

### Behind the Teetanium® Prelude

Medibrex ensures the teetanium users the quality and the innovation they demand to effectuate the solutions of the most complex issues they face with clinically proven procedures.

Medibrex has the power to make long-term investments in products' development, steadily expand its distribution network and continuously maintain high volumes of inventory to provide its customers with adequate and customized service that is rarely matched in the medical industry.

Medibrex aims to deliver to the healthcare community products that enhance the quality of life and provide functional and financial value. We'll provide more broad-based solutions that address causes, not just symptoms.

Medibrex products will be in your neighborhood and all around the world. We will continue to provide the teetanium patients with the care they deserve regardless of how hard the industry challenges get. Medibrex team of experts follows up with clinicians who work on the front line to further understand the barriers they encounter and meet their needs with evidence-based solutions.

To achieve the dual goals of enhanced outcomes with saved time and cost, we study the critical clinical issues in order to design and test practical and adequate solutions.





## System Overview

# The teetanium® characteristics:

The teetanium® Dental Implant System presents two implant body types. A cylindrical body shape named «Straight», and a tapered body shape named «Conical». Both are bone level implant that can be placed with one simple surgical kit. Teetanium® implants were subject to advanced researches by the Medibrex team of experts who deployed their expertise to optimize the fulfillment of the basic biological standards in implant dentistry. Teetanium® implants biomechanical design helps to attain the most favorable prime stability with an impeccable safeguarding of the crestal bone and a preservation of neighboring soft tissues. Teetanium® implants are suitable for all surgical conditions. Although, they support general and particular esthetic indications. The implant's treated rough surface spreads to the bottom of the implant where the platform is switched inwards. Same internal connection in both implants. A simple color coding for drills and implants.

# Straight Implant

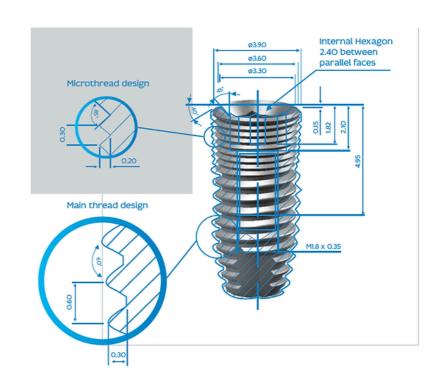
Available in 5 diameters:

Ø3,3mm, Ø3,7mm, Ø4,2mm, Ø4,9mm, and Ø5,7mm.

Ref. Implant

Diameter

Tis33085 Tis33100 Tis33115 Tis33130 Tis33145	3.3 x 8,5mm 3.3 x 10,0mm 3.3 x 11,5mm 3.3 x 13,0mm 3.3 x 14,5mm
Tis37085 Tis37100 Tis37115 Tis37130 Tis37145 Tis37160	3.7 x 8,5mm 3.7 x 10,0mm 3.7 x 11,5mm 3.7 x 13,0mm 3.7 x 14,5mm 3.7 x 16,0mm
Tis42085 Tis42100 Tis42115 Tis42130 Tis42145 Tis42160	4.2 x 8,50mm 4.2 x 10,0mm 4.2 x 11,5mm 4.2 x 13,0mm 4.2 x 14,5mm 4.2 x 16,0mm
Tis49085 Tis49100 Tis49115 Tis49130	4.9 x 8,50mm 4.9 x 10,0mm 4.9 x 11,5mm 4.9 x 13,0mm
Tis57085 Tis57100 Tis57115 Tis57130	5.7 x 8,50mm 5.7 x 10,0mm 5.7 x 11,5mm 5.7 x 13,0mm

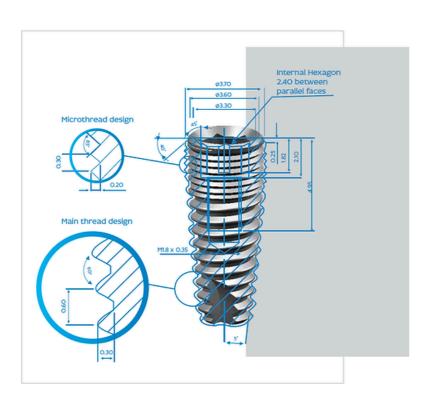


# Conical Implant

Available in 4 diameters:

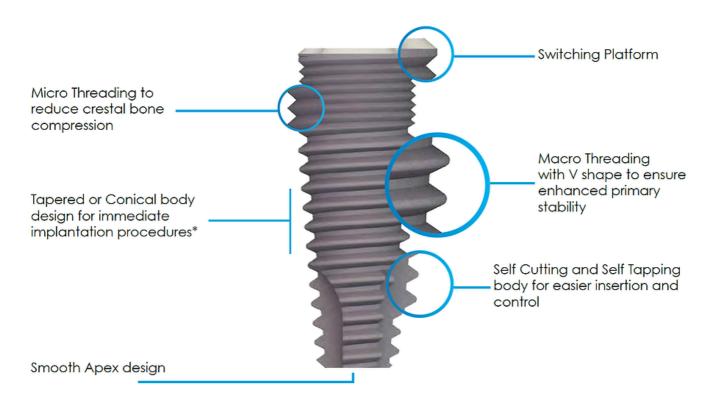
Ø3,7mm, Ø4,2mm, Ø4,9mm, and Ø5,7mm.

Conical teetanium® functional design makes this implant principally appropriate for immediate or quick implantation after loss or removal of natural teeth. Tapered teetanium® implant assures, through its wide dimensions range, an incomparable primary stability in all bone types.



Ref. Implant	Diameter
Tic37085 Tic37100 Tic37115 Tic37130 Tic37145 Tic37160	3.7 x 8,5mm 3.7 x 10,0mm 3.7 x 11,5mm 3.7 x 13,0mm 3.7 x 14,5mm 3.7 x 16,0mm
Tis42085	4.2 x 8,50mm
Tis42100	4.2 x 10,0mm
Tis42115	4.2 x 11,5mm
Tis42130	4.2 x 13,0mm
Tis42145	4.2 x 14,5mm
Tis42160	4.2 x 16,0mm
Tis49085	4.9 x 8,50mm
Tis49100	4.9 x 10,0mm
Tis49115	4.9 x 11,5mm
Tis49130	4.9 x 13,0mm
Tis <i>57</i> 085	5.7 x 8,50mm
Tis <i>57</i> 100	5.7 x 10,0mm

# Teetanium® Body Design



# Indications & Surgery Planning

Teetanium® dental implants are appropriate for the usage in oral bone. They can be used similarly in the upper and lower jaw to restore either functional or esthetic disorders of completely and partially edentulous patients excluding the cases where specific contraindications and restrictions are existent. Teetanium® dental implants are suitable, in the range of indications for direct or prompt implantation succeeding a loss or removal of natural teeth. The teetanium® implants will generate a trustful primary stability and accept immediate restoration in unique or multiple teeth spaces. When an immediate prosthetic is planned, the appropriate load should be considered according to the covered edentulous space. In the case of two or more neighboring implants they must be joined together by their restoration. In the case of total edentulous situation, 4 implants or more need to be joined together. Single crowns, bridges and partial or full dentures should be attached to the implants by the teetanium® compatible components (original abutments) as following:

### Ø3.3 straight implant:

At least  $5.5 \pm 0.5$  mm of bone width and a mínimum of  $5.5 \pm 0.5$  mm distance between the neighboring teeth are required for the placement of one implant. (Placing the largest possible implant diameter is commonly required.  $\emptyset 3.3$ mm implants are considered as small diameters. They are exclusively suitable for narrow interdental spaces and bone widths. It is advised to avoid replacing molars with small diameter implants and limit their use to conditions with low and moderated mechanical loads).

### Ø3.6 straight and conical implants:

At least  $6.0 \pm 0.5$  mm of bone width and a mínimum of  $6.0 \pm 0.5$  mm distance between the neighboring teeth are required for the placement of one implant

### Ø4.2 straight and conical implants:

At least  $6.5 \pm 0.5$  mm of bone width and a minimum of  $6.5 \pm 0.5$  mm distance between the neighboring teeth are required for the placement of one implant.

### Ø4.9 straight and conical implants:

At least  $7.0 \pm 0.5$  mm of bone width and a minimum of  $7.0 \pm 0.5$  mm distance between the neighboring teeth are required for the placement of one implant.

### Ø5.7 straight and conical implants:

At least  $8.0 \pm 0.5$  mm of bone width and a mínimum of  $8.0 \pm 0.5$  mm distance between the neighboring teeth are required for the placement of one implant.

# Implant Position

The implant position can be viewed in three dimensions: Mesio-distal – Oro-facial – Corono-apical.

### 1. Mesio-distal implant position

The bone status and convenience at this level has an imperative influence on selecting the implant diameter besides the inter-implant spaces when more implants are placed. The implant shoulder-should be at least 1mm distant from an adjacent tooth and 3mm from a neighboring implant to ease the surgical and prosthetic procedures and permit an adequate hygiene. An implant placed to restore a single tooth must be centered in the gap. The space between the adjacent teeth, at bone level, should be at least 2mm wider than the implant diameter.

### 2. Oro-facial implant position

The bone thickness should be at least 2 mm wider than the implant diameter. The bone facial and lingual walls should at least have 1 mm thickness in order to maintain a steady physiological condition of the hard and soft bordering tissues. When these conditions are not satisfied and the bone wall is thicker that 1 mm or totally missing a ridge augmentation is designated. The bone augmentation procedure is delicate and requires a sufficient experience from the operating dental surgeon.

### 3. Corono-apical implant position

Teetanium® bone level dental implants tolerate different coronoapical implant positioning. Whether in the anterior area, where esthetic considerations are imperative, or in the posterior zone as well. For esthetic reasons, it's indicated to place the implant few millimeters (3±mm) deeper from the eventual gingival margin.







### General Contraindications

### Relative Contraindications:

Age, tobacco abuse, pregnancy, bone deficiency, alcoholism, drug consumption, lack of oral hygiene, periodontal pathologies, previously irradiated bone, anticoagulation drugs/hemorrhagic diatheses, bruxism, para-functional habits, unfavorable anatomic bone conditions, temporo-mandibular joint disorders, treatable pathologic diseases of the jaw and changes in the oral mucosa.

Absolute contraindications: Serious Endocrine medical problems (decompensated diabetes mellitus, hyperparathyroidism), bone metabolism disturbances, uncontrolled bleeding disorders, inadequate wound healing capacity that contraindicate execution of surgical procedures, cardiovascular diseases, infectious diseases, treatments with radiotherapy, corticosteroids and anticoagulants, epilepsy and psychological factors.

### Local contraindications:

Insufficient bone volume, poor bone quality, remaining root leftovers, situations generating high loads over small diameters implants.

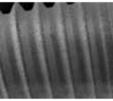
### Teetanium® Surface

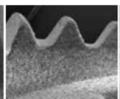
The teetanium® integross® rough surface has a clinical proven success not only for an optimum osseointegration, but also the development of a biological sealing. The treatment of integross® starts with a sandblasting technique that generates an increased roughness on the titanium surface to favor its osseointegration. This is followed by double acid-etching that superposes another roughness modification promoting cell differentiation and leading to augmented expression of osteoblasts. The surface roughness of teetanium® implants is within the range of 0.8 to 1.6µm.

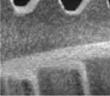
### Integross® Surface by SEM:

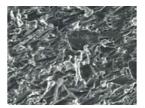
We have made tests to check the adequacy of the surface at the University of Barcelona. The following pictures represent different zooms of the surface implant. This study has been made with scanning electron microscopy (SEM).











the thread the Self-tapping part

### Integross® Surface

The Biological research behind the Integross® surface aimed to attain a reliable and guaranteed clinical success. Increased implant surface. Macroporosity, microporosity, nanoporosity.

• This facilitates adhesion and fixation of initial proteins, thereby favoring excellent blood clot stability and surface biological preparation.

- This facilitates cell proliferation and maturation.
- This improves extracellular matrix stability, bone repair function, mineralization, and new bone formation.
- This reduces residual tensions. Thickness increase of the Titanium Oxide (TiO2) surface:
- This minimizes the release of metallic ions.
- This lowers the likelihood of bonds with unwanted surface elements thanks to its higher saturation of oxygen/titanium bonds (stoichiometric TiO2).

Biological sealing:

• This leads to greater wettability.

### Bone mimicry:

• Morphology similar to the trabecular bone.

During the bone recovery and adhesion process, Integross® improves the response in:

- Bone repair: Integross® accelerates the setting preparation process for bone repair.
- Cellular function: Integross® increases matrix stability, thereby favoring cellular function and bone genesis.



Recent studies confirm that connection stability and a diameter shorter than the prosthetic area with respect to the implant platform will more effectively preserve the mucosa and peri-implant tissue integrity. What affects the maintenance of peri-implant tissues is the union of the hemi desmosomes to the implant's untreated area. Hemi desmosomes in the connective tissue effectively bind to the

titanium surface, since blood clots were produced and the biological healing mechanism was activated. During the load, whether immediate or delayed, this union will not be disrupted again because we work above the epithelium junction. The biological seal remains unaltered. This means that the mucosal height, essential for aesthetics, will remain stable over time,

even in compromised patients.

### The Teetanium® Accessories



### Teetanium® Connection



The teetanium® internal hexagon and cone connection is the design of choice for secure mechanical locking of prosthetic parts. All the teetanium® conical implants and all the teetanium® straight implants, except the Ø3,3mm sizes, share the same platform dimension. The adequate friction of the teetanium® connection, prevents any abutment loosening in all circumstances and presents enormous enhanced functionality compared to traditional external connections.

# Prosthetic Components & Tools

Teetanium implants are complemented by a range of standard and custom prosthetic components (abutments), which connect the implant to the crown of the replacement tooth. Medibrex supplies the corresponding precision instruments and handling components.

### Advantages

- All abutments and accessories fits all implants diameters only the 3.3 implant Ø has some different accessories dimensions to secure the resistance of the connection.
- All abutment bodies have highly precise end design. In addition to the stable and rotation-resistant internal hexagon connection, exceptional transmission of energy and torque is possible thanks to the cone geometry.
- The connection conical sides are loaded only when the abutment is placed. They are not engaged by the healing abutments or impression-taking accessories.



### Cover Screw

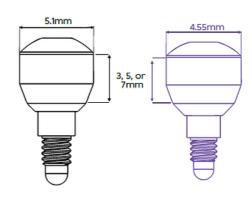
The purpose of the Cover Screw is to close the implant connection during the healing period after the implant placement. It is included in the implant holster next to the implant. The Cover Screw is made of Titanium grade 5



### Healing Abutment

The purpose of the Healing Abutment is to guide the healing of the soft tissue to conform the shape in the mucosa where the definite restoration will be placed. The Healing Abutment protects the implant connection during the healing phase. The Healing Abutment is made of Titanium grade 5.

Description	Reference
Healing Abutment Ø3.3 x 3mm	T.000
Healing Abutment Ø3.3 x 5mm	T.001
Healing Abutment Ø3.3 x 7mm	T.002
Healing Abutment Ø3.7/4.2/4.9/5.7 x 3mm	T.003
Healing Abutment Ø3.7/4.2/4.9/5.7 x 5mm	T.004
Healing Abutment Ø3.7/4.2/4.9/5.7 x 7mm	T.005

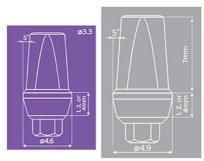


# Straight Drillable Abutment

The purpose of the Abutment Post is to function as a crown support, once it is fixed with a screw at the implant. This crown is fixed to the abutment post by a cement union. The shoulder of the abutment post allows saving high heights of soft tissue, because with a height of 1, 2 and 4mm it can raise the point of retention of the reconstruction.

The Abutment Post is made of Titanium grade 5.

Description	Reference
Abutment Post Ø3,3 x 1 mm	T.031
Abutment Post Ø3,3 x 2mm	T.032
Abutment Post Ø3,3 x 4mm	T.033
Abutment Post Ø3,7/4,2/4,9/5,7 x 1mm	T.034
Abutment Post Ø3,7/4,2/4,9/5,7 x 2mm	T.035
Abutment Post Ø3,7/4,2/4,9/5,7 x 4mm	T.036





### Screw Abutment Post

The purpose of the Screw Abutment Post is to serve as a fixation element between the implant and the crown. The Screw Abutment Post is made of Titanium grade 5.

Description	Reference
Screw Abutment Post Ø3,3/3,7/4,2/4,9/5,7	T.037

# Angled Abutment

The purpose of the Angled Abutment is to be used as an intermediate structural component between the teetanium implant and the crown. The Angled Abutment is made of Titanium grade 5.

Description	Reference
Angled Abutment 25° Ø3,3/3,7/4,2	T.041
Angled Abutment 15° Ø3,3/3,7/4,2	T.042



# Implant Analog

The purpose of the Implant Analog is to reproduce the position of the implants in biological means to a working model for laboratory simulating the oral cavity. The connection of this analog is exactly as the implant.

The Implant Analog is made of Titanium grade 5.

Description	Reference	
Implant Analog Ø3,3	T.010	
Implant Analog Ø3,7	T.011	
Implant Analog Ø4,2	T.012	-
Implant Analog Ø4,9	T.013	
Implant Analog Ø5,7	T.014	



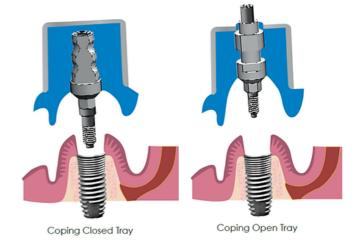
# Coping Open / Closed Tray (Transfers)

The purpose of the Direct Implant Coping is to make the transfer position of teetanium implants in biological means to a working model for laboratory simulating the oral cavity.

The Direct Implant Coping is made of Titanium grade 5.

Description	Reference
Coping Closed Tray Ø3,3/3,7/4,2/4,9/5,7	T.006
Coping Open Tray Ø3,3/3,7/4,2/4,9/5,7	T.007



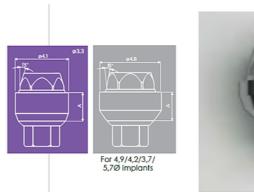


## Screwed Abutment

The purpose of the Screwed Abutment is to be used as an intermediate structural component between the implant and the crown in screwed estarations

The Screwed Abutment is made of Titanium grade 5.

Description	Reference
Screwed Abutment Ø3.3 x 1 mm	T.015
Screwed Abutment Ø3.3 x 2mm	T.016
Screwed Abutment Ø3.3 x 4mm	T.017
Screwed Abutment Ø5.7/4.9/4.2/3.7 x 1 mm	T.018
Screwed Abutment Ø3.7/4.2/4.9/5.7 x 2mm	T.019
Screwed Abutment Ø3.7/4.2/4.9/5.7 x 4mm	T.020



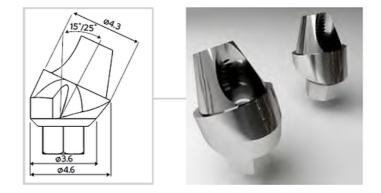


# Angled Screwed Abutment

The purpose of the Screwed Abutment is to be used as an intermediate structural component between the teetanium implant and the crown.

The Screwed Angled Abutment is made of Titanium grade 5.

Description	Reference
Angled Screwed Abutment 25° Ø3,3/3,7/4,2	T.038
Angled Screwed Abutment 15° Ø3,3/3,7/4,2	T.039



# Screw Angled Abutment

Purpose The purpose of the Screw Angled Abutment is to serve as a fixation element between the implant and the crown.

Description	Reference
Screw Angled Abutment 15°/25°	T.040



# Non Hexed Coping Open Tray Abutment

The purpose of the Non Hexed Coping Open Tray Abutment is to make the transference of the position of multiple teetanium implants with abutments in biological means to a working model for laboratory simulating the oral cavity.

The Coping Open Tray Abutment is made of Titanium grade 5.

Description	Reference
Coping Closed Tray Ø3,3	T.008
Coping Open Tray Ø3,7/4,2/4,9/5,7	T.009

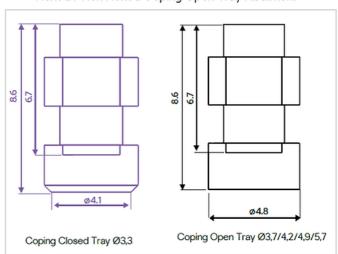
# Hexed Coping Open Tray Abutment

The purpose of the Hexed Coping Open Tray Abutment is to make the transference of the position of single teetanium implants with abutment in biological means to a working model for laboratory simulating the oral cavity.

The Hexed Coping Open Tray Abutment is made of Titanium grade 5.

Description	Reference
Hexed Coping Open Tray Abutment Ø3,3	T.051
Hexed Coping Open Tray Abutment Ø3,7/4,2/4,9/5,7	T.052

### Hexed / Non Hexed Coping Open Tray Abutment



# Coping Angled Abutment

The purpose of the Hexed Coping Open Tray Abutment is to make the transference of the position of single teetanium implants with abutment in biological means to a working model for laboratory simulating the oral cavity.

The Hexed Coping Open Tray Abutment is made of Titanium grade 5.

Description	Reference
Coping Angled Abutment 15° / 25°	T.045



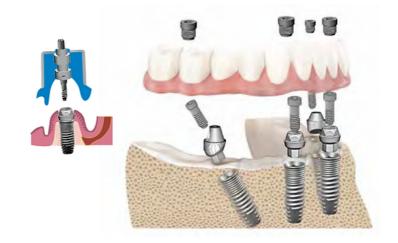
# Multiple Unit Solutions

Screwed Abutment and Angled Screwed Abutment are used as teetanium multiple abutments to realize a full-arch solution with only four or six implants.

This is suitable in cases with low bone availability. For patients with immediate loading indication, a fixed full-arch provisional prosthesis can be placed directly after the surgery.

This procedure is achieved by following the below steps:

- Place the convenient Srewed Abutment straight and/or angled and fix them to the implants.
- Choose the convenient Transfer Abutments and connect them to the respective abutments.
- The impression is made to transfer the position of the implants and abutments into a working model for laboratory simulating the oral cavity.
- The appropriate Castable Abutments are placed over the abutments and a wax model is build around it and used to construct the desired structure. Plastic and wax melt and are replaced by metal.



# Hexed / Non-Hexed Castable Cylinder

The purpose of the Castable Abutment is to reproduce the connection of the abutment. The LAB technician insert an Implant Analog of the implant in the same position of the implant, using the transfer. A screwed abutment is placed over the analog. A hexed or non-hexed castable cylinder is added, and fixed by a waxing screw and cut to the right height. Afterwards, a wax model is build around it and used to construct a cast. Plastic and wax melt and are replaced by metal. The Castable Cylinder Abutment is made of POM-Delrin.

Description Re	eference
Hexed Castable Cylinder for Abutment Ø3,3	T.021
Non Hexed Castable Cylinder for Abutment Ø3,3	T.022
Hexed Castable Cylinder for Abutment Ø3,7/4,2/4,9/5,7	T.023
Non Hexed Castable Cylinder for Abutment Ø3,7/4,2/4,9/	5,7 T.024



# Castable Angled Abutment

The purpose of the Castable Angled Abutment is to reproduce the cone connection of the Angled Abutment. So that, prosthetic don't have to reproduce it in wax. When the copy of the mouth is been created, the prosthetic insert an Implant Analog of the implant in the same position of the implant, using the transfer. The abutment is placed over the analog(check fig. 2 page 25), and cut by the prosthetic to the right height. Afterwards, a wax model is built round it, that is used to construct a cast. Plastic and wax melt and are replaced by titanium.

The Castable Angled Abutment is made of POM-Delrin.

Description	Reference
Castable Angled Abutment 15°/250	T.044



The purpose of the Waxing Screw is to help to maintain the channel inside the abutment for the Prosthetic Screw that will be placed after the casting.

The Waxing Screw is made of Titanium grade 5.

Description	Reference
Waxing Screw Ø3.3/3.7/4.2/4.9/5.7	T.025

# Waxing Angled Screw

The Waxing Angled Screw is the Waxing Screw of the Angled Screwed Abutment. The purpose of the Waxing Angled Screw is to help to maintain the channel inside the Angled Abutment for the Prosthetic Screw that will be placed after the casting. The Waxing Angled Screw is made of Titanium grade 5.

Description	Reference
Waxing Screw for Angled Abutment 15°/25°	T.046

### Prosthetic Screw

The purpose of the Prosthetic Screw is to serve as a fixation element between the implant and the crown.

The Prosthetic Screw is made of Titanium grade 5.

Description	Reference
Prosthetic Screw Ø3,3/3,7/4,2/4,9/5,7	T.026

### **Ball Abutment**

The purpose of the Ball Abutment is to function as a retention element of an overdenture, by means of an O-ring retention element inserted under the overdenture.

The Ball Abutment is made of Titanium grade 5.

Description	Reference
Ball Abutment Ø3,7/4,2 x 1mm	T.047
Ball Abutment Ø3,7/4,2 x 2mm	T.048
Ball Abutment Ø3,7/4,2 x 4mm	T.049
Ball Abutment Metal. Cap + O-ring	T.050









# Temporary Cap Hexed / Non-Hexed

The purpose of the family of components Temporary Cap is to serve as bases for the accomplishment of an immediate esthetical reconstruction on Teetanium Abutment. This reconstruction will have a retentive element: retention with the prosthetic screw. A Straight Screwed Abutment is placed over the implant. The Temporary Abutment is added and cut to the right height. Afterwords the suitable material is used to build the provisional crown around it. The Temporary Cap is made of Titanium grade 5.

Description Ref	ference
Temporary Cap Hexed for Abutment Ø3,3	T.027
Temporary Cap Non Hexed for Abutment Ø3,3	T.028
Temporary Cap Hexed for Abutment Ø3,7/4,2/4,9/5,7	T.029
Temporary Cap Non Hexed for Abutment Ø3,7/4,2/4,9/5,7	T.030

# Temporary Rotatory Cap

The purpose of the Temporary Rotatory Cap is to serve as bases for the accomplishment of an immediate esthetical reconstruction on Teetanium Angled Abutment. This reconstruction will have a retentive element: retention with the prosthetic screw. An Angled Screwed Abutment is placed over the implant. The Temporary Abutment is added and cut to the right height. Afterwards the suitable material is used to build the provisional crown around it. The Temporary Rotatory Cap is made of Titanium grade 5.

Description	Reference
Temporary Rotatory Cap 15°/25°	T.043



# Simple & Unique Kit

The purpose of the Surgical Box is to facilitate the location of the necessary tools so as to perform the surgical sequence, ensure a perfect organization, accessibility and handling of the instrumental, as well as protection during the transport after the disinfection and sterilization of instrumental and box.

The box is made of polyphenylsulfone PPSU and the grommets are made of Silicone.

Special, sharp and constantly irrigated instruments should be used when preparing the osseous bed. The specific surgical sequence for the insertion of each implant should be carried out as set forth in this surgical procedure, and at the speeds recommended therein. Otherwise, there may be excessive forces in the insertion of the implant-greater than 50 Ncm- exceeding the resistance of the bone and causing damage to the implant and its connection, cold soldering of the implant with the carrier, necrosis and bone fracture, etc.



# The teetanium® Surgical KIT

- Surgical Drills shared for both implant shapes in a single box
- 3 Depth indicators
- Screwdrivers: 2 manual drivers, 1 driver for contra-angle and driver for wrench
- First Surgical Drills with adjustable stoppers
- Short and long, manual and mechanical adapters
- Torque wrench for implant manual insertion and prosthetic torque application



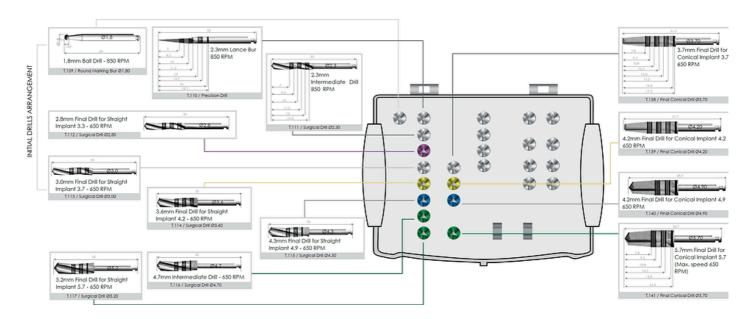




# The Surgery

Manufactured with heavy-duty material, Teetanium® drills are definite to each implant dimension. Their leading-edge geometry guarantees an exceptional cutting performance. The complete arrangement of drills is laser-marked and has a corresponding adjustable depth stop to ensure a controllable and proper implant bed depth. Improved perceptibility is safeguarded by the matted exterior of the drills that inhibits any light reflection. A harmonized color-coded sequence of the drilling protocol for both straight and conical implants in one surgical cassette. Up to 35Ncm adjustable and lockable torque wrench. Mechanical and manual Implant insertion options. Taps for final implant bed preparation in hard bone class 1 and 2.





The teetanium® system has a single surgical kit to place both Straight and Conical implants. It includes one initial straight drills arrangement:

- Round Marking Blur
- Precision Drill
- Surgical Drill

which is used as main sequence before the final straight arrangement which is particulary used to place the teetanium® straight series and the final conical arrangement which is particulary used for placing the conical teetanium® series.

### **INITIAL SURGICAL SEQUENCE**

During the surgical preparation of the osseous bed of the implant, the following must be borne in mind:

- Use drills in ascending order of their diameter.
- Apply abundant external cooling with sterile water or
- NaCl solution, pre-cooled to 5°c.
- Apply gentle, intermittent pressure to the bone.
- Do not exceed the indicated speed for drills.
- A sterile container with physiological saline solution must be used to deposit used instruments, such as surgical drills, scalpels, wrenches, adaptors, among others, in order to avoid the instruments from being knocked, or getting residue on their surfaces.

### Drill Extender

The purpose of the Drill Extender is to increase the drills length, in order to be used easily into reduced spaces.

The Drill Extender is made of Stainless Steel AISI 440C.

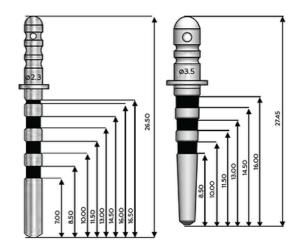
Description	Reference
Drill Extender	T.118

# 28

# Depth Indicator

The purpose of the Parallelizer and Depth Indicators is to orientate the user on the direction and depth of the drill hole. To develop this function, the Parallelizer or Depth Indicators are inserted in the drill hole and the orientation and depth achieved is checked. The product may remain in the drill hole to work as guidance for further drilling. The Depth Indicators exist in two shapes: conical and straight to fit the chosen implant bed shape. The Parallelizer and Depth Indicator is made of Titanium grade 5.

Description	Reference
Depth Indicator Drill Ø2,30	T.119
Depth Indicator Drill Ø2,80	T.120
Depth Indicator Drill Ø3,70 (Conical)	T.121

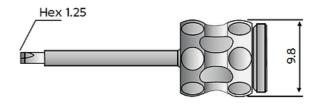


### Manual Hex Driver

The purpose of the Manual Hex Driver is to fix the mounter screw between the abutments and screws that have a 1,25mm hexagon.

The Manual Hex Driver is made up of Stainless Steel AISI 440C and Titanium grade 5.

Description	Reference
Manual Hex Driver Short 1,25mm (20,2 mm)	T.101
Manual Hex Driver Long 1,25mm (32,2 mm)	T.102

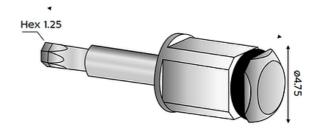


### Hex Tool To Wrench

The purpose of the Hex Tool to Wrench is to fix the mounter screw between the abutments and screws that have a 1,25mm hexagon.

The Hex Tool to Wrench is made of Stainless Steel AISI 440C and EPDM elastomer.

Description	Reference
Hex Tool Wrench Short 1,25 (15,80 mm)	T.103
Hex Tool Wrench Long 1,25 (21,8 mm)	T.104



# Adapter Mount

The purpose of the Adapter Mount to is to serve as intermediate element of connection and transmission of torque between the Torque Wrench and the element of insertion of implant (implantholder).

The Torque Wrench is made of Stainless Steel AISI 420C, EPDM elastomer and Titanium grade 5.

Description	Reference
Adapter Mount Short (14mm)	T.105
Adapter Mount Long (20,10mm)	T.106
Mechanical Adapter	T.107





Ratchet Adapter

Mechanical Adapter

### Mechanical Hex Driver

The purpose of the Mechanical Hex Driver is to fix the mounter screw between the abutments and screws that have a 1,25mm hexagon.

The Mechanical Hex Driver is made of Stainless Steel AISI 440C

ne Mechanical Hex	D11101 10	maao	or orannood	0100171101	4400.
Description					Reference

Mechanical Hex Driver 1,25mm T.108



# Torque Wrench

The Torque Wrench is a instrument that apply a torque thanks to the geometry of the connecting element. It can be used in a fixed position (no torque control) or in a wrench position (torque control).

The Torque Wrench is made of Stainless Steel AISI 316, Plastic PEEK and Stainless Steel 1.4310.



Description Reference

Torque Wrench T.100

Main dimensions

86 to 92 mm long (depending on the torque applied), 11 mm height and 7 mm width.

Torque control

5 torque control values: 15, 20, 25, 30 and 35 Ncm.



# Drill Stops

The purpose of the Drill Stop is to fix the maximum length of the drill when a specific length is required for the hole in the bone where the dental implant is going to be placed.

The Drill Stops are made of Stainless Steel AISI 420C.

The Drill Stop Screw is made of Titanium grade 5.

Description	Reference
Drill Stop Ø2,30	T.131
Drill Stop Ø2,80	T.132
Drill Stop Ø3,00	T.133
Drill Stop Ø3,60	T.134
Drill Stop Ø4,30	T.135
Drill Stop Screw	T.136
Drill Stop Ø4,70	T.142
Drill Stop Ø5,20	T.143





# Bone Tap

The purpose of the Bone Taps is to be used as a surgical instrument for the creation of the thread profile in the bone before the implant insertion. The Bone Taps are made of Titanium grade 5.

Description	Reference
Conical Bone Tap Ø3.70	T.122
Conical Bone Tap Ø4.20	T.123
Conical Bone Tap Ø4.90	T.124
Conical Bone Tap Ø5.70	T.125
Cylindrical Bone Tap Ø3.30	T.126
Cylindrical Bone Tap Ø3.70	T.127
Cylindrical Bone Tap ∅4.20	T.128
Cylindrical Bone Tap Ø4.90	T.129
Cylindrical Bone Tap Ø5.70	T.130







Cylindrical Bone Tap

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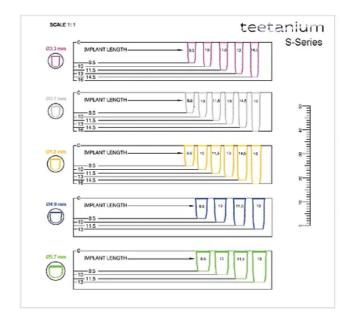


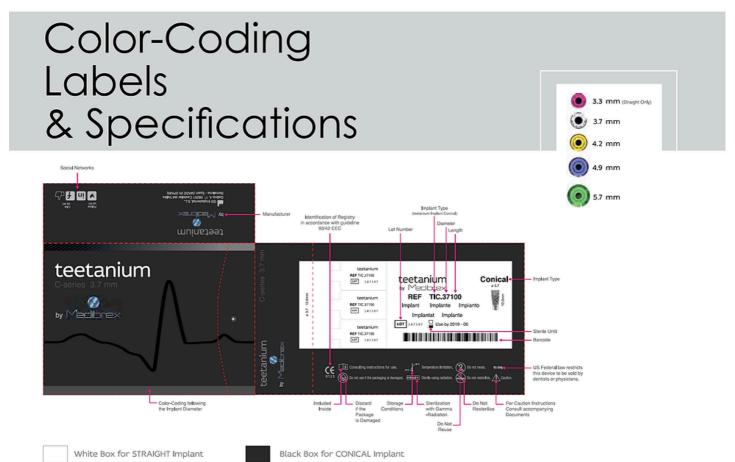
The purpose of the Radiographic Template is to be placed on a radiography in order to choose the suitable implant according to the diameter and length of it in relation of the bone and the other teeth.

The Radiographic Template is made of Polyesther.

Description Reference

Radiographic Template T.144





### General Guidelines

The instructions for use of the teetanium products, provided by the manufacturer ("Medibrex"), must be applied properly by the practitioners. Appropriate knowledge in the handling of the teetanium dental implants or other teetanium products is a must.

The responsibility of the practitioners is to use the device properly and to determine the patient needs according to his situation.

The teetanium products must be used only with their original components and accessories provided by Medibrex S.A.L or official distributors. The use of non-original Teetanium products and its related accessories by the Distributor or Client, will immediately terminate the warranty of the product(s), and will release Medibrex from all responsibilities.

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