

DENTAL IMPLANT 101

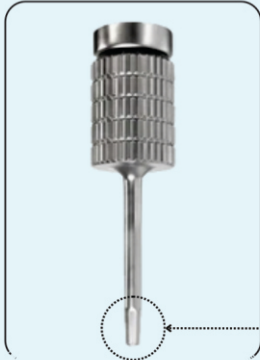


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Prosthetic Driver



This is a prosthetic driver.
It is used to screw stuff
onto the implant.

*It has a tip with different
shapes for different systems.*

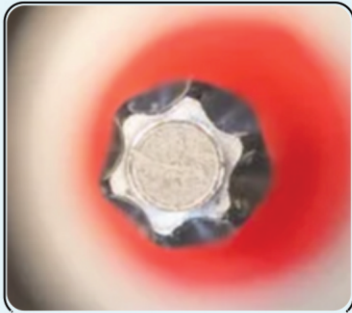


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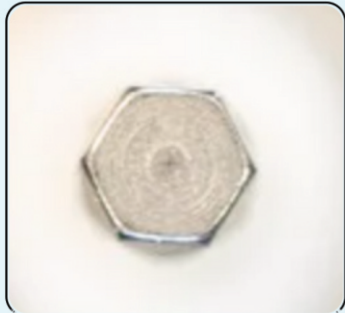
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Tips are not the same.



Some are little stars.



Others are hexagons.

*Oftentimes offices have their "most often used" drivers.
Find out which one that is for your office.*



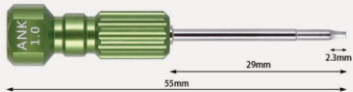
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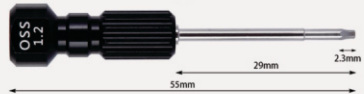
ANK 1.0

fit Ankylos



OSS 1.2

fit 3I, OSS, MEGA, UFIT,
NEO, DAT



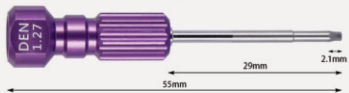
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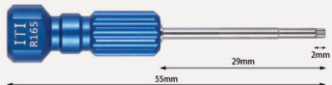
DEN 1.27

fit DEN, BEGO, ZIMMER,
AST, KJ, COR, ADIN,
AB



ITI R165

fit ITI



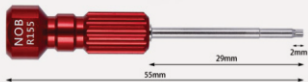
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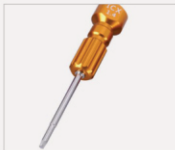
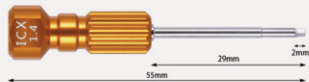
NOB R155

fit NOB



ICX 1.4

fit ICX



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Things we screw onto the implant

(at the time of surgery)

Healing Abutment



They help the gums heal in a certain shape. They come in various sizes.

Cover Screw



They help the gums heal in a certain shape. They come in various sizes.



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Things we screw onto the implant

(when taking impressions)

Scan Body



Used to scan the implant

Impression Copings



Open Tray

A hole is made in tray.



Closed Tray

No hole made in tray.



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Things we screw onto the implant

(During Delivery)

Screw Retained Crown



Abutment is already attached to crown.

Custom Abutment



Abutment provided separate from crown



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Pilot Drill

This is used for starting the implant prep.



*Specifically this one is called the
LANCE pilot drill.*



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Prep Drills



These drills are used for making the implant prep. They are to be used with *sterile saline.*



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Surgery Set Up

Lots of stuff to prepare ahead of time. Here's what we're going to need:

- ☐ Consents Signed
- ☐ Surgical Instruments
- ☐ Motor, Handpiece & Saline (*test the saline flow*)
- ☐ Surgical Kit on sterile surgical drape
- ☐ Implants (*doctor to suggest a couple sizes*)
- ☐ Healing Abutment
- ☐ Pt X Ray (*Have it open*)



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Surgery Set Up



Suture Scissors

15 Blade



12 Blade



Blade holder

Buser Periosteal



Molt 9 Periosteal elevator



Curette



Minnesota Retractor

Needleholders



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Implant Motor

Saline Pouch

The motor set up consists of a couple different parts.

Its important to keep those parts organized.

This is not a regular handpiece.

Don't mix it up with the others!

The Handpiece



Motor itself



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Documentation

The important things to write in the notes are:

Implant Brand

Type

Platform

Ref #

Lot #

Systems have it written somewhere on the packaging.



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Restorative Set Up

Impressions



Drill bit

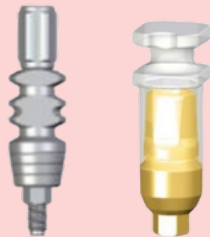


Scan body



or

Impression coping



They often click together



Manual Knob



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Restorative Set Up



Driver bit



Restorative Wrench



High Speed Handpiece



Adjustment bur



Polishing tool

Teflon Tape



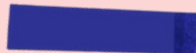
Cotton Pellets



or



Composite



Articulating Paper

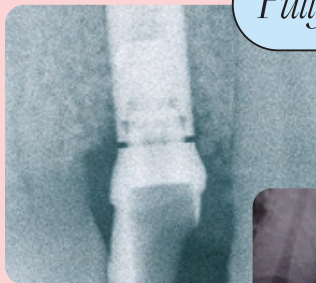


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Fully Seated?



Doc might ask you to put an abutment or scan body or something else on the implant.

It is important that the piece “seats” properly.

This is an example of a part that is not properly seated. Often due to tissue impingement.



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How to Clean

Keeping these clean, organized, and rust free is key.



- Do not place in an ultrasonic bath
- Brush under running water
- Let it dry fully.
- Autoclave: Do not exceed 135 C/275 F.
Do not autoclave >20min.

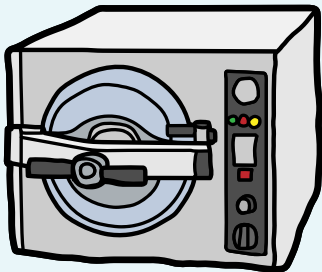


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Sterile vs Clean



Wiping a countertop with disinfectant makes it clean and reduces germs, but it may still have some left.

Sterile means 100% free of all germs, bacteria, and viruses. Autoclaving sterilizes instruments, making them safe for surgical procedures. Wiping instruments does not make them sterile.



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Be Mindful of Dirty Gloves



It is not appropriate to stick a dirty glove into a drawer to reach for an instrument. This is why setting up ahead of time is crucial.



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Everything in its Place



As doc uses the bits in the surgical kit, make sure each bit goes back to exactly where it is supposed to go!

This will ensure nothing is lost. **It is SUPER important we don't lose these bits!**



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Red Flags

In general, it is not recommended to proceed with implant surgery for patients who have had radiation therapy in the area, or are taking IV bisphosphonates. Even oral bisphosphonates may be a contraindication at your practice.

It is an essential part of your job to listen for any clues that might point to this.

Be sure to let doc know.



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Red Flag Medications

This list is not comprehensive. These are just some of the common ones:

- Fosamax
- Aledronate
- Zolendronic acid
- Reclast
- Zometa
- Didronel
- Boniva
- Aclasta
- Actonel
- Aredua
- Binosto
- Skelid
- Denosumab
- Xgeva
- Prolia
- Atelvia
- Sunitnib
- Avastin
- Prednisone
- Warfarin
- Plavix
- Xarelto
- Eliquis
- Methotrexate



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Antibiotics

Amoxicillin

- 500mg tabs
- Disp: 18 tabs
- 2g 1 hour prior to surgery
- 1g 6 hours after initial dose
- 1 tab tid for 3 days



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Antibiotics

Clindamycin

- 300 mg tabs
- Disp: 12 tabs
- Take 2 tabs 1 hour prior to procedure
- Take 1 tab 6 hours after
- Take 1 tab tid for 3 days



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Post Op Care

Slight bleeding is normal for the first 24 hours. Bite gently on gauze to control it, replacing it every 30-45 minutes.

Over-the-counter options like ibuprofen (Advil) or acetaminophen (Tylenol) can also be used if needed.

Do not brush or floss the surgical area for the first few days.

Gently rinse your mouth with a prescribed mouthwash or warm salt water starting the day after surgery (1 tsp of salt in a glass of warm water) 3-4 times a day.

Stick to soft foods (yogurt, soup, mashed potatoes) for the first few days.

Refrain from smoking and drinking alcohol for at least 72 hours, as both can delay healing.

Rest and avoid strenuous physical activity for at least 24-48 hours post-surgery to promote healing.



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Insurance Codes

D6010: Surgical placement of the implant body

D6057: Custom fabricated abutment, including placement

D6065: Implant-supported porcelain or ceramic crown

D6104: Bone Graft at time of Implant placement

D6100: Implant removal, by report



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msdi Surgical Kit

Ref: SK

DRLMK - Marking drill Ø1.9

DRPL - Driver ratchet
prosthetics long 15mm

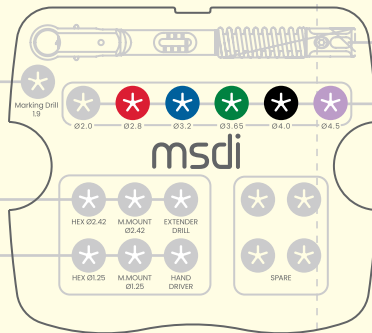
DMPL - Driver Motor
Prosthetics long

DML - Driver manual long
15mm

DRIML - Driver ratchet
implants long 15mm

DMIL - Drivers Motor
implants long

DRLEX - Drill Extender



RTAQ - Torque Wrench

DRL20 - Drill Ø2.0 L16

DRL28 - Drill Ø2.8 L16

DRL32 - Drill Ø3.2 L16

DRL365 - Drill Ø3.65 L16

DRL40 - Drill Ø4.0 L16

DRL45 - Drill Ø4.5 L16



Please scan for more
information for use



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msdi Drilling Protocol

- Throughout entire implants length
- In cases of a hard bone drill through the cortical layer

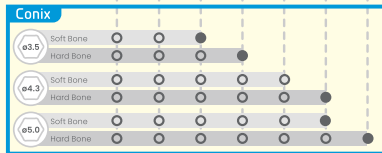
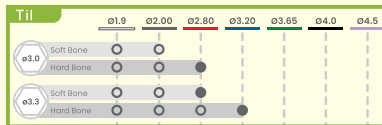
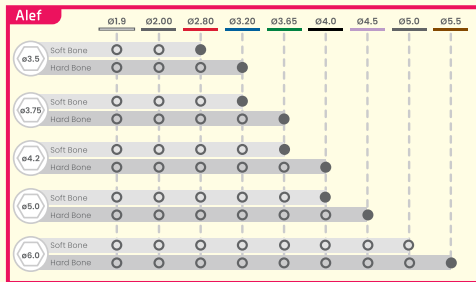
-
- * All measurements are in mm
 - ** The recommended drill protocol procedure should not replace the dentist's / surgeon's judgment



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C-Sailor S1

Dental Implantation System

COXO®



C-Sailor S1



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Different drilling protocols offer flexibility to adapt the implant bed preparation to the individual bone type and anatomical situation.



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BONE		DENSITY
D1	>1250 HU	Dense cortical bone
D2	850-1250 HU	Thick dense to porous cortical bone on crest and coarse trabecular bone within
D3	350-850 HU	Thin porous cortical bone on crest and fine trabecular bone within
D4	150-350 HU	Fine trabecular bone
D5	<150 HU	Immature, non-mineralized bone



THE DRILLING PROCESS SHOULD BE
ATRAUMATIC, SEQUENTIAL, AND PROGRESSIVE,



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A SMALL ROUND BUR IS USED TO MARK THE
IMPLANT SITES



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A 2MM TWIST DRILL IS USED NEXT TO
ESTABLISH THE DEPTH AND ALIGN THEN LONG
AXIS OF THE IMPLANT RECIPIENT SITE.



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NEXT STEP IS TO USE SERIES OF DRILL
SYSTEMICALLY TO WIDEN THE SIZE TO
ACCOMMODATE THE SELECTED SIZE OF THE
IMPLANTS.



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ALL YOU NEED TO GET STARTED

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