or non-splinted applications. The implants ESi and Ultimate are intended for immediate loading when good primary stability is achieved and with appropriate occlusive loading. These implants [along with Premium and Solo One Piece] can also be used for loading after a conventional healing period.

Solo One Piece 3.0 and 3.3 implants, Ultimate (conical) 3.0 implants, and ESi (conical) 3.0 implants are intended to replace a lateral incisor in the maxilla and/or a central or lateral incisor in the mandible. Mandibular central and lateral incisors must be splinted if using two or more 3.0 and/or 3.3 implants adjacent to one another.

\*Federal law restricts this device to sale by or on the orders of a dentist or physician. These devices are only to be used by trained professionals.

### **Initial Appointments**

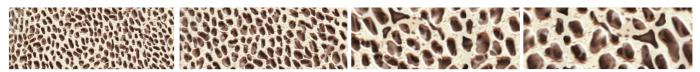
- Medical and Dental History
- Dental Evaluation and X-ray Examinations
- Diagnostic Casts
- Preliminary Discussion of Treatment Alternatives
- Decision to Proceed with Treatment
- Initial Treatment Plan, Case Presentation, and Alternatives
- Clinical/Laboratory Procedure Prior to Additional Diagnostic Records
- Extra Office Diagnostic Orders Setup, Computed Tomography Scans, Tests for Medical Evaluation, Consultation, and Team Members
- Diagnostic Wax-up of Final Results on Duplicate Diagnostic Casts
- Final Treatment Plan and Alternatives
- Medical Laboratory Tests Evaluated
- Prescriptions and Postoperative Instructions
- Consent Forms and Request for Treatment Forms
- Pictures of Existing Condition

### **Treatment Planning**

- Diagnose patient with radiograph. Take Aliginate Impression and Study Model
- to take record of upper and lower jaw.
  - Diagnosis of the needed reconstructed area:
    - a. Location of the missing teeth
    - b. Bone Type
    - c. Bone Width
    - d. Bone Height (from Sinus floor or Inferior Alveolar Nerve to Crestal area of the bone)
    - e. Decide on immediate or non-immediate loading and follow the chart,
    - make sure to distance your implant 1.5mm away from Alveolar Nerve or Sinus Floor
    - f. 3.5mm implants should be placed 0.5mm below crestal level of the bone
    - g. All implants should leave a minimum of 1.5mm for both buccal and lingual bone thickness
    - h. Allow 1.5 distance between root and implant, and 3.0mm distance between two implants

### Presurgical Restorative Appointment

- Carries Removal, Extractions, Temporary Teeth
- Periodontal Treatment, Endodontic Therapy, Orthodontics
- Occlusal Vertical Dimension
- Occlusal Plane Correction, Treatment Prosthesis, Recontour Existing Teeth, Enamoplasty
- Transitional Prosthetics (Removal or Fixed) or Diagnostic Try-In; Tissue Conditioning
- Impression for Surgical Guide Template (If Oral Condition Altered from Initial Diagnostic Cast)



Type I (Dense)

Type II Dense trabecular bone Type III Trabecular bone Type IV (Soft) Low-density trabecular bone

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# Implant Design

- Help with Diagnosis
  - a. Crown Lengthening
  - b. Occlusal Plane
  - c. Hopeless Teeth
- Evaluate the Psychologic Profile of the Patient
- Denture before Implant Surgery
- Improve Soft Tissues before Final Impression for Implant Overdentures
- Postoperative to Implant Surgery
- Evaluate Occlusal Vertical Dimension
- Evaluate Temporomandibular Joint Dysfunction
- Improve Implant Position Related to Final Tooth Position
- Evaluate Esthetics before Surgery
- Evaluate Hygienic Contours of Fixed Restorations
- Determine whether Removable Restoration is Required for Maxillary Lip Support (RP versus FP)
- Protect Bone Graft or Implants During Healing
- Patient's Financial and Compliance Management
- Progressive Bone Loading
- Phonetics and Esthetics for Full Arch Implant-Fixed Prosthetics on Complete Edentulous Patients







Bone Type I, II, III, IV Non-Immediate Loading Ultimate



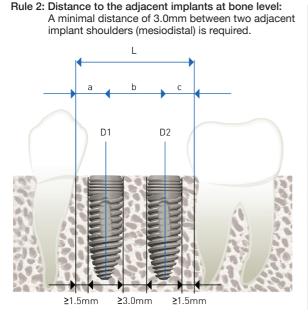
Bone Type II, III, IV Immediate and Non-Immediate Loading

### **Mesiodistal Implant Position**

The point of reference for measuring mesiodistal distances is always the implant shoulder, as it is the widest part of the implant. Note that all distances given in this flyer are rounded off to the 0.5mm. The following basic rules must be applied:

#### Rule 1: The distance to the adjacent tooth at bone level:

A minimal distance of 1.5mm from the implant shoulder to the adjacent tooth at bone level (mesial and distal) is required.



Implant Diameter D1 (mm)	Implant Diameter D2 (mm)	a min (mm)	b min (mm)	c min (mm)	L min (mm)
3.0	3.0	3.0	6.0	3.0	12.0
3.0	3.5	3.0	6.3	3.3	12.6
3.5	3.5	3.3	6.6	3.3	13.2
3.5	4.3	3.3	7	3.7	14
4.3	4.3	3.7	7.4	3.7	14.8
4.3	5.0	3.7	7.7	4	15.4
5.0	5.0	4	8	4	16
5.0	6.0	4	8.5	4.5	17
6.0	6.0	4.5	9	4.5	18

# ESi Implant with Standard Hex or Conical Hex Connection

The Essential Spectrum Implant (ESi) has been patented. The ESi is versatile and can be used in most clinical situations. Placement is intuitive and fast making it great for beginning and experienced surgeons alike.

	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
Ø3.00	10.0	-	ESiC30010
	11.5	-	ESiC30011
	13.0	-	ESiC30013
	15.0	-	ESiC30015
		HEX	CONICAL
	Length (mm)	Catalog No.	Catalog No.
	8.0	ESi35008	ESiC35008
Ø3.50	10.0	ESi35010	ESiC35010
	11.5	ESi35011	ESiC35011
	13.0	ESi35013	ESiC35013
	15.0	ESi35015	ESiC35015
	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	6.0*	ESi43006	ESiC43006
<b>G</b> ( <b>D</b> )	8.0	ESi43008	ESiC43008
Ø4.30	10.0	ESi43010	ESiC43010
	11.5	ESi43011	ESiC43011
	13.0	ESi43013	ESiC43013
	15.0	ESi43015	ESiC43015
	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	6.0*	ESi50006	ESiC50006
Ø5.00	8.0	ESi50008	ESiC50008
05.00	10.0	ESi50010	ESiC50010
	11.5	ESi50011	ESiC50011
	13.0	ESi50013	ESiC50013
	15.0	ESi50015	ESiC50015
	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	6.0*	ESi60006	ESiC60006
Ø6.00	8.0	ESi60008	ESiC60008
00.00	10.0	ESi60010	ESiC60010
	11.5	ESi60011	ESiC60011
	13.0	ESi60013	ESiC60013
	15.0	ESi60015	ESiC60015









# Ultimate Implant with Standard Hex or Conical Hex Connection

The Ultimate Implant is designed for initial stability, even in soft bone. It is a suitable implant for immediate placement and/or immediate loading. Due to its design, it can be slightly adjusted to reposition during surgery.

	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	10.0	-	ULC30010
Ø3.00	11.5	-	ULC30011
	13.0	-	ULC30013
	15.0	-	ULC30015



	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
Ø3.50	8.0	UL35008	ULC35008
	10.0	UL35010	ULC35010
	11.5	UL35011	ULC35011
	13.0	UL35013	ULC35013
	15.0	UL35015	ULC35015

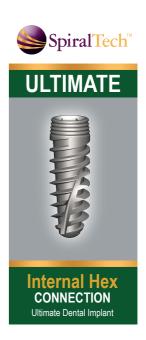
	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	6.0*	UL43006	ULC43006
Ø4.30	8.0	UL43008	ULC43008
	10.0	UL43010	ULC43010
	11.5	UL43011	ULC43011
	13.0	UL43013	ULC43013
	15.0	UL43015	ULC43015

	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	6.0*	UL50006	ULC50006
<b>GE 00</b>	8.0	UL50008	ULC50008
Ø5.00	10.0	UL50010	ULC50010
	11.5	UL50011	ULC50011
	13.0	UL50013	ULC50013
	15.0	UL50015	ULC50015

CONICAL HEX Length (mm) Catalog No. Catalog No. 6.0\* UL60006 ULC60006 8.0 UL60008 ULC60008 Ø6.00 10.0 UL60010 ULC60010 11.5 UL60011 ULC60011 13.0 UL60013 ULC60013 UL60015 15.0 ULC60015

<image><section-header>

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# Premium Implant with Standard Hex or Conical Hex Connection

The Premium Implant is a conventionally designed implant. While it can be used in all clinical situations, its conservative threads are best suited for healed ridges. All implants are provided with the corresponding cover screw and average-size healing abutment.

	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	8.0	PR35008	PRC35008
Ø3.50	10.0	PR35010	PRC35010
	11.5	PR35011	PRC35011
	13.0	PR35013	PRC35013
	15.0	PR35015	PRC35015
	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	6.0*	PR43006	PRC43006
	8.0	PR43008	PRC43008
Ø4.30	10.0	PR43010	PRC43010
	11.5	PR43011	PRC43011
	13.0	PR43013	PRC43013
	15.0	PR43015	PRC43015
	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	6.0*	PR50006	PRC50006
	8.0	PR50008	PRC50008
Ø5.00	10.0	PR50010	PRC50010
	11.5	PR50011	PRC50011
	13.0	PR50013	PRC50013
	15.0	PR50015	PRC50015
	Length (mm)	HEX Catalog No.	CONICAL Catalog No.
	6.0*	PR60006	PRC60006
	8.0	PR60008	PRC60008
Ø6.00	10.0	PR60010	PRC60010
	11.5	PR60011	PRC60011
	13.0	PR60013	PRC60013
	15.0	PR60015	PRC60015







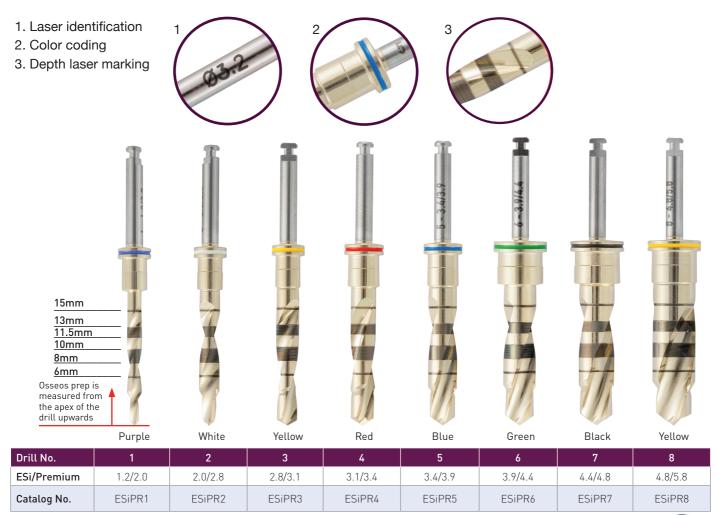
# Temporary Healing Abutments.

Available in various heights and diameters, healing abutments are used to sculpt soft tissues in preparation for placement of the final restoration. They can be used in the one-stage or two-stage surgical approach. All images of abutments are scaled to actual size.

Design	Diameter (mm)	Facial Height (mm)		ex og No.	NP Conical Catalog No.	RP Conical Catalog No.	Slim Conical <sup>*</sup> Catalog No.
		2.5	HAH382	Ţ	HACNP382	HACRP382	HACSP352
		3.5	HAH383	-	HACNP383	HACRP383	HACSP353
Healing Cap, narrow	3.8 (SP: 3.5)	4.5	HAH384	Ų	HACNP384	HACRP384	HACSP354
		5.5	HAH385	NUME	HACNP385	HACRP385	HACSP355
		2.5	HAH452	Y	HACNP452	HACRP452	HACSP422
		3.5	HAH453	Ţ	HACNP453	HACRP453	HACSP423
Healing Cap, medium	4.5 (SP: 4.2)	4.5	HAH454	Ţ	HACNP454	HACRP454	HACSP424
		5.5	HAH455		HACNP455	HACRP455	HACSP425
		2.5	HAH552	Ţ	-	HACRP552	
		3.5	HAH553		-	HACRP553	-
	5.5	4.5	HAH554	V	-	HACRP554	-
		5.5	HAH555		-	HACRP555	-
Healing Cap, wide		2.5	HAH602	T	-	HACRP602	-
		3.5	HAH603	Ţ	-	HACRP603	-
	6.0	4.5	HAH604	Ţ	-	HACRP604	-
		5.5	HAH605		-	HACRP605	-

# ESi / Premium Surgical Drills

Drill speed: 850-950 RPM | Torque: 35-40 Ncm



#### Drill Sequences ESi/Premium Drills Kit

Diameter ø	IV, III Soft Bone	ll Medium Bone	l Hard Bone
3.0	1	1	1 - 2
3.5	1 - 3	1 - 3, 4*	1-4
4.3	1 - 4	1 - 4, 5*	1 - 5 (CS)
5.0	1 - 5, 6*	1 - 6	1 - 6, 7* (CS)
6.0	1 - 7	1 - 7, 8*	1 - 8 (CS)

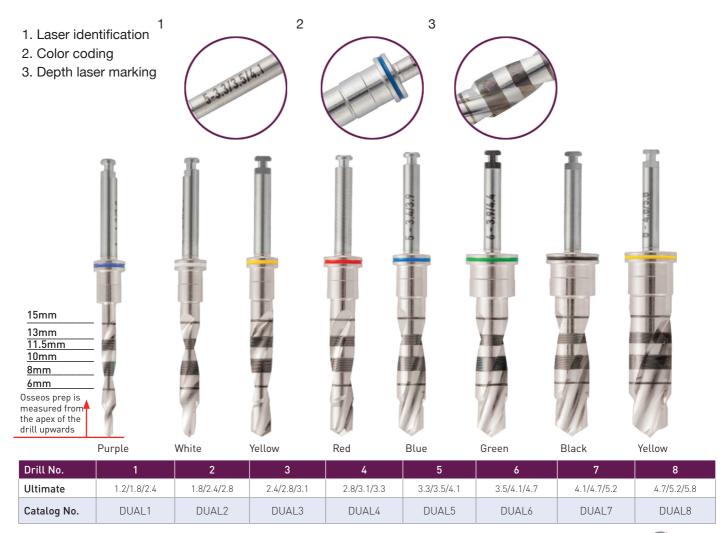




Tool	Countersink	Countersink	1/2 Round	1.5 Spade
Corresponding Implant Ø	3.5-4.3	5.0-6.0	-	-
Catalog No.	CURS354	CURS456	05RD	SPADE15

# **Ultimate Surgical Drills**

Drill speed: 850-950 RPM | Torque: 35-40 Ncm



#### **Drill Sequences**

Diameter ø	IV, III Soft Bone	II Medium Bone	l Hard Bone
3.0	1	1	1-2
3.5	1-2	1-3	1-4
4.3	1-4	1-5	1-5 (CS)
5.0	1-5	1-6	1-6 (CS)
6.0	1-6	1-7	1-8 (CS)

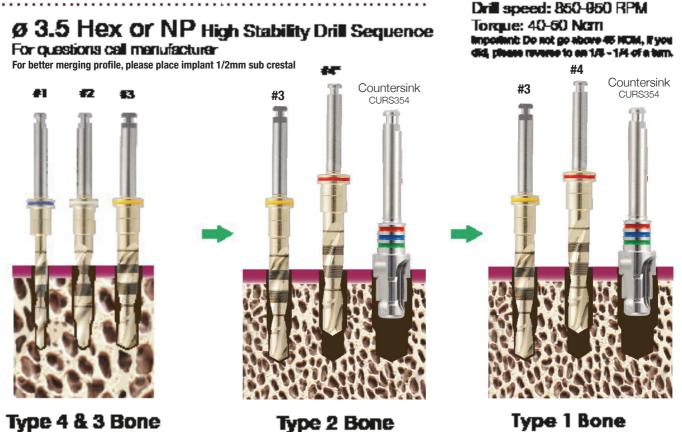
Ultimate Drills Kit CATALOG NO. SKU





Tool	Countersink	Countersink	1/2 Round	1.5 Spade
Corresponding Implant Ø	3.5-4.3	5.0-6.0	-	-
Catalog No.	CURS354	CURS456	05RD	SPADE15

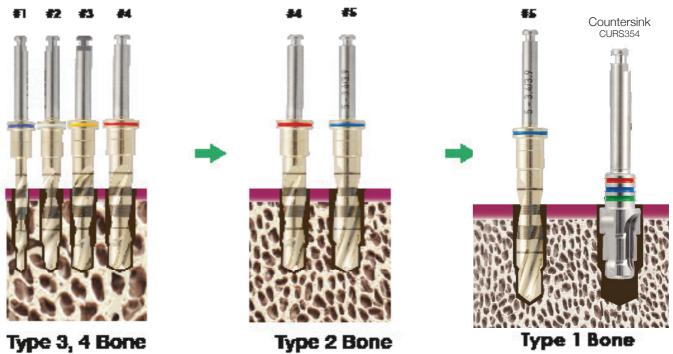
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#### Note: For all J implants the availation describes in L. Terratore, for borre types 1 4.5, examination must be used.

### ø 4.3 Hex or RP

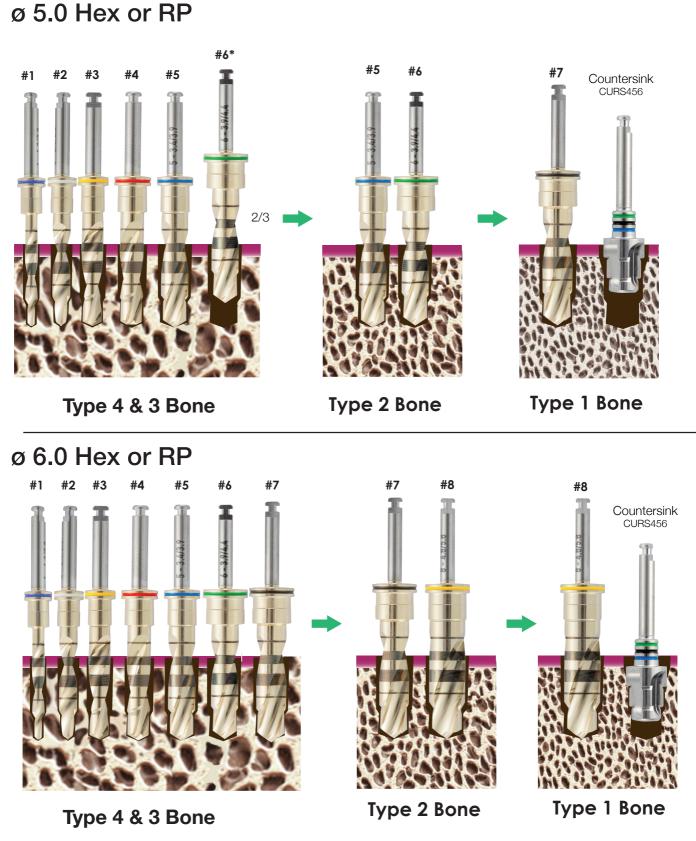
For better merging profile, please place implant 1/2mm sub crestal



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# ESi / Premium Drill Sequence

Drill speed: 850-950 RPM Torque: 35-40 Ncm



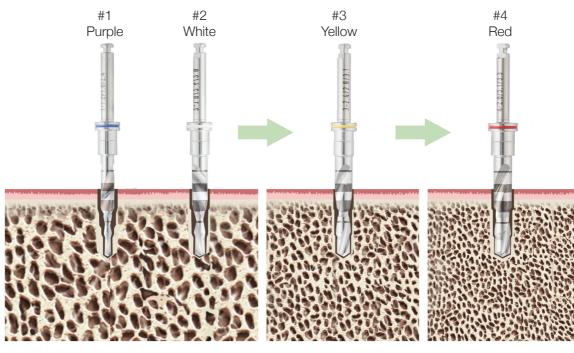
Note: Make sure you are at least 1.5mm away from Inferior Alveolar Nerve or Sinus Floor.

**NOTE:** Make sure you are at least 1.5mm away from Inferior Alveolar Nerve or Sinus Floor

# **Ultimate Drill Sequence**

Drill speed: 850-950 RPM Torque: 35-40 Ncm

## ø 3.5 Hex or NP

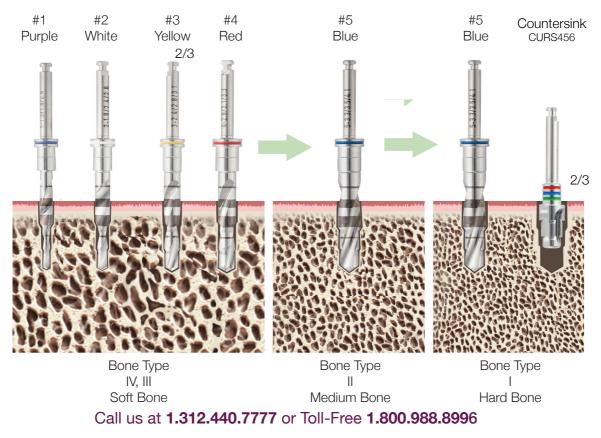


Bone Type III, IV Soft Bone

Bone Type II Medium Bone

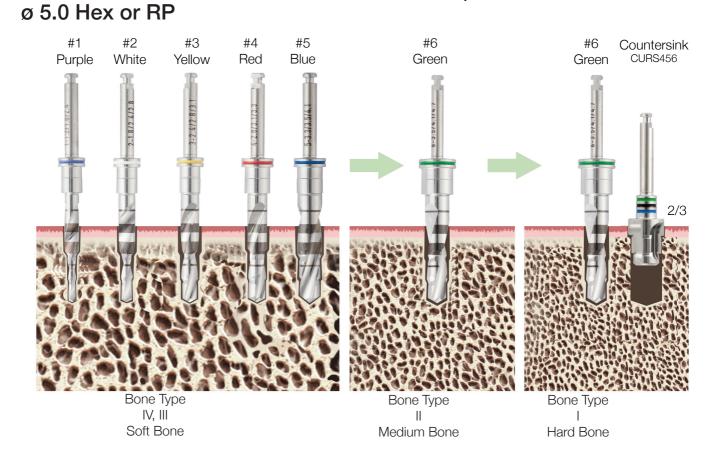
Bone Type I Hard Bone

### ø 4.3 Hex or RP

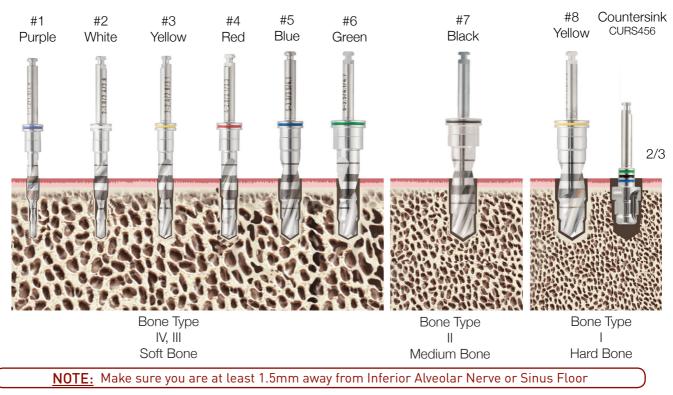


# **Ultimate Drill Sequence**

Drill speed: 850-950 RPM Torque: 35-40 Ncm



### ø 6.0 Hex or RP



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# Drill Stoppers

Length	L8 L10		11.5	L13	
Drills	1, 2, 3	1, 2, 3	1, 2, 3	1, 2, 3	
Implant Ø	3.5mm	3.5mm	3.5mm	3.5mm	
Drills	4,5	4,5 4,5		4, 5	
Implant Ø	4.3mm	4.3mm	4.3mm	4.3mm	
Drills	6, 7, 8	6, 7, 8	6, 7, 8	6, 7, 8	
Implant Ø	5.0mm, 6.0mm	5.0mm, 6.0mm	5.0mm, 6.0mm	5.0mm, 6.0mm	

•

Drill Stoppers Kit CATALOG NO. DSK

	18	110	1115	L13
Implant Length	8	10	11.5	13
Drill #	1,2,3	1,2,3	1,2,3	1,2,3
Stop Ø mm	4.5	4.5	4.5	4.5
Implant ø mm	3.5	3.5	3.5	3.5
Stopper length mm	14.3	12.3	10.8	9.3
Laser mark	Red Red	Red Blue	Red Green	Red Yellow
Catalog No.	RRS800	RBS100	RGS115	RYS130

	- 18		1115	L13
Implant Length	8	10	11.5	13
Drill #	4,5	4,5	4,5	4,5
Stop Ø mm	5.3	5.3	5.3	5.3
Implant ø mm	4.3	4.3	4.3	4.3
Stopper length mm	14.3	12.3	10.8	9.3
Laser mark	Blue Red	Blue Blue	Blue Green	Blue Yellow
Catalog No.	BRS800	BBS100	BGS115	BYS130

		Lie	ins.	Li I
Implant Length	8	10	11.5	13
Drill #	6,7,8	6,7,8	6,7,8	6,7,8
Stop Ø mm	7.2	7.2	7.2	7.2

Stop Ø mm	1.2	1.2	1.2	1.2
Implant ø mm	5.0,6.0	5.0,6.0	5.0,6.0	5.0,6.0
Stopper length mm	14.3	12.3	10.8	9.3
Laser mark	Green Red	Green Blue	Green Green	Green Yellow
Catalog No.	GRS800	GBS100	GGS115	GYS113

# Surgical Tools.

## MOTOR MOUNTS



.

Catalog .No	MMH122 MMH128	MMH222 MMH228	MMCNP222 MMCNP228	MMCRP222 MMCRP228	DE26	TPU30/40 TPU40/50	DDM115
Length	22/28mm	22/28mm	22/28mm	22/28mm	26mm	Ø 4.0x5.0mm	
		2.42mm	2.25mm	2.65mm			
Product	Mount Hex .050/1.25	Implant Motor Mount Hex	Implant Motor Mount Conical NP	Implant Motor Mount Conical RP	Drill Extender	Tissue Punch	Depth Pin

### RATCHET MOUNTS



HXD218

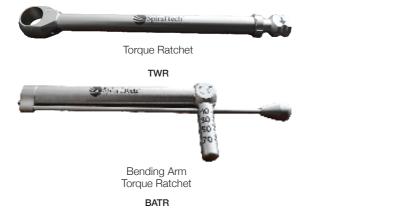
CDNP218

CDRP218

### OTHER TOOLS

HND118

.No



#### Visit us www.spiraltech.com

Hand Wrench Hex

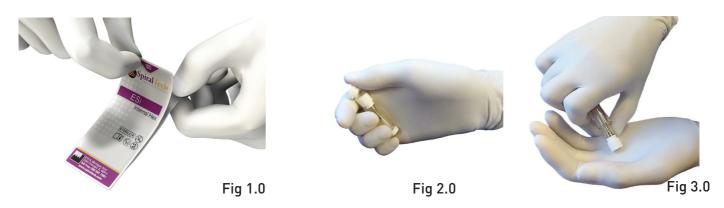
TWRCHT

# Instructions for Surgical Procedure .....

### The following are instructions for usage of straight or angled abutment. PLEASE READ THIS MANUAL THOROUGHLY BEFORE STARTING

### 2.1 Opening the Implant Package

- STEP 1 Open the blister package (Fig 1.0) and remove the outer plastic tube. The blister ensures the sterility of your SpiralTech implant. DO NOT open the blister until immediately prior to implant placement.
- STEP 2 Snap off the outer tube colored cap (Fig 2.0).
- STEP 3 Obtain the inner titanium barrel or the plastic tube. All SpiralTech implants are packed in double packaging for protection and sterility (Fig 3.0).



### **IMPORTANT**

To maintain sterile conditions, SpiralTech implants SHOULD NOT BE taken out of the inner vial until ready to be placed into a prepared implant bed site.

## 2.2. Method of Placement

After the gingiva has been opened and the implant bone bed site has been prepared with succes-

### Instruction For Use: Plastic Tube With Carrier Option

- a. Remove implant with carrier from the inner plastic tube and snap away white cover. (Fig 8.0)
- b. Place implant with carrier into prepped osteotomy and manually rotate clockwise until stability is developed.

### Two Options For Final Implant Positioning -

Ratchet Option

1a. Place ratchet (set at 35 NF) with ratchet mount in implant and rotate clockwise (Fig 5.0)

#### **IMPORTANT**

While rotating ratchet clockwise, apply vertical pressure with your other hand to activate the knife-edged apical threads of the implant to allow smooth penetration 1b. Remove carrier by pulling up and out.

Ib. Remove carrier by pulling up and out.

1b. Remove carrier by pulling up and out (Fig 5.0)

1a. Place ratchet (set at 45 NF) with ratchet mount in implant and rotate clockwise (Fig 5.0)

#### **IMPORTANT**

While rotating ratchet clockwise, apply vertical pressure with your other hand to activate the knife-edged apical threads of the implant to allow smooth penetration

1b. Remove carrier by pulling up and out (Fig 6.0)

#### Handpiece Driver Option -

2. Use of handpiece (Fig 7.0). Set the motor to 50RPM and 45NF and activate motor until the implant reaches 0.5mm subcrestal level.

#### **IMPORTANT**

the

# While rotating ratchet clockwise, apply vertical pressure with your other hand to activate the knife-edged apical threads of the implant to allow smooth penetration



#### Instructions For Use: Titanium Tube Packaging

a. Gently remove the white plastic cap from the titanium barrel (Fig 8.0).

#### **<u>CAUTION</u>**: The cover screw is stored in either the white cap or the base of the titanium barrel

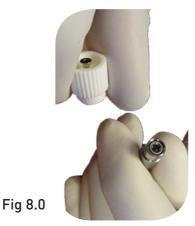
b. Set motor to 50RPM and 35NF

c. Place the implant motor mount into the handpiece and use it to remove the implant from barrel. Confirm that the motor mount is engaged into the implant (Fig 9.0).

# d. Place implant in osteotomy area at 35NF and rotate implant into its position (Fig 7.0). position implant into osteotomy prepped area, IMPORTANT make sure to apply vertical pressure to activate the knife-edged thread of the implant for smooth penetration.

e. You can rotate the last few turns by using the ratchet and the ratchet mount at 35NF. It is recommended to rotate the implant until it is 0.5mm below crestal height (Fig 5.0).







#### **IMPORTANT**

3.5mm implants should be placed 0.5mm below crestal level of the bone. All implants should leave a minimum of 1.5mm for both buccal and lingual bone thickness. Allow 1.5mm distance between root and implant, and 3.0mm distance between two implants.

Fig 9.0

### PLEASE

That above 80Ncm the implant carrier will deform to protect from bone fracture. Your SpiralTech implant carrier tip has been specifically designed to release the implant with minimal "pull off" pressure.

## 2.3. Soft Tissue Management Enclosure

After implantation, the implant is closed, hand-tightened—with an SpiralTech cover screw, healing cap or healing abutment to protect the implant. The surgeon can choose between:

OPTION 1 Submucosal Healing OPTION 2 Transmucosal Healing

The surgeon has all options available for soft tissue management made possible through a set of secondary healing components.

#### OPTION 1 Submucosal Healing Primary Closure (with Cover Screw)

- a. Irrigate the area, confirm gingival crest are parallel to each other, permitting primary closure.
- b. Place cover screws and sutures. Note that Submucosal Healing is suggested in esthetic indications and for implantations with simultaneous guided bone restoration (GBR) or membrane technique.
- c. A second surgical procedure is required for uncovering the implant and insertion of the desired secondary component.



#### PLEASE NOTE:

When the floor of the bone cavity is reached, there is a palpable increase in resistance. Avoid vertical position corrections using reverse (counter-clockwise) rotations. This can cause loosening of the transfer part and may lead to a decrease in primary stability.

#### OPTION 2 Transmucosal (Close With Healing Cap)

- a. The non-epithelialized side of the flap should be approximated to the implant neck. Irrigate over and place healing abutment. Prepare gingiva crest to be semi-circular on each side in order of closure around healing abutment.
- b. If necessary, this step must be combined with a gingivectomy. The wound margins are closed with atraumatic suture material, and the sutures must not be tied too tightly.
- c. One relieving suture is placed on either side of the closure healing cap so that the wound margins are approximated without tension.
- Use of non-absorbable suture material is recommended. (e.g. Polyamide or Teflon)
  The sutures are removed after 7 to 10 days.
- A postoperative X-ray is recommended.

Healing Abutment with Tissue Closure



#### CAUTION:

Insertion torque should not exceed 30Ncm. To prevent bone compression, perform a correct implant bed preparation. (As shown in pages 10 to 13) When reaching final drilling sequence and placement of implant in bone, use torque force; if you pass this range please evaluation depth and diameter of bone preparation and correct accordingly. SpiralTech implant carrier is designed to avoid higher torque than 65Ncm, should you cross that threshold it will not continue to turn the implant into the bone and carrier will collapse and the hex will strip and turn freely.

# Sterilization Parameters

#### 1. PEEK and Titanium Abutments

a. Sterilize the instruments by applying a gravity displacement process (according to [ISO 13060/ISO 17665]) under consideration of the respective country requirements. b. Autoclave (gravity displacement), at a temperature of 132° C (270° F).

- c. Full cycle time: 15 min.
- d. Drying time: minimum 15 min.
- 2. Zirconia Abutments
  - a. Steam sterilization: 135° C (275° F).
  - b. Full cycle time: 10 min.
  - c. Drying time: minimum 30 min.
- 3. Drills

a brush.

- a. Steam sterilization (gravity): 134° C (273° F)
- b. Full cycle time: 4 min.
- c. Drying time: minimum 10 min.





Check for debris blood clots or other Place all surgical instruments and drill particles on surgical instruments and bits in ultra sonic. drill bits. Then scrub instruments with



Rinse all instruments with water and place in surgical container.



Place container in surgical container and place box in sterilzation bag.



Place surgical box and follow the table recommendation.



# ONE OF OUR SUPERIOR PRODUCTS, ESi IMPLANT

Knife-edged thread to improve implant penetration

Rounded threads located in middle third reduce potential implant internal bone pressure

Multi-threaded system designed to replicate natural teeth

Fossa reduces implant stress, stores bone particles and enhances osseointegration

Conical or Hex connections

Implant crestal area contains micro-rings with crestal converging angle that reduce cortical / trabecular bone resorption especially in immediate placement



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