

REACTIVE 3.0

3.00 mm Ø



PRODUCT DATA SHEET

Designed to be exclusively used in the anterior portion. Suitable for immediate, early or late loading.

Original implant specially designed to meet the essential concepts in Osseointegration: "immobilization, fixation and primary stability".

The unique self-advancing / self-tapping thread design including wide trapezoidal threads, placed in a socket not larger than 2.0mm in diameter, creates a close implant-to-bone contact thus ensuring maximum primary stability. Implants are manufactured in Titanium alloy Grade 5 (66% more resistant than Titanium Grade 2).

REACTIVE 3.0 Implant Delivery

DIAMETER	LENGTHS (mm.)			
Ø 3.00 mm.	10	11.5	13	15

Sterilized by Gamma Radiation.

It is packed in double tamper-resistant container that preserves sterility and facilitates handling. Patient chart label included.

Includes Cover Screw.

THE IMPLANT IS DIVIDED INTO THREE SEGMENTS:

- Intraosseous segment (a): The diameter of the tip gradually narrows, ending in a semi-sharp end for easy insertion of the implant.
- Conical mid-segment (collar) (b): 1 mm in height with microturns. Treated surface for better positioning of the epithelial attachment and the biological width.

 Internal connection segment (c): 3.00 mm. narrow platform. Conical internal connection with slots. Odontit U.S. Patent: 5,195,892 (March 23, 1993).

Features a threaded cavity where the different prosthetic pieces are fixed. Available prosthetic solutions: Carvable temporary abutment in Peek, UCLA with a chrome-cobalt base, castable UCLA, Titanium 7 & 9mm straight abutment, 15° preangled abutment, 3 & 5 mm height healing abutments helping to shape the gingiva.



IMPORTANT: MAXIMUM APPROVED TORQUE FOR ALL PROSTHETIC ABUTMENTS: 15 cN

INSTRUMENTAL REQUIRED:



Odontit S. A. - Dir. Téc. - Rita Ceresole M.N.: 9043 / PM 798-1 www.odontit.com - info@odontit.com - Tel. (54 11) 4825-0221 Azcuénaga 1077 4°D / C1115AAE / C. A. de Bs. As. / Argentina Necochea 852 / 1158 / C. A. de Bs. As. / Argentina

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SURGICAL PROTOCOL:

- · Determine number and position of implants to be placed.
- Expose the crest of the bone through incision of soft tissue with a punch or small flap, according to anatomical characteristics.
- Begin with a 1.50 or 2.00mm-diameter lance drill (Catalog # FL15 or FL20) through the cortical bone and then some millimeters into the medullary tissue. Confirm previous diagnosis on bone density.
- In Class II and III bones (Lekhom and Zarb Classification), drill the socket using the 2.0mm twist drill (Catalog # EIDL20) throughout the length of the implant being placed.
- In Class I bones (Lekhom and Zarb Classification), begin with the sequence above, then use the 2.5mm twist drill (Catalog #: EIDL25) until reaching half of the implant length.
- After socket is finished, place the implant on the surgical socket, using the manual driver (Catalog #: AMTL) or implant driver (Catalog #: ACTL).
- Thread by hand or using the implant mount driver with a maximum torque of 30 cN. It must be operated at low RPM.

- Once the implant placement is finished, use the screwdriver (Catalog #: THDL48) to place, depending on the procedure: The cover screw, for two-stage surgeries. The healing abutment, for delayed loading. Or the temporary restoration using the Peek prosthetic abutment, for immediate loading in subocclusion.
- Approximate osseointegration times: two months for the jaw and three months for the maxilla.

CRITERIA FOR PATIENT SELECTION:

- · Healthy patients, suitable for surgery.
- Clinical, X-ray and computed-tomography studies, making of computed tomographic and surgical guides.
- Patents requiring treatment in the anterior portion and having little space.



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General considerations: For additional information, please refer to Odontit's Implant System's Manual, printed version, or view the electronic version visiting www.odontit.com

