

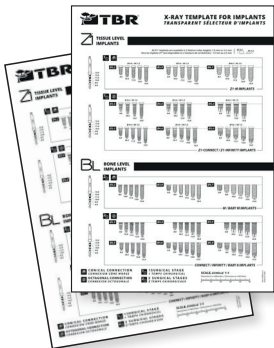


SURGICAL SEQUENCE

	PILOT DRILL	STOP DRILL N°1	DRILL N°2	DRILL N°3	DRILL N°4	DRILL N°5	SCREW TAP Ø3,5	SCREW TAP Ø4	SCREW TAP Ø5	COUNTERSINK Ø3,5	COUNTERSINK Ø4	COUNTERSINK Ø5
REF.	A-FPT310	A-FBxxxx <i>(depending on implant length)</i>	A-FIX200	A-FIX300	A-FIX400	A-FIX500	A-TAR305	A-TAR405	A-TAR505	A-ALE300	A-ALE400	A-ALE500
RPM*	1200	1200	1000	800	600	500	15	15	15	500 to 600	500 to 600	500 to 600
Ø3,5	●	●	●	▶●	▶▶●	▶▶▶●	▶▶▶●			●		
Ø4	●	●	●	▶●	▶▶●	▶▶▶●		▶●			▶●	
Ø5	●	●	●	▶●	▶▶●	▶▶▶●			▶●			▶●
	Trephine the cortical bone with the pilot drill to facilitate the penetration of the first drill (1200 rpm)*.	Use the stop drill n°1 fitted to the length of the implant (1200 rpm)*.	Use drill n°2 to the required length (1000 rpm)*.	For the implants Ø3.5; Ø4 and Ø5: use the drill n°3 to the required length (800 rpm)*.	For the implants Ø4 and Ø5: use the drill n°4 to the required length (600 rpm)*.	For the implants Ø5: use the drill n°5 to the required length (500 rpm)*.	Use the screw tap Ø3.5 for the implants Ø3.5 to the required length (15 rpm)*.	Use the screw tap Ø4 for the implants Ø4 to the required length (15 rpm)*.	Use the screw tap Ø5 for the implants Ø5 to the required length (15 rpm)*.	Use the countersink corresponding to the diameter the zirconia collar. Ream the cortical bone up to the laser marking (500 to 600 rpm)*.		

*The rotation speeds indicated are for information only and depend on the bone quality.

○ Use of the drill depending on the length of the implant to be placed ● For Ø3,5 implants ● For Ø4 implants ● For Ø5 implants



SCANORA AND X-RAY TEMPLATE:

Product code: A-TS600

The Z1-Infinity Implant (diameter and length) is selected using the scanora and X-ray template.

Take into account the tip of the drills which is 1mm long while evaluating the available bone height.



SURGICAL KIT:

Product code: A-TCP009

All the instruments needed to place the Z1-Infinity Implants are available in the TBR surgical kit.



CONTRA-ANGLE PROTOCOL

	CONTRA-ANGLE SCREWTOOL			MANUAL SCREWTOOL		
REF.	A-MCA325 [long] - A-MCA230 [short]			A-MCC258 [long] - A-MCC163 [short]		
RPM	N/A	15 to 20		Manual		
	Take the screwtool for contra-angle and clamp the implant inside its packaging. Maintain the contra-angle facing up while moving the implant to the surgical site.	Screw the implant in the alveolar ridge until the implant is completely inserted. <i>NB : Index the implant connection using the visual mark on the screwtool. The laser marking indicates the position of a side of the internal octagon of the implant connection.</i>	Remove the contra-angle vertically as well as the contra-angle screwtool.	If ever the implant is not completely screwed in using the contra-angle, finish the insertion with the torque-ratchet wrench [GAN-469-1000203] and its screwtool.	Remove the cover screw from its packaging using the screwtool screwdriver for torque-ratchet wrench [GAN-469-1000203]. Maintain the screwtool screwdriver pointing up while transporting the screw to the surgical site. Seal the implant with the cover screw.	Suture the gum. Check radiologically that the implant is perfectly positioned in the bone.

TORQUE-RATCHET WRENCH PROTOCOL

	MANUAL SCREWTOOL					
REF.	A-MCC258 [long] - A-MCC163 [short]					
RPM	N/A	Manual				
	Take the screwtool and clamp the implant inside its packaging. Maintain the screwtool pointing up while transporting the implant to the surgical site.	Begin screwing the implant manually.	Finish screwing with the torque-ratchet wrench [GAN-469-1000203]. Screw the implant in the alveolar ridge until the implant is completely inserted. <i>NB : Index the implant connection using the visual mark on the screwtool. The laser marking indicates the position of a side of the internal octagon of the implant connection.</i>	Remove the torque-ratchet wrench [GAN-469-1000203] and pull the screwtool out vertically.	Remove the cover screw from its packaging. Maintain the screwtool screwdriver pointing up while transporting the screw to the surgical site. Seal the implant with the cover screw.	Suture the gum. Check radiologically that the implant is perfectly positioned in the bone.