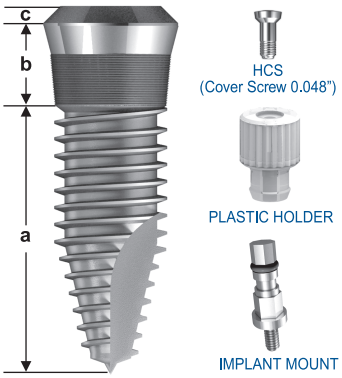
odontit
IMPLANT SYSTEMS

SWISSIMPLANT
4.00 mm Ø



PRODUCT DATA SHEET

J.J.G. Evolution Implant System (Patent pending).
Exclusive design for immediate, early or delayed loading.
Original implant specially designed to meet the essential concepts in osseointegration: "immobilization, fixation and primary stability".

The exclusive self-advancing / self-tapping thread design, placed in a small-sized socket, 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).

Swiss Implant Presentation

DIAMETERS	LENGTHS (mm.)			
Ø 4.00 mm.	10	11.5	13	15

Sterilized by Gamma Radiation.
Supplied in a double tamper-resistant container that preserves sterility and facilitates handling, patient chart label included. Implant pre-mounted on implant mount and cover screw included (Catalog #: ESCS).

THE IMPLANT IS DIVIDED INTO THREE SEGMENTS:

• **Intraosseous segment (a):** The diameter of the tip gradually narrows ending in a 1.3 mm sharp end for easy insertion of the implant.

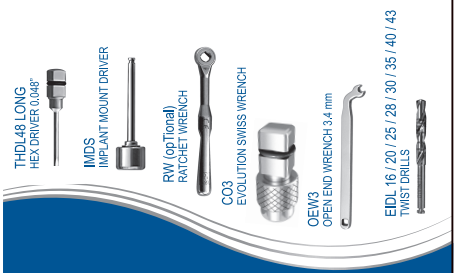
• **Conical mid-segment (collar) (b):** 2 mm in height. Smooth surface of 1.00 mm in height with microturns for better positioning of the epithelial attachment and the biological width.

• **Prosthetic segment (c):** On the upper coronary plane, there is an 8-degree cavity where the chosen prosthetic abutment for each case is fixed. It is compatible with most internal morse cone systems (platform 4.8 mm).

CRITERIA FOR PATIENT SELECTION:

• Healthy patients, suitable for surgery.
• Clinical, X-ray and computed-tomography studies, making of computed tomographic and surgical guides.

SURGICAL INSTRUMENTATION REQUIRED:



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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 2.00mm-diameter spade drill or drill through the cortical bone and then some millimeters into the medullary tissue. Confirm previous diagnosis on bone density.
- Proceed with the usual sequence increasing gradually the drill diameters until the indicated diameters for each case according to Chart 2 are reached.
- This technique is an innovation in the need to make a small socket. The diameter of the used drills varies according to bone density as per the information on Chart 2.
- Drills must reach a depth corresponding to the measures listed in Chart 3. According to this, the turns and the apical segment of the implant are inserted into intact bone, ensuring "immobilization, fixation, and primary stability".

CHART N° 1: Final diameter values of drills according to bone density (Lekhom and Zarb Classification).

IMPLANT & DIAMETER	CLASS 1	CLASS 2	CLASS 3	CLASS 4
Swissimplant 4.00 mm	3.50 mm	3.50 mm	3.00 mm	3.00 mm

CHART N° 2: Depth of sockets according to the length of the implants.

- 10.00 mm. implants ——— 7.00 mm.
- 11.50 mm. implants ——— 8.50 mm.
- 13.00 mm. implants ——— 10.00 mm.
- 15.00 mm. implants ——— 12.00 mm.

- After drilling is finished, position implant on the socket using a plastic holder.
- First thread by hand or placing the wrench in the implant mount driver (Catalog #: IMDS (short) or IMDL (long)). It must be operated at low RPM. If resistance offered by bone tissue stops manual or implant mount driver operation, use the ratchet wrench (Catalog #: RW) or the open end wrench (Catalog #: OEW4) until complete implant insertion is achieved. The Evolution Swiss Wrench (Catalog #: CO3) is used.
- Once the implant placement is finished, remove the implant mount using a 3.4 wrench (Catalog #: OEW3) and, depending if it is a one or two-stage surgery, a healing abutment is threaded over the implant to a height matching the gingival thickness or a cover screw (Catalog #: ESCS) included in the original container.
- In the case of immediate loading, the prosthetic abutment is threaded on the implant chosen.
- The provisional plastic prostheses must be placed in subocclusion without any side contact.
- Cement provisional prostheses with permanent cement and avoid removing them during the osseointegration process. For bruxer patients, make a miorelaxation plate.
- The osseointegration process lasts about two months for the jaw and about three months for the maxilla.
- Once the required time has passed, remove the provisional prosthesis. Make the final prosthesis following the usual methods and using the chosen materials.

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

Do not reuse
See product data sheet
STERILE R Sterilized by Gamma radiation
Do not resterilize
Do not use if container is damaged
℞ only Sale restricted to health professionals

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