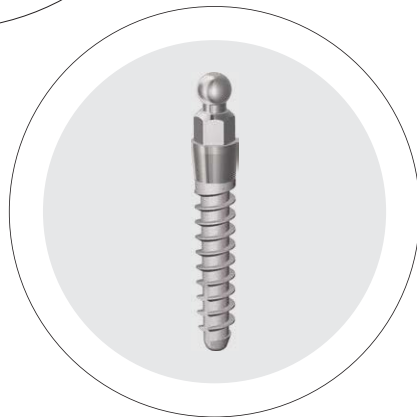
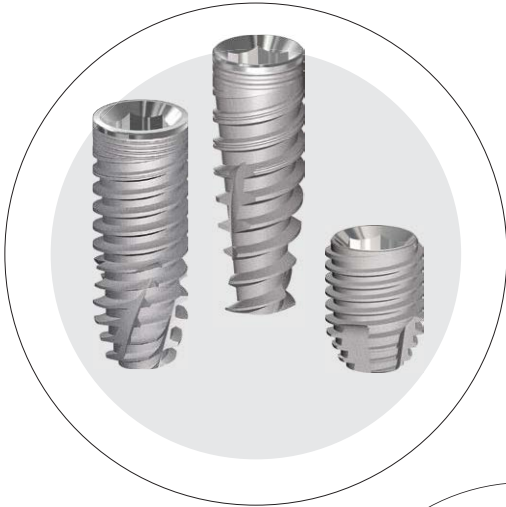


ora  
Dental Implant

## IMPLANT LINES

INTERNAL HEX



MINI IMPLANT



# CONTENT INDEX

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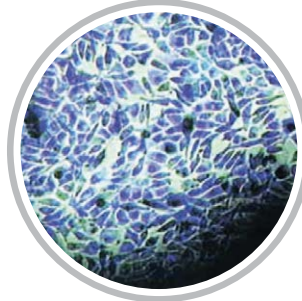


# BWS®

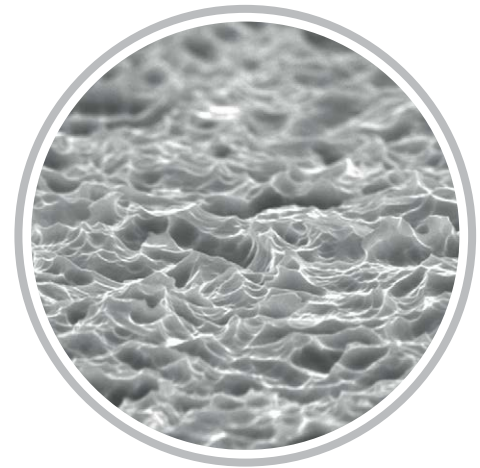
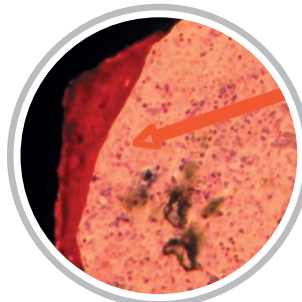
a surface with over 20 years of history

## CONSTANT OVER TIME

The capacity of **BWS®** to **retain fibrin**, lets osteoblasts migrate from the bone to the implant surface and reproduce there, **generating new bone** in direct contact with the titanium (contact Osseointegration).



Bone tissue grown in direct contact with the surface **BWS®**

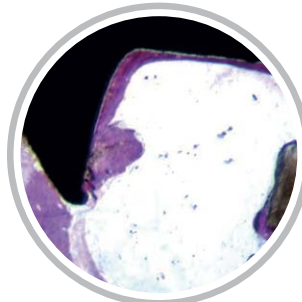


20 µm

SEM HV: 20.00 kV WD: 10.6470 mm  
SEM MAG: 4.82 kx Det: SE Detector  
View field: 62.05 µm

VEGA\\TESCAN

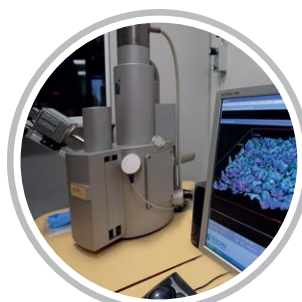
The process of sandblasting and acid etching the implant surface makes it possible to obtain **optimal values of roughness** creating the strongest fibrin adhesion to the surface and facilitating the bone healing process by **significantly reducing the time**.



2µm

EHT=18.00 kV WD=13 mm Mag=6.50 K X  
Photo No.=6159 Detector= SE1

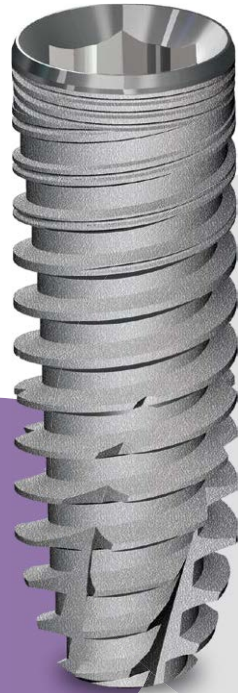
After the surface treatment and the classic washings, Dental Tech implants are additionally cleaned with **Argon Cold Plasma** to minimize carbon contamination. Subsequently, minute controls are performed on the fixture with **scanning electron microscopes (SEM)**.



## BWS®

- ✓ Packaging in controlled environments
- ✓ Clean room ISO 7
- ✓ Packaging impermeable to micro-organisms
- ✓ Gamma ray sterilisation process guarantee the creation of products that are extremely safe for users and their patients

# IMPLANT LINES



## PARALLEL IMPLANT

Fixture with cylindrical body and a conical apex.

Modulating the surgical procedure it is indicated in all bone types; even in the case of non-compact bone it is able to achieve a good primary stability.

You can use it for any type of prosthetic restoration, screwed and cemented. Using the concept of platform switching allows you to better manage the soft tissue in the area of the implant – abutment interface, and reduce peri-implant bone resorption over time.

## SHORT IMPLANT

Even if they are 6.0 mm length, allows the realization of surgical procedures without bone graft even in cases of advanced tissue resorption.



## ACTIVE IMPLANT

Tapered implant that, thanks to its special spiral design, facilitates the users in the realization of Ridge Expansion procedures. The exceptional self tapping power of the thread, provides an excellent bone condensing and a high primary stability even in very complex clinical cases. Implogic AT is recommended in cases of post extraction implants and in case of poor quality bone.



ORA Dental Implant GHBH endosseous implants are supplied in sterile packaging which, if undamaged, guarantees the implant is protected from external agents and, if stored correctly, their sterility.





## TECHNICAL FEATURES

# PARALLEL IMPLANT

### BETTER PENETRATION

Spiral profile with hybrid progress: flat and radiating towards the root, triangular-shaped externally, for greater penetration into incompletely prepared sites.

Micro-grooves to limit bone resorption.

The implant's screwing axis can be adjusted.

### APICAL DRILLS

Drills with helicoidal progress to enhance stable penetration.

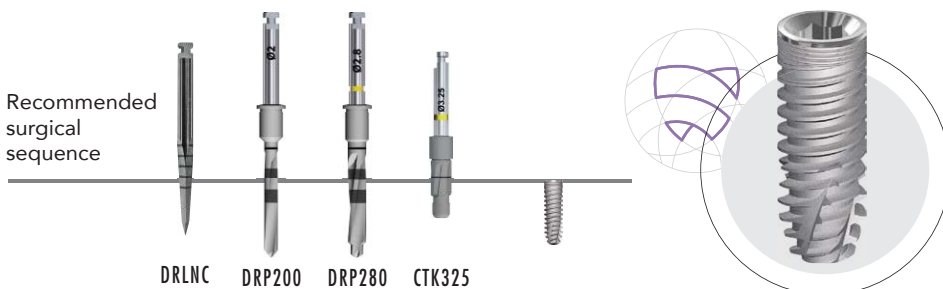
# PARALLEL IMPLANT REFERENCE CODES

INTERNAL HEX

Diameter (Ø) mm  
Ø 3.25

Length (L) mm	REF
10	<b>FTC3210/SC</b>
11,5	<b>FTC3211/SC</b>
13	<b>FTC3213/SC</b>
16	<b>FTC3216/SC</b>

Recommended surgical sequence



DRLNC DRP200 DRP280 CTK325

Diameter (Ø) mm  
Ø 3.75

Length (L) mm	REF
8	<b>10.3708</b>
10	<b>10.3710</b>
11,5	<b>10.3711</b>
13	<b>10.3713</b>
16	<b>10.3716</b>

Recommended surgical sequence



DRLNC DRP200 DRP310 LOW DENSITY DRP325 HIGH DENSITY CTK375

Diameter (Ø) mm  
Ø 4.25

Length (L) mm	REF
8	<b>10.4208</b>
10	<b>10.4210</b>
11,5	<b>10.4211</b>
13	<b>10.4213</b>
16	<b>10.4216</b>

Recommended surgical sequence



DRLNC DRP200 DRP310 DRP360 LOW DENSITY DRP375 HIGH DENSITY CTK425

Diameter (Ø) mm  
Ø 4.75

Length (L) mm	REF
8	<b>10.4708</b>
10	<b>10.4710</b>
11,5	<b>10.4711</b>
13	<b>10.4713</b>

Recommended surgical sequence



DRLNC DRP200 DRP280 DRP310 DRP360 DRP410 LOW DENSITY DRP425 HIGH DENSITY CTK475

Diameter (Ø) mm  
Ø 5.50

Length (L) mm	REF
8	<b>10.5508</b>
10	<b>10.5510</b>
11,5	<b>10.5511</b>
13	<b>10.5513</b>

Recommended surgical sequence



DRLNC DRP200 DRP280 DRP310 DRP360 DRP410 LOW DENSITY DRP425 HIGH DENSITY CTK475

## TECHNICAL FEATURES

# ACTIVE IMPLANT

### SPIRAL DESIGN

The unusual spiral design simplifies the procedures of Ridge Expansion.

### RISK REDUCTION

Less risk of damaging adjacent teeth and perforation of the lingual and/or buccal cortical plates.

### SELF-TAPPING COIL

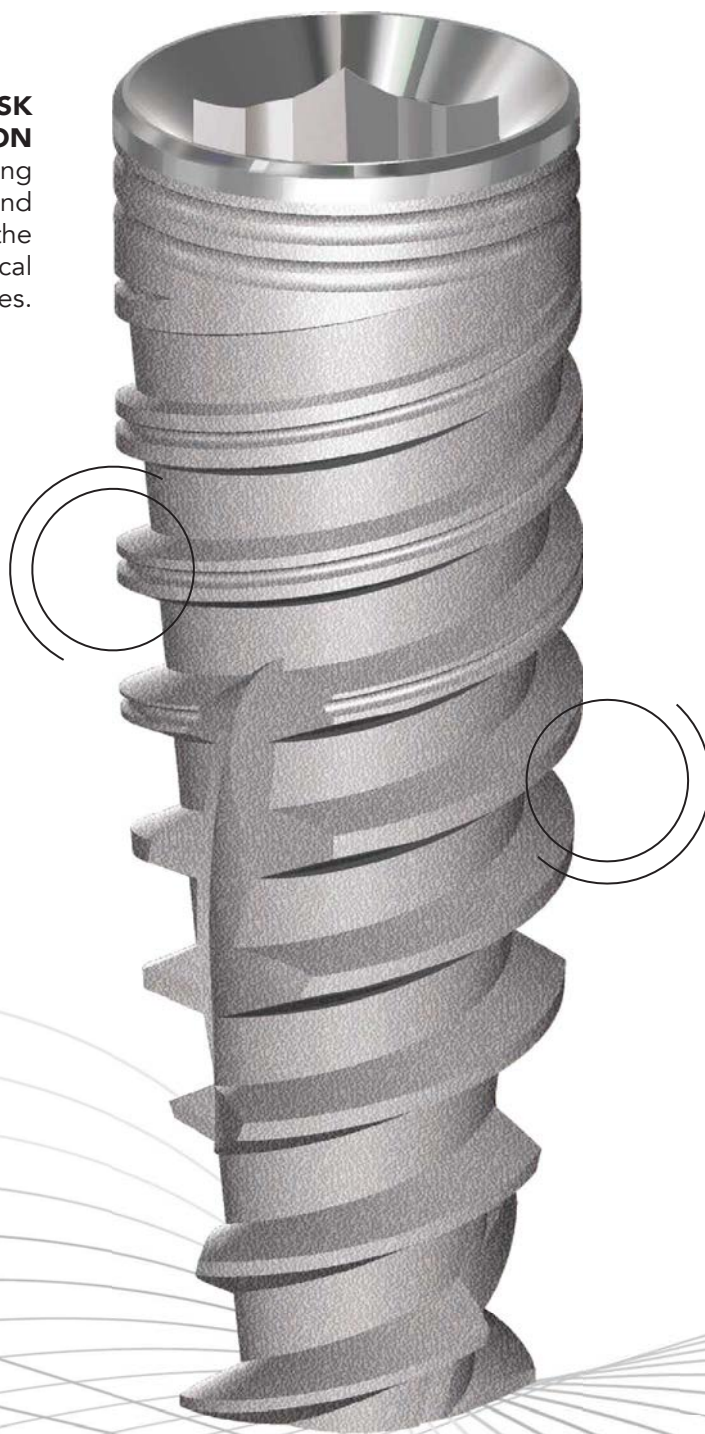
Exceptional self-tapping capability which provides improved bone condensation and increased primary stability, even in highly complex clinical cases.

### BONE MAINTENANCE OVER TIME

Allows a greater reduction of bone osteotomy to be achieved, which results in lower bone loss and reduced surgical trauma.

### OPTIMAL CHOICE OF POSITIONING

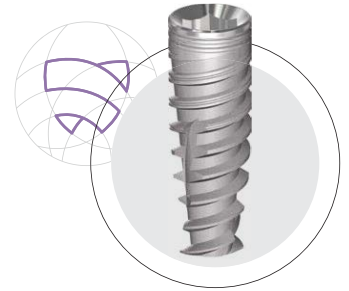
Allows a change in direction in order to achieve the optimum position of restoration, especially in post-extraction sites.





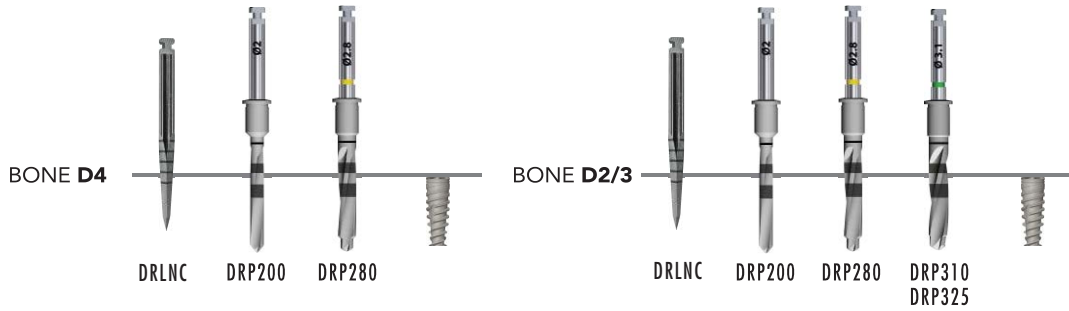
# ACTIVE IMPLANT REFERENCE CODES

INTERNAL HEX



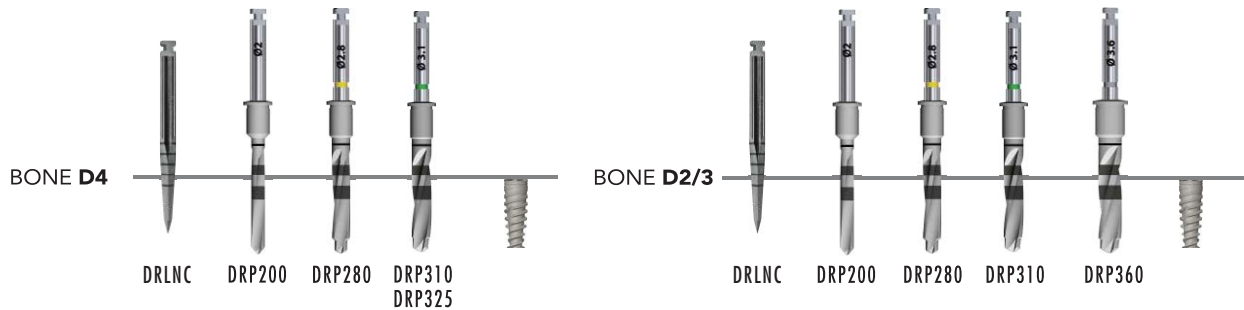
Diameter (Ø) mm  
**Ø 3.75**

Length (L) mm	REF
8	<b>11.3708</b>
10	<b>11.3710</b>
11,5	<b>11.3711</b>
13	<b>11.3713</b>
16	<b>11.3716</b>



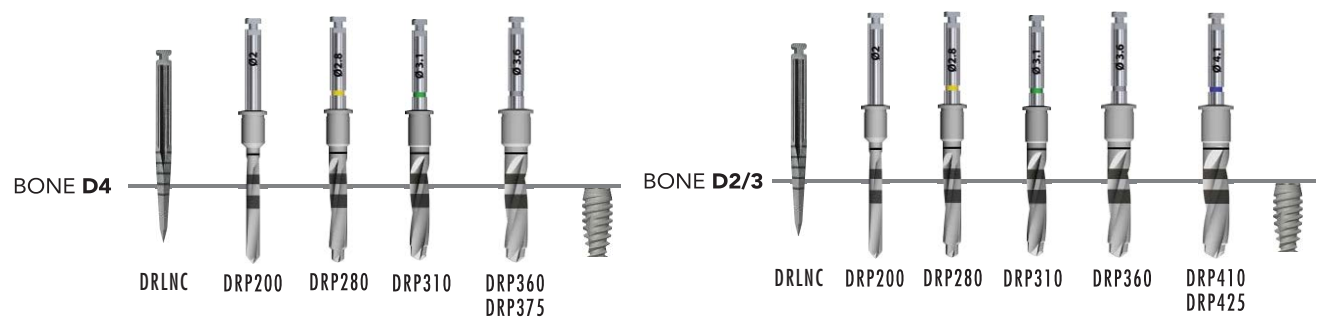
Diameter (Ø) mm  
**Ø 4.25**

Length (L) mm	REF
8	<b>11.4208</b>
10	<b>11.4210</b>
11,5	<b>11.4211</b>
13	<b>11.4213</b>
16	<b>11.4216</b>



Diameter (Ø) mm  
**Ø 4.75**

Length (L) mm	REF
8	<b>11.4708</b>
10	<b>11.4710</b>
11,5	<b>11.4711</b>
13	<b>11.4713</b>



## TECHNICAL FEATURES

# SHORT IMPLANT

### SELF-TAPPING COIL

Self-tapping coil with double principle thread for increased contact with the bone and greater primary stability.

### BONE MAINTENANCE OVER TIME

Polished coronal chamfer and implant collar are designed to better manage the biological width and maintain the level of bone over time.

### SPIRE GEOMETRY

The geometry of the spire aids osseous healing, both qualitatively and quantitatively.

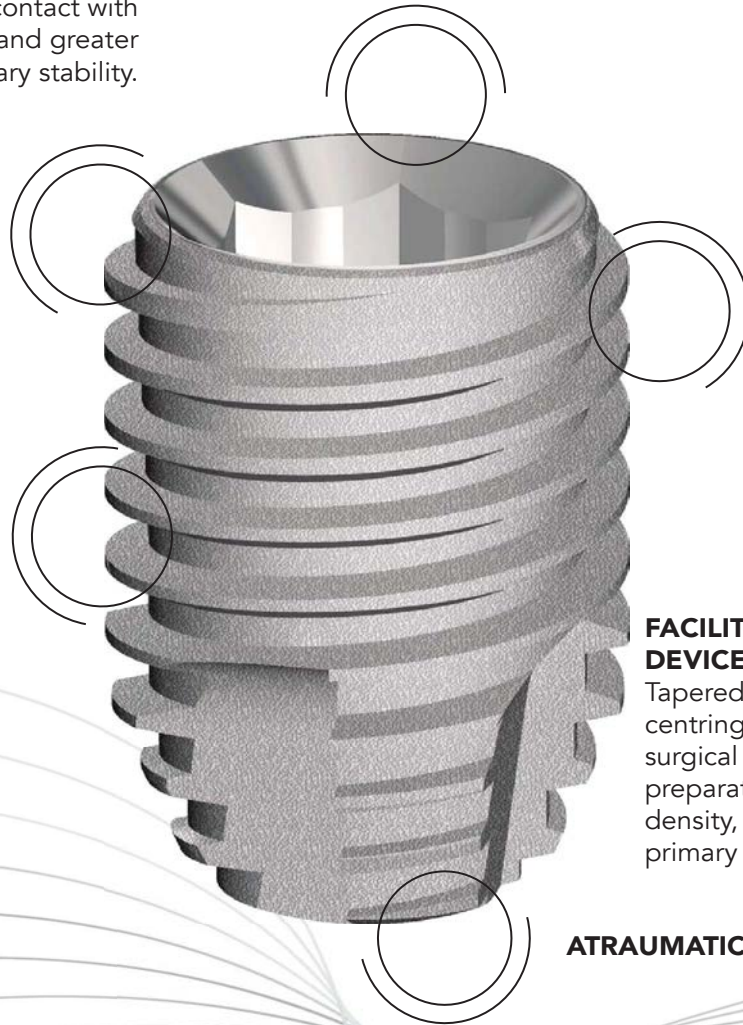
### IMPROVED PENETRATION

Four wide cutting zones for greater penetration capacity and to gather bone fragments, therefore reducing compression.

### FACILITATES POSITIONING THE DEVICE IN THE SURGICAL SITE

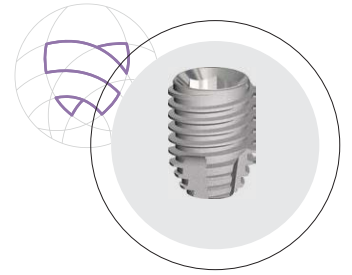
Tapered apical portion to facilitate centring of the device in the surgical site, even in cases of under preparation due to poor bone density, or to achieve greater primary stability.

### ATRAUMATIC APEX



# SHORT IMPLANT REFERENCE CODES

INTERNAL HEX



Diameter (Ø) mm  
Ø 4.25

Length (L) mm	REF
6	10.4206

Recommended surgical sequence

Drill	DRLNC	DRP200	DRP280	DRP310	DRP360
Stop		STC2506	STC2506	STC2506	STC3406

Diameter (Ø) mm  
Ø 4.75

Length (L) mm	REF
6	10.4706

Recommended surgical sequence

Drill	DRLNC	DRP200	DRP280	DRP310	DRP360	DRP410
Stop		STC2506	STC2506	STC2506	STC3406	STC3406

Diameter (Ø) mm  
Ø 5.50

Length (L) mm	REF
6	10.5506

Recommended surgical sequence

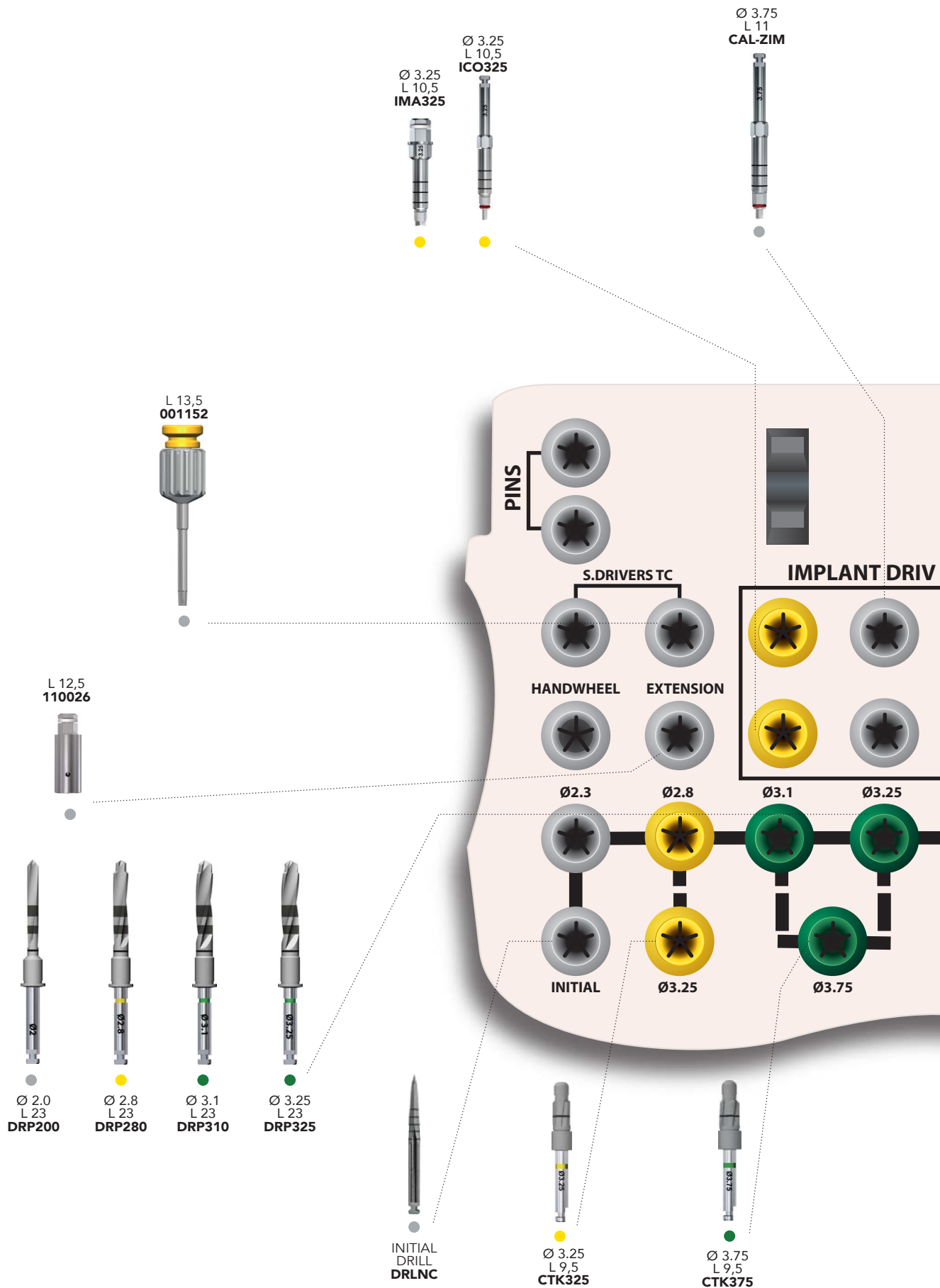
Drill	DRLNC	DRP200	DRP280	DRP310	DRP360	DRP410	DRP425
Stop		STC2506	STC2506	STC2506	STC3406	STC3406	STC3406

# SURGICAL TRAY - "TRAY IS"

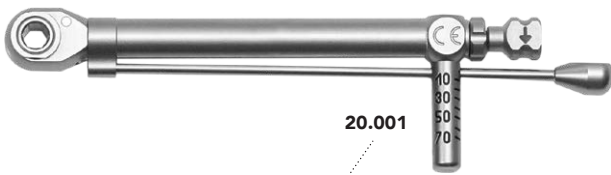
REF TRAY IS

## DIMENSIONS

142x104 mm - h 61 mm



# SURGICAL TRAY - "TRAY IS"



Ø3.75  
L 6  
20.004



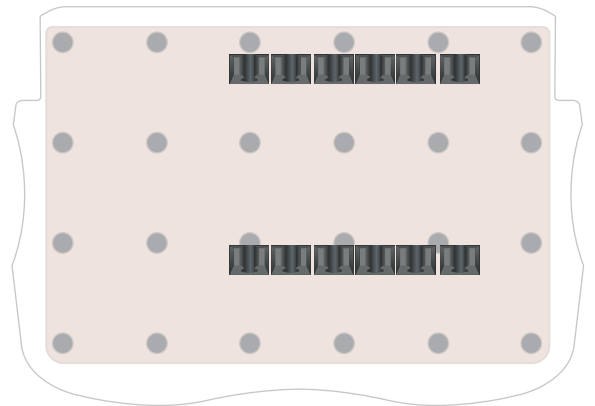
L 12,5  
TW0001C



(at choice)

L 18,5  
TW0001L

(at choice)



COMPARTMENT INSIDE  
DRILL STOP

L 14,3  
GCG0030

L 8,3  
GCG0024



(at choice) (at choice)

L 9  
KI589



ERS

SPARE

SCREW  
DRIVER C.

D.EXTENSION

Ø3.6

Ø3.75

Ø4.1

Ø4.25

Ø4.25

Ø4.75



Ø 4.25  
L 9,5  
CTK425



Ø 4.75  
L 9,5  
CTK475



Ø 3.6  
L 23  
DRP360



Ø 3.75  
L 23  
DRP375



Ø 4.1  
L 23  
DRP410



Ø 4.25  
L 23  
DRP425

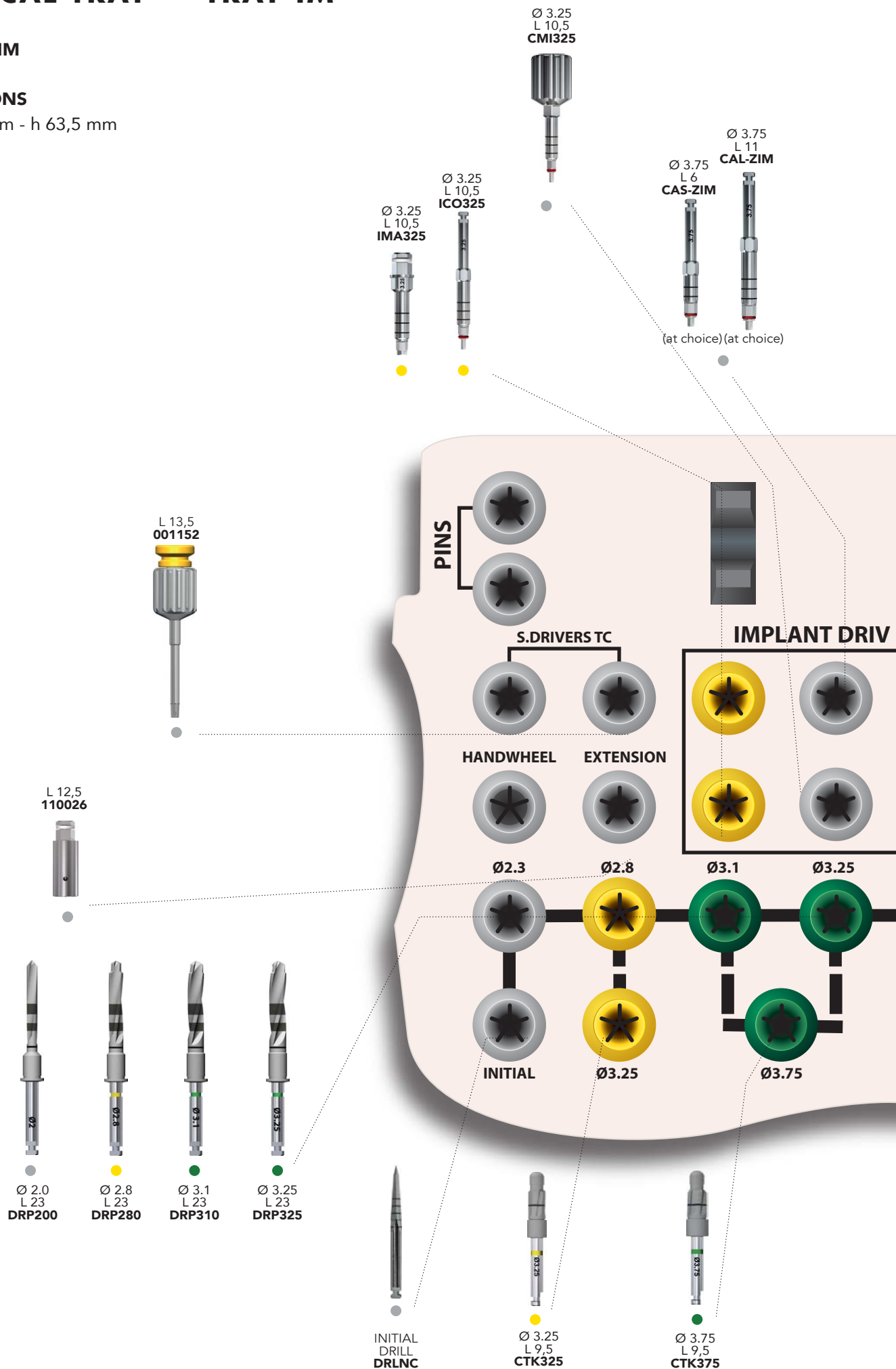


# SURGICAL TRAY - "TRAY IM"

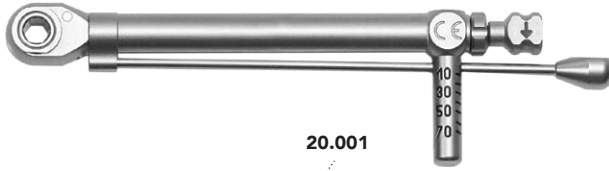
REF TRAY IM

## DIMENSIONS

176x143 mm - h 63,5 mm



# SURGICAL TRAY - "TRAY IM"



20.001



Ø3.75  
L 6  
20.004

Ø3.75  
L 11  
20.005

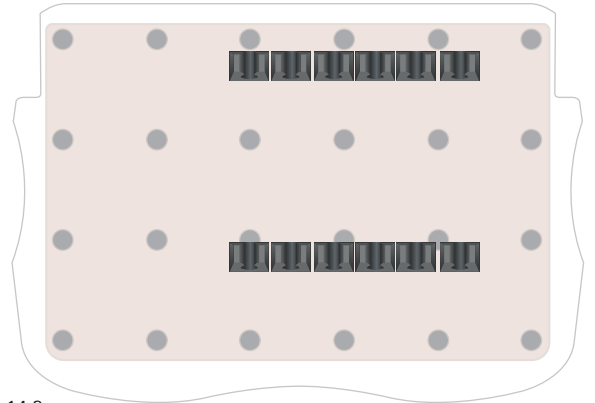
(at choice) (at choice)



L 12,5  
TW0001C

L 18,5  
TW0001L

(at choice) (at choice)



COMPARTMENT INSIDE  
DRILL STOP



L 8,3  
GCG0024

L 14,3  
GCG0030

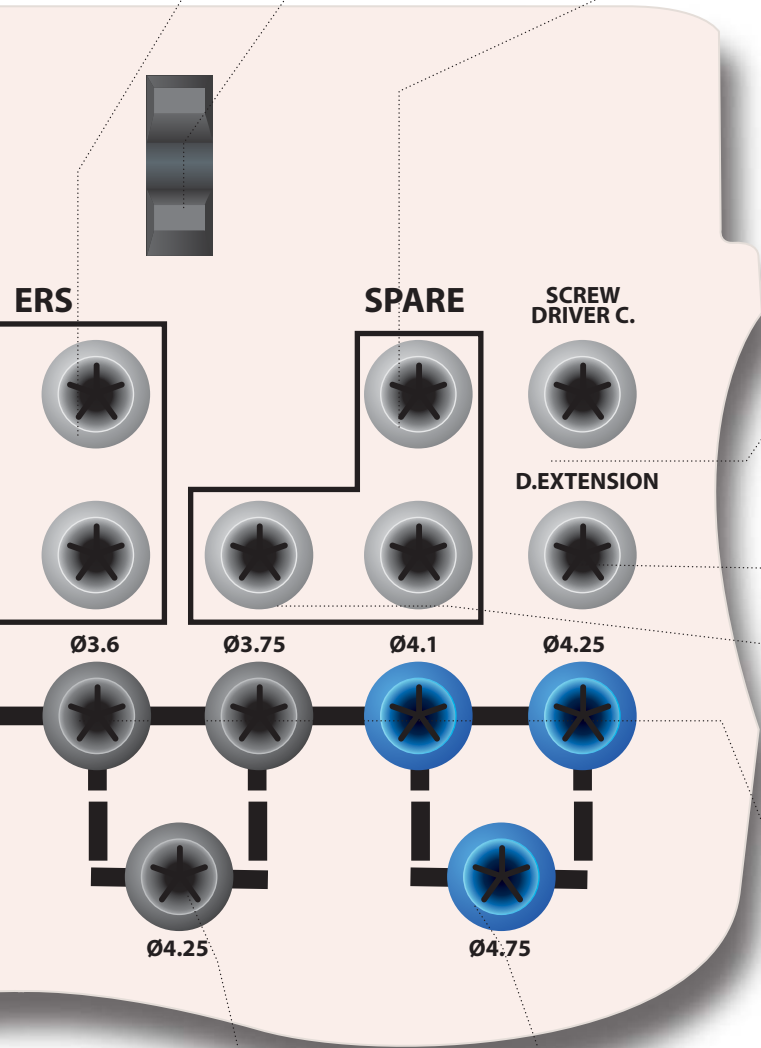
(at choice) (at choice)

L 9  
KI589



Ø3.75  
L 6  
20.006

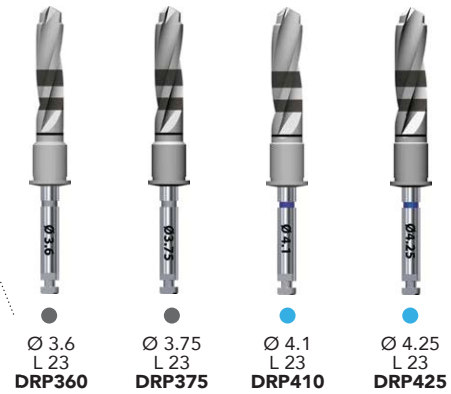
Ø3.75  
L 11  
20.007



Ø 4.25  
L 9,5  
CTK425



Ø 4.75  
L 9,5  
CTK475



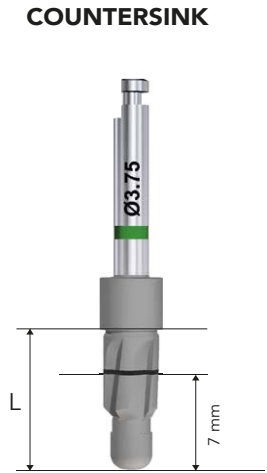
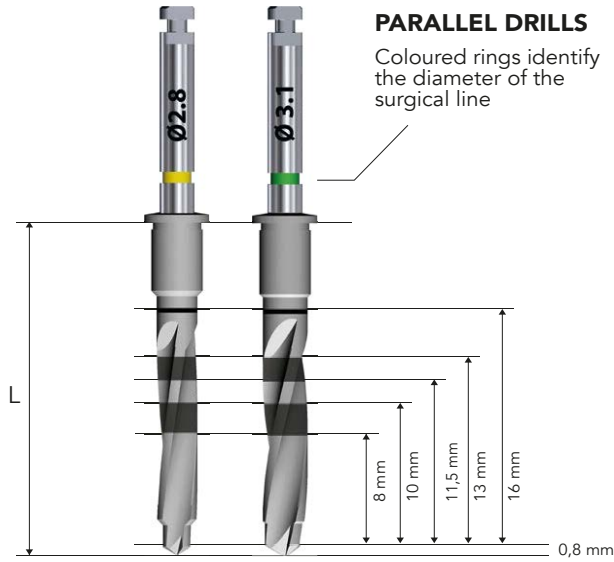
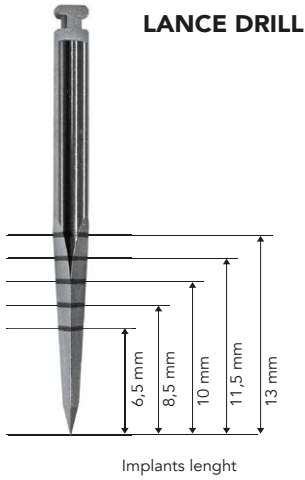
Ø 3.6  
L 23  
DRP360

Ø 3.75  
L 23  
DRP375

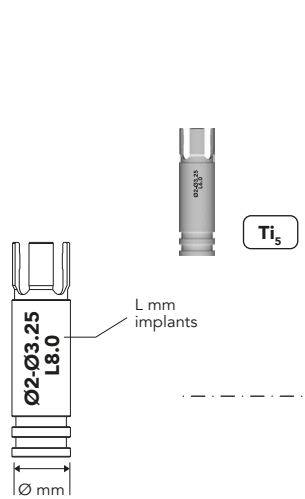
Ø 4.1  
L 23  
DRP410

Ø 4.25  
L 23  
DRP425

# READING DEPTH NOTCHES AND SHARP DRILLS

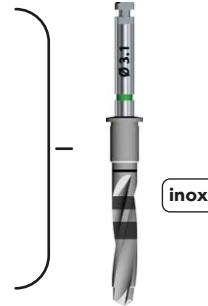


## DRILL STOP



Diameter (Ø) mm **Stop**  
**Ø 4.5**

Length (L) mm	REF
6	<b>STC2506</b>
7	<b>STC2507</b>
8	<b>STC2508</b>
10	<b>STC2510</b>
11,5	<b>STC2511</b>

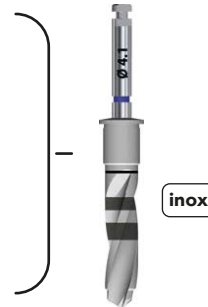


Length (L) mm **Parallel Drill**  
**L 23**

Diameter (Ø) mm	REF
2.0	<b>DRP200</b>
2.8	<b>DRP280</b>
3.1	<b>DRP310</b>
3.25	<b>DRP325</b>

Diameter (Ø) mm **Stop**  
**Ø 5.5**

Length (L) mm	REF
6	<b>STC3406</b>
7	<b>STC3407</b>
8	<b>STC3408</b>
10	<b>STC3410</b>
11,5	<b>STC3411</b>



Length (L) mm **Parallel Drill**  
**L 23**

Diameter (Ø) mm	REF
3.6	<b>DRP360</b>
3.75	<b>DRP375</b>
4.1	<b>DRP410</b>
4.25	<b>DRP425</b>



**Countersink**

Diameter (Ø) mm	REF
3.25	<b>CTK325</b>



**Countersink**

Diameter (Ø) mm	REF
4.25	<b>CTK425</b>



**Countersink**

Diameter (Ø) mm	REF
3.75	<b>CTK375</b>

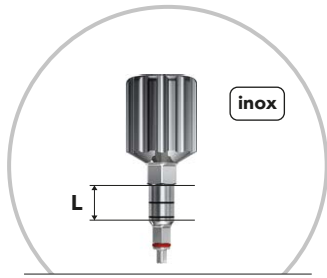
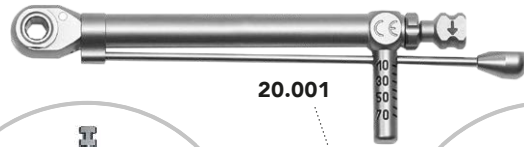


**Countersink**

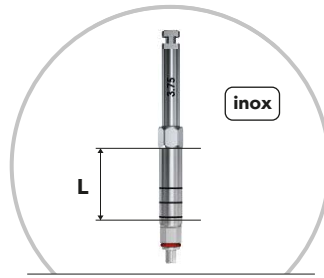
Diameter (Ø) mm	REF
4.75	<b>CTK475</b>

# IMPLANT CONNECTIONS

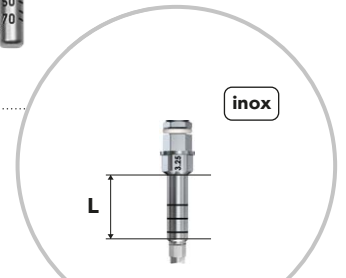
## FEATURES AND MEASURES



IMPLANT HANDWEEL CONNECTION



IMPLANT CA CONNECTION



IMPLANT RATCHET CONNECTION

Ø 3.25 - L 10,5

REF CMI325



Ø 3.75 - L 6,0 SHORT

REF 20.006



Ø 3.75 - L 11,0 LONG

REF 20.007



REF ICO325



REF CAS-ZIM



REF CAL-ZIM



REF IMA325



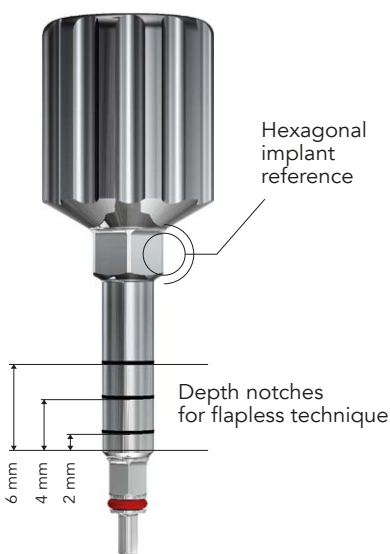
REF 20.004



REF 20.005

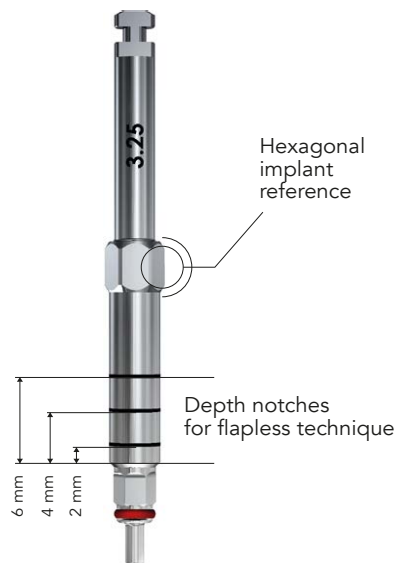


Ø Diameter mm - L Length mm



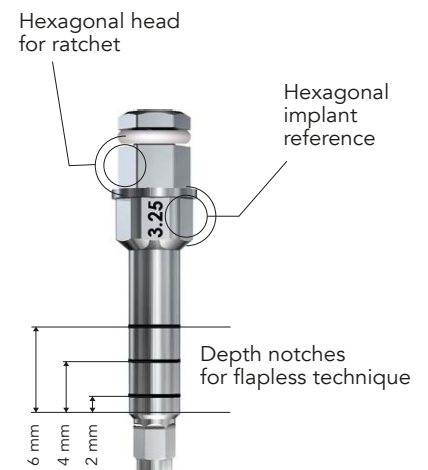
### IMPLANT HANDWEEL CONNECTION

Allows removal of the implant from the ampoule and the start of insertion in the surgical site.



### IMPLANT CA CONNECTION

Allows removal of the implant from the ampoule and its insertion in the surgical site using the contra-angle screwdriver.



### IMPLANT RATCHET CONNECTION

A tool to be connected to the ratchet to complete insertion of the implant. It does not permit removal as it does not have an O-Ring seal.

# IMPLANTS INSERTION PROCEDURE

## WITH MANUAL CONTRA-ANGLE IMPLANT CONNECTION

Insert the direct manual contra-angle screwdriver into the implant with a slight rotating motion to allow the correct coupling of the two hexagons (implant - screwdriver) and remove the implant. (Fig. 5)

Begin insertion of the implant in the alveolar surgery (Fig. 6) after having set the following parameters on the surgical unit:

- 1) Bi-phase procedure (submerged) RPM 15-20  
Torque max. 35-40 Ncm
- 2) Monophasic procedure realized with submerged implants and healing screws, with deferred load RPM 15-20  
Torque max. 40-45 Ncm
- 3) Monophasic procedure with immediate load/prosthesis RPM 15-20  
Torque is incremental from 20 to 70 Ncm

If a surgical unit with good torque control is available, both in quantity and quality, it is possible to terminate insertion of the implant with the contra-angle; if the opposite is true, insert the device in the alveolar surgery as long as the power of the machine permits and complete the insertion manually proceeding as follows:

## IMPLANT RATCHET CONNECTION

Ensure that the tool is inserted in the position suitable for screwing and turn until the implant reaches the desired position. (Fig. 7)

Complete the insertion of the implant using the dynamometric wrench connected to the direct screwdriver of the REF. IMA325 / 20.004 / 20.005 ratchets. At times it is necessary to use the extensions, short REF. PMC115 and long REF. 110026 to connect to the tools described above. (Fig. 8)



Fig.5



Fig.6



Fig.7



Fig.8



# IMPLANT CONNECTION SCREWDRIVERS

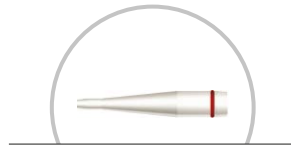
## O-RING REPLACEMENT TOOL

### DESCRIPTION

The tools (DRO 375) facilitates replacement of the O-Ring on the screwdrivers.



**Warning** The O-Ring support tool is made of PMMA and, therefore, it cannot be sterilised in an autoclave.



REF **DRO325**



REF **DRO375**

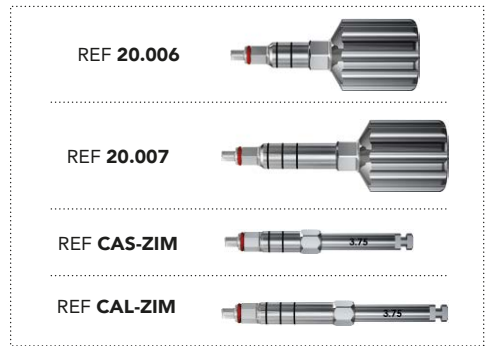


Fig.11









Fig.12



Fig.13



**RATCHET**  
REF **20.001**

<p><b>BALL ABUTMENTS ADAPTOR</b> for ball abutment Ø 2.25</p>  <p>inox</p> <table border="1"> <tr><td>REF</td></tr> <tr><td><b>RDS225</b></td></tr> </table>	REF	<b>RDS225</b>	<p><b>SCREWDRIVERS ADAPTOR</b></p>  <p>inox</p> <table border="1"> <tr><td></td><td>REF</td></tr> <tr><td>Short</td><td><b>TW0001C</b></td></tr> <tr><td>Long</td><td><b>TW0001L</b></td></tr> </table>		REF	Short	<b>TW0001C</b>	Long	<b>TW0001L</b>	<p><b>OVERDENTURE ABUTMENT ADAPTOR</b></p>  <p>Ti<sub>5</sub></p> <table border="1"> <tr><td>REF</td></tr> <tr><td><b>ADL150</b></td></tr> </table>	REF	<b>ADL150</b>					
REF																	
<b>RDS225</b>																	
	REF																
Short	<b>TW0001C</b>																
Long	<b>TW0001L</b>																
REF																	
<b>ADL150</b>																	
<p><b>MUA ADAPTOR</b></p>  <p>inox</p> <table border="1"> <tr><td>REF</td></tr> <tr><td><b>TW0080</b></td></tr> </table>	REF	<b>TW0080</b>	<p><b>ISO ADAPTOR</b></p>  <p>inox</p> <table border="1"> <tr><td>Length (L) mm</td><td>REF</td></tr> <tr><td>7</td><td><b>ISO370</b></td></tr> </table>	Length (L) mm	REF	7	<b>ISO370</b>	<p><b>HEX SCREWDRIVER</b></p>  <p>inox</p> <table border="1"> <tr><td>Length (L) mm</td><td></td><td>REF</td></tr> <tr><td>8,8</td><td>Short</td><td><b>GCG0024</b></td></tr> <tr><td>14,8</td><td>Long</td><td><b>GCG0030</b></td></tr> </table>	Length (L) mm		REF	8,8	Short	<b>GCG0024</b>	14,8	Long	<b>GCG0030</b>
REF																	
<b>TW0080</b>																	
Length (L) mm	REF																
7	<b>ISO370</b>																
Length (L) mm		REF															
8,8	Short	<b>GCG0024</b>															
14,8	Long	<b>GCG0030</b>															

# SURGICAL INSTRUMENTS

## DYNAMOMETRIC RATCHET



inox

REF
<b>20.001</b>

## ADAPTOR FOR DYNAMOMETRIC RATCHET



inox

### ISO connection for ratchet

Length (L) mm	REF
7	<b>ISO370</b>

## EXTENSION



inox

Length (L) mm	REF
12,5	<b>110026</b>

## EXTENSION FOR DRILL

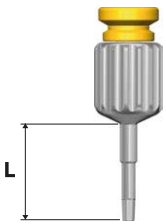


inox

Length (L) mm	REF
9	<b>KI589</b>

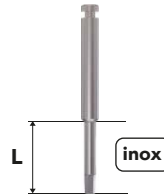
## SCREWDRIVERS

inox



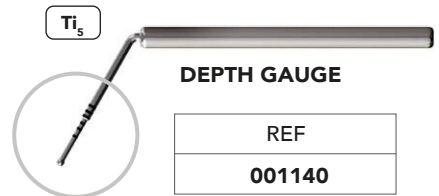
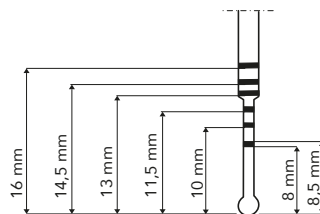
Length (L) mm	REF
4,5	<b>GMX100</b>
11,5	<b>GMM250</b>
18	<b>001152</b>

## HEX CA DRIVER



inox

Length (L) mm	REF
8,3	Short <b>GCG0024</b>
14,3	Long <b>GCG0030</b>



## DEPTH GAUGE

REF
<b>001140</b>

# OVERVIEW PROSTHETIC COMPONENTS

DIAMETER 3.25



**3.25**

**H** Height mm  
**Ø** Diameter mm  
**ML** Laser Marking

## IMPLANTS



REF
<b>FTC3210/SC</b>
<b>FTC3211/SC</b>
<b>FTC3213/SC</b>
<b>FTC3216/SC</b>

## HEALING ABUTMENT



H	REF
2	<b>VG3252</b>
4	<b>VG3254</b>
6	<b>VG3256</b>

## COMPONENTS FOR IMPRESSIONS AND MODELS

\*Fastening screw included

### PICK UP IMPRESSION COPY



Ø	REF
3.8	<b>TPR3200</b>

### TRANSFER IMPRESSION COPING



REF
<b>TST325</b>

### IMPLANT ANALOGUES



REF
<b>AGL3212</b>

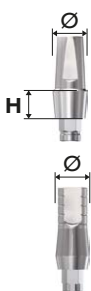
## COMPONENTS FOR CEMENTED PROSTHETICS



REF **VFD032**

Fastening screw included and available as a replacement

### STRAIGHT ABUTMENT



H	Ø	ML	REF
1,5	3.8	325	<b>MAS3215</b>
3	3.8	325	<b>MAS3230</b>

Ø	REF
3.8	<b>PLT325</b>

20Ncm Torque adapter REF TW0001

### ANGLED ABUTMENT



H	Ø	ML	REF
1,5	3.8	325/15°	<b>MPG3211</b>
1,5	3.8	325/25°	<b>MPG3221</b>
3	3.8	325/15°	<b>MPG3213</b>
3	3.8	325/25°	<b>MPG3223</b>

20Ncm Torque adapter REF TW0001

### CASTABLE ABUTMENT



REF
<b>PCA325</b>

## COMPONENTS FOR PROSTHETICS SCREWED AT THE IMPLANT LEVEL



REF **VFD032**

Fastening screw included and available as a replacement

### TEMPORARY CYLINDER



ML	REF
325E	<b>PKE320</b>
325R	<b>PKR032</b>

20Ncm Torque adapter REF TW0001

### CYLINDER ABUTMENT



ML	REF
325E	<b>PPE325</b>
325R	<b>PPR032</b>

20Ncm Torque adapter REF TW0001

### CASTABLE ABUTMENT



REF
<b>PCA325</b>
<b>PCR032</b>

20Ncm Torque adapter REF TW0001

# OVERVIEW PROSTHETIC COMPONENTS

DIAMETER 3.25

## COMPONENTS FOR PROSTHETICS SCREWED TO AN ABUTMENT



REF **VBT3200**

\* Included and available as a replacement

### ABUTMENT MUA

Ti<sub>5</sub>



H	REF
1	<b>BTA3210</b>
2,5	<b>BTA3225</b>

**20Ncm** Torque adapter  
REF TW0001

### CYLINDER

Ti<sub>5</sub>



\***VBT3200**

REF
<b>CIT3200</b>

Pmma



REF
<b>CBR3200</b>

**20Ncm** Torque adapter  
REF TW0001

### IMPRESSION TRANSFER

Ti<sub>5</sub>



\***VBT3200**

REF
<b>TBT3200</b>

### ABUTMENT ANALOGUE

Ti<sub>5</sub>



REF
<b>ABT3200</b>

### PROTECTIVE CAP



Ti<sub>5</sub>

\***VBT3200**

REF
<b>GBT3200</b>

## CAD-CAM COMPONENTS

\* Fastening screw included and available as a replacement

### SCAN ABUTMENT

Ti<sub>5</sub>



\***VFX325**

REF
<b>SCAN325</b>

Digital CAD-CAM Intraoral Scan and Laboratory Scan. For single cemented and screwed elements. For multiple cemented elements.

### DIGITAL ANALOGUE

Ti<sub>5</sub>



REF
<b>AGL32DG</b>

Analog for digital models, specific for applications through the manufacture of models made with 3D printing/prototyping. The characteristic shape with rounded edges, allows easy insertion into the model seat, without interference and friction with the resinous material of the models. The apical screw allows to always obtain a total working stability. This prosthetic component must be used through the Libraries.

### TI BASE SIRONA

Ti<sub>5</sub>



\***VFX325**

H	REF	REF
0,5	● <b>PSS325</b>	● <b>PSS325R</b>
1	● <b>PSS3210</b>	● <b>PSS3210R</b>
2	● <b>PSS3220</b>	● <b>PSS3220R</b>

Digital CAD-CAM bonding technique. For single cemented and screwed elements. For multiple cemented elements.

**20Ncm** Torque adapter  
REF TW0001

### MUA BONDING BASE

Ti<sub>5</sub>



\***VBT3200**

REF
<b>BCM325</b>

Digital CAD-CAM and traditional bonding technique. For multiple elements screwed into an MUA Pillar.

**20Ncm** Torque adapter  
REF TW0001

## CAD-CAM COMPONENTS

### SCAN BTA

Ti<sub>5</sub>



REF

**SCANBTA**

Screw included  
Suitable for digital CAD-CAM technique for intraoral and laboratory scans. For multiple screw-retained elements.

### DIGITAL ANALOGUE

Ti<sub>5</sub>



REF

**ABT3200DG**

Analogue for digital models, specific for applications through the manufacture of models made with 3D printing/prototyping. The characteristic shape with rounded edges allows an easy insertion in the seat model made, without interference and friction with the resinous material of the models. The apical screw allows to always obtain a total working stability. This prosthetic component must be used in conjunction with the Libraries.

## OVERDENTURE COMPONENTS - BALL ATTACHMENT

### BALL ABUTMENT O-RING

Pack. 10 pcs

Ti<sub>5</sub>



REF

**POR225**

REF

**ORG225**

### BALL ABUTMENT ANALOG

Ti<sub>5</sub>



REF

**AAF225**

### BALL ABUTMENT

Ti<sub>5</sub>

Ø2.25



H

3,9



H

REF

0,5

**ASF3200**

1,5

**ASF3215**

3

**ASF3230**

**20Ncm** Torque adapter REF RDS225



# OVERVIEW PROSTHETIC COMPONENTS

DIAMETER 3.75



**H** Height mm  
**Ø** Diameter mm  
**ML** Laser Marking

## IMPLANTS



REF	REF	REF	REF
10.3708	10.4208	10.4708	10.5508
10.3710	10.4210	10.4710	10.5510
10.3711	10.4211	10.4711	10.5511
10.3713	10.4213	10.4713	10.5513
10.3716	10.4216		



REF	REF	REF
11.3708	11.4208	11.4708
11.3710	11.4210	11.4710
11.3711	11.4211	11.4711
11.3713	11.4213	11.4713
11.3716	11.4216	



REF	REF	REF
10.4206	10.4706	10.5506

## HEALING ABUTMENT



Parallel



Taper



Taper Large

H	REF	H	REF	H	REF
2	05.001	2	05.004	2	05.007
4	05.002	4	05.005	4	05.008
6	05.003	6	05.006	6	05.009

## COMPONENTS FOR IMPRESSIONS AND MODELS

\* Fastening screw included

### PICK UP IMPRESSION COPY

Ti <sub>s</sub>	Ø	ML	REF
	4.5	Z	05.011
	5.6	ZL	05.012
Ti <sub>s</sub>	Ø	ML	REF
	3.5	Z	05.010

\*05.080

### TRANSFER IMPRESSION COPING

Ti <sub>s</sub>	ML	REF
	Z	05.014
	Z	05.013
Ti <sub>s</sub>	ML	REF
	Z	05.013

\*05.081

### IMPLANT ANALOGUES

Ti <sub>s</sub>	ML	REF
	Z	05.015

## COMPONENTS FOR CEMENTED PROSTHETICS



REF 05.082

Fastening screw included and available as a replacement

### STRAIGHT ABUTMENT

Ti <sub>s</sub>	Ø	ML	REF	
	3.75	Z	05.016	
Ti <sub>s</sub>	H	Ø	ML	REF
	1,5	4.5	Z	05.017
	3	4.5	Z	05.018
	1,5	5.5	ZL	05.019
	3	5.5	ZL	05.020

20Ncm Torque adapter REF TW0001

### CASTABLE ABUTMENT



Pmma

ML	REF
ZE	05.029

20Ncm Torque adapter REF TW0001

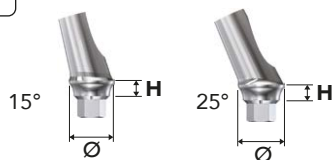
# OVERVIEW PROSTHETIC COMPONENTS

DIAMETER 3.75

## COMPONENTS FOR CEMENTED PROSTHETICS

### ANGLED ABUTMENT

Ti<sub>s</sub>



H	Ø	ML	REF
1,5	4.5	Z15	<b>05.021</b>
1,5	4.5	Z25	<b>05.023</b>
3	4.5	Z15	<b>05.022</b>
3	4.5	Z25	<b>05.024</b>
1,5	5.5	ZL15	<b>05.025</b>
1,5	5.5	ZL25	<b>05.027</b>
3	5.5	ZL15	<b>05.026</b>
3	5.5	ZL25	<b>05.028</b>

20Ncm Torque adapter REF TW0001



REF 05.082

Fastening screw included and available as a replacement

## COMPONENTS FOR PROSTHETICS SCREWED AT THE IMPLANT LEVEL

### TEMPORARY CYLINDER

Peek



ML	REF
ZE	<b>05.032</b>
ZR	<b>05.031</b>

20Ncm Torque adapter REF TW0001

### CYLINDER ABUTMENT

Ti<sub>s</sub>



ML	REF
ZE	<b>05.033</b>
ZR	<b>05.034</b>

20Ncm Torque adapter REF TW0001



REF 05.082

Fastening screw included and available as a replacement

### CASTABLE ABUTMENT

Pmma



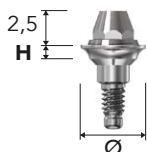
ML	REF
ZE	<b>05.029</b>
ZR	<b>05.030</b>

20Ncm Torque adapter REF TW0001

## COMPONENTS FOR PROSTHETICS SCREWED TO AN ABUTMENT

### MUA STRAIGHT ABUTMENT

Ti<sub>s</sub>



H	Ø	REF
1	4.5	<b>05.035</b>
3	4.5	<b>05.036</b>

Supplied with transfer handle

20Ncm Torque adapter REF TW0080

### MUA ANGLED ABUTMENT

Ti<sub>s</sub>



\*REF 05.083

H	Ø	ML	REF
1	4.5	Z17	<b>05.037</b>
3	4.5	Z17	<b>05.038</b>
1	4.5	Z30	<b>05.039</b>
3	4.5	Z30	<b>05.040</b>

Supplied with transport and parallelization screw\*

20Ncm Torque adapter REF TW0001

### MUA PROTECTION CAP

Peek



ML	REF
ZM	<b>05.041</b>

Use only on **MUA abutments**

Pack. 2 pcs

### MUA CYLINDER

Ti<sub>s</sub>



ML	REF
ZM	<b>05.042</b>



Pmma

ML	REF
ZM	<b>05.043</b>

Use only on **MUA abutments**

Lock manually

### MUA PROSTHETIC SCREW

Ti<sub>s</sub>



REF
<b>05.044</b>



Ti<sub>s</sub>

REF
<b>05.045</b>

Use only on **MUA abutments**

Lock manually

Pack. 2 pcs

# OVERVIEW PROSTHETIC COMPONENTS

DIAMETER 3.75

## COMPONENTS FOR PROSTHETICS SCREWED TO AN ABUTMENT

\* Fastening screw included

### MUA PRECISION TRANSFER



ML	REF
ZM	<b>05.046</b>

### MUA ABUTMENT ANALOGUE



ML	REF
ZM	<b>05.047</b>

### MUA SCAN ABUTMENT



ML	REF
ZM	<b>05.057</b>

Screw included

Suitable for digital CAD-CAM technique for intraoral and laboratory scans. For multiple screw-retained elements.

### MUA DIGITAL ANALOGUE



Ti<sub>5</sub>

ML	REF
ZD	<b>05.058</b>

Analogue for digital models, specific for applications through the manufacture of models made with 3D printing/prototyping. The characteristic shape with rounded edges allows an easy insertion in the seat model made, without interference and friction with the resinous material of the models. The apical screw allows to always obtain a total working stability. This prosthetic component must be used in conjunction with the Libraries.

## CAD-CAM COMPONENTS

\* Fastening screw included and available as a replacement

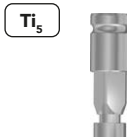
### SCAN ABUTMENT



ML	REF
Z	<b>05.055</b>

Digital CAD-CAM Intraoral Scan and Laboratory Scan. For single cemented and screwed elements. For multiple cemented elements.

### DIGITAL ANALOGUE



ML	REF
ZD	<b>05.056</b>

Analogue for digital models, specific for applications through the manufacture of models made with 3D printing/prototyping. The characteristic shape with rounded edges, allows easy insertion into the model seat, without interference and friction with the resinous material of the models. The apical screw allows to always obtain a total working stability. This prosthetic component must be used through the Libraries.

### TI BASE SIRONA



H	ML	REF	REF
0,5	Z	<b>05.049</b>	<b>05.052</b>
1	Z	<b>05.050</b>	<b>05.053</b>
2	Z	<b>05.051</b>	<b>05.054</b>

Digital CAD-CAM and traditional bonding technique. For single cemented and screwed elements. For multiple cemented elements.

**20Ncm** Torque adapter  
REF TW0001

### MUA BONDING BASE



ML	REF
ZM	<b>05.048</b>

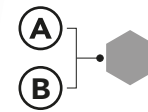
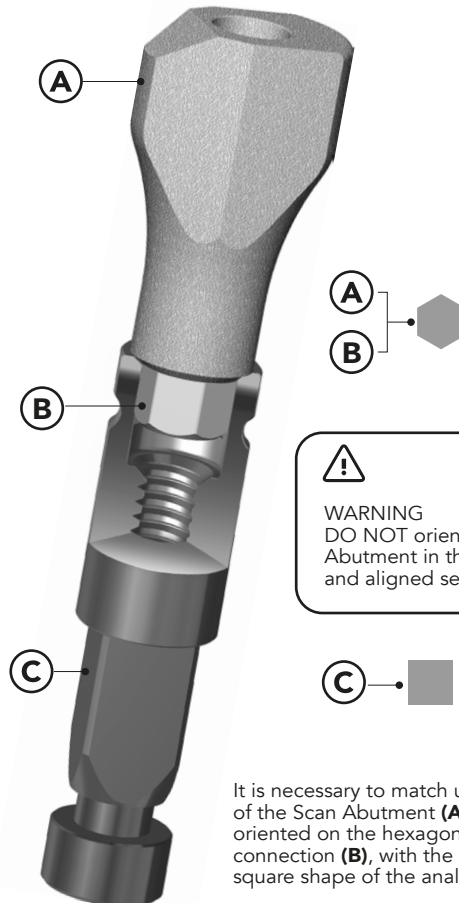
Digital CAD-CAM and traditional bonding technique. For multiple screwed elements on MUA pillar.

**20Ncm** Torque adapter  
REF TW0001

# OVERVIEW PROSTHETIC COMPONENTS

DIAMETER 3.75

## DIGITAL ANALOGUE - INDICATIONS OF USE

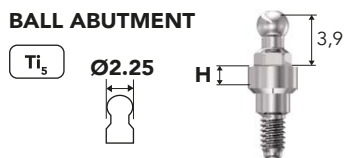


**!**  
**WARNING**  
 DO NOT orient the Scan Abutment in the unsuitable and aligned secondary position

It is necessary to match up the smaller portion of the Scan Abutment (A), which is always oriented on the hexagonal side of the connection (B), with the side of the external square shape of the analogous digital body (C).

## OVERDENTURE COMPONENTS - BALL ATTACHMENT

### BALL ABUTMENT



H	REF
0,5	<b>05.059</b>
1,5	<b>05.060</b>
3	<b>05.061</b>
5	<b>05.062</b>

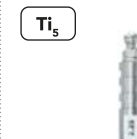
### BALL ABUTMENT O-RING



REF
<b>POR225</b>
REF
<b>ORG225</b>

Pack. 10 pcs

### BALL ABUTMENT ANALOG



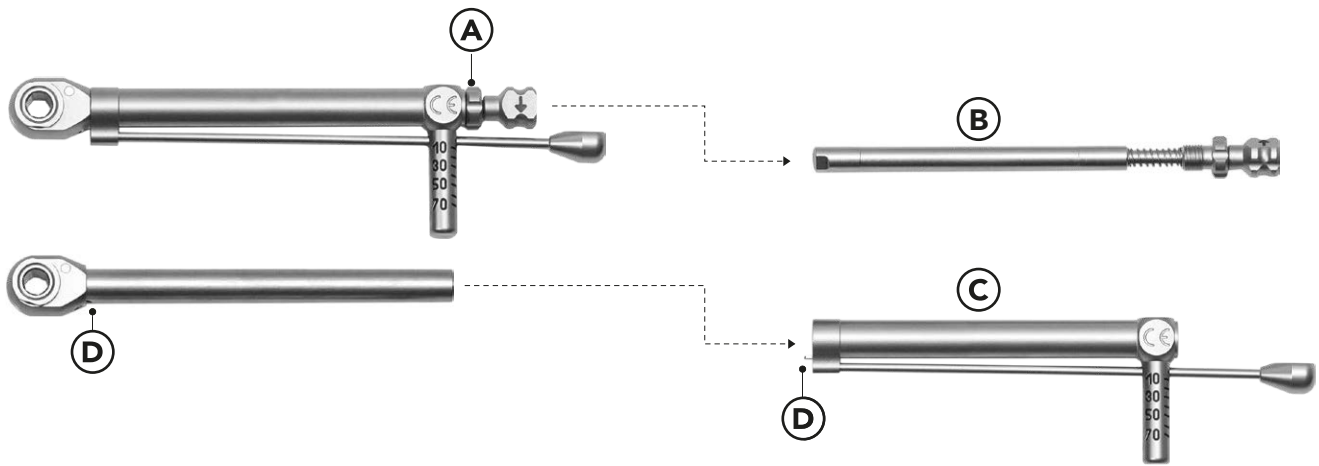
REF
<b>AAF225</b>

**20Ncm** Torque adapter REF RDS225

# RATCHET CLEANING AND MAINTENANCE



**RATCHET**  
REF 20.001



The dynamometric ratchet, after each use, must be disassembled for cleaning. This maintenance operation does not require any tools.

Completely unscrew the screw **(A)**, remove the whole pawl **(B)** and then the flexible dynamometric bar **(C)**. Once disassembled, clean according to the instructions for use and maintenance attached to the device, brush with non-metallic rigid bristles, even in hollow areas with pipe cleaner for a complete removal of biological residues.

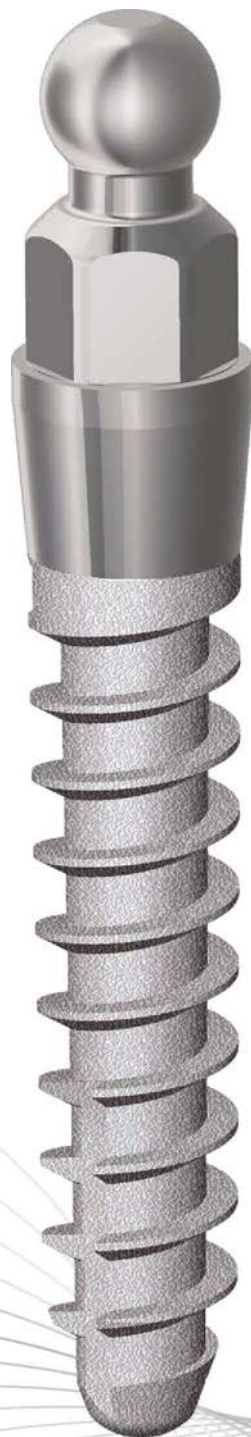
Once the cleaning and disinfection phase has been completed, reassemble the ratchet using the reverse disassembly procedure, making sure to match the pin **(D)** in the housing dedicated.



# MINI IMPLANT

The MINI IMPLANT system meets the growing clinical need to have small diameter implants for instant stabilisation of total prostheses. Designed for long-term rehabilitation and conceived for excellent clinical results.

**EXCEPTIONALLY EASY**  
Implant characteristics make the surgical phase very easy. The ergonomics of supplied components facilitate prosthetic procedures. Hence, implants can be inserted and the prosthesis can be stabilised in just one session.



**EXCELLENT RESISTANCE**

The implant is a monocomponent made of Titanium Gr5 for maximum mechanical resistance.

**SMALL PROFILE**

The diameter (barely 2.7 mm) allows to place the implant in the thin crestal bone to avoid bone regeneration procedures.

**MAXIMUM BONE SURFACE CONTACT**

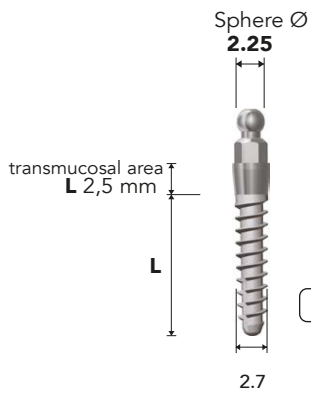
The development of implant macrotopography and the clinically tested surface obtained with the BWS® system ensures excellent primary stability of the device and a high BIC (Bone Implant Contact).

**MINIMALLY INVASIVE SURGERY**

The dentist can choose whether to insert the implant with a traditional or flapless technique.

# REFERENCE CODES

## MINI IMPLANT

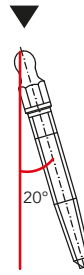


Sphere diameter (Ø) mm  
Ø 2.25

Lenght (L) mm	REF
10	<b>SPH2710/S</b>
11,5	<b>SPH2711/S</b>
13	<b>SPH2713/S</b>

Ti<sub>5</sub>

Load direction



### Static load

Breakage at N 1500

### Stress resistance

N 505 x 5,000,000 cycles  
No breakages

The tests were performed on devices with Ø2mm to evaluate either the same or higher diameters.

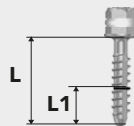


### INITIAL CYLINDRICAL DRILL

Lenght (L) mm	REF
2,0	<b>DRP200</b>

inox

### TAP



Lenght (L) mm	REF
L 10 - L1 5	<b>MSPH2700</b>

Ti<sub>5</sub>



### HANDWHEEL

Lenght (L) mm	REF
6	<b>AMC016</b>

Ti<sub>5</sub>

### IMPLANTS SCREWDRIVERS



Lenght (L) mm	REF
10	<b>RDS225</b>

inox

### RATCHET

REF
<b>20.001</b>

inox



### ABUTMENT

Ti<sub>5</sub>



REF
<b>PTSPH</b>

### BALL ABUTMENT O-RING

Ti<sub>5</sub>



REF
<b>POR225</b>



REF
<b>ORG225</b>

Pack. 10 pcs

### BALL ABUTMENT ANALOG

Ti<sub>5</sub>



REF
<b>AAF225</b>

Remove the device Mini Implant, which is connected to the plastic cap, from the ampoule by concurrently pulling and gently rotating the cap. (Fig. 14)



Fig.14

Carry the implant into the mouth with the cap/support, and use it to start placing the implant in the osteotomy site. Screw the implant onto the bone until it reaches the stability level that allows to extract the support from the device by pulling upwards. (Fig. 15)

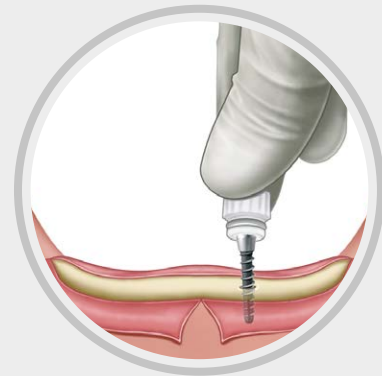


Fig.15

Complete the insertion of the Mini Implant by using manual key assembled with the dedicated adaptor to screw it on, leaving the entire hexagonal portion that is under the sphere outside the soft tissue. This will prevent the O-RING retention device from causing compression of soft tissues. (Fig. 16)

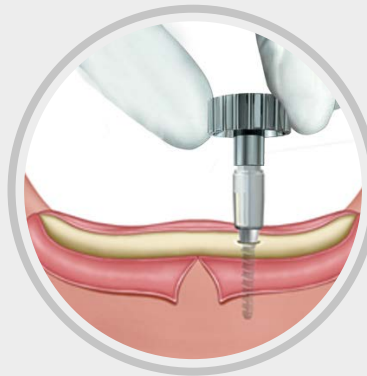


Fig.16

Other instruments can also be used as an alternative to the pawl. (Fig. 17)

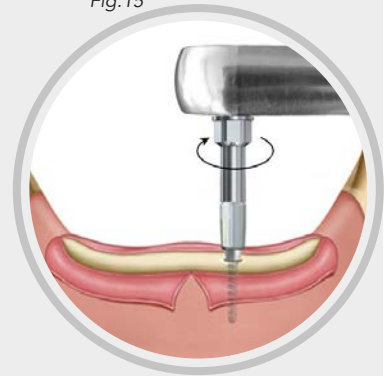


Fig.17

Insertion of the implant must ensure that O-RING retainers are correctly in place. Hence the need to ensure a distance of at least 7mm between the osteotomies. (Fig. 18)

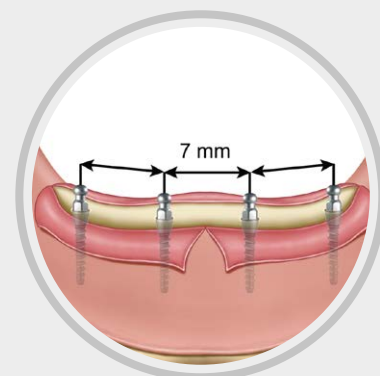


Fig.18

**Warning** Do not exceed 20 rpm and 55 Ncm of torque when screwing on the implant.

# PRELIMINARY INDICATIONS FOR SURGICAL INSTRUMENT USE

## PREVENTION

Besides correct and continuous long-term maintenance, wear and tear of the instruments can also be prevented and slowed down.

In the first place every instrument must only be used for the envisaged and indicated use.

The instruments used must be cleaned immediately after the end of surgery.

Remove residue and encrustations only with soft brushes and NOT with metal brushes.

When envisaged, disassemble the instruments and deeply clean the cavity. The devices must be fully immersed in the most appropriate detergents or disinfectants for the material, and left to rest for a period of time that never exceeds the manufacturer's instructions.

After disinfecting them, rinse thoroughly with water and dry the devices with a clean and dry cloth. Complete with a jet of compressed air.

## CLEANING PHASES

### PACKAGING AND STERILITY

- ORA Implant tools are supplied as non sterile in heat-sealed Pouches in containing the leaflet.
- ORA Implant tools can be used again and therefore it has to be washed and sterilised prior to their usage.

Dental Tech validated the following cleansing and disinfection method:

### MANUAL CLEANING

- Just after the use of ORA Implant equipment, place the equipment into a container with a peracetic acid based solution at concentration of 2% (NO GLUTARALDEHYDE OR SODIUM HYPOCHLORITE ), as long as 18 minutes.
- After-ward rinse carefully.

### MANUAL DISINFECTION

- Place the equipment into a container with a peracetic acid based solution at concentration of 4% (NO GLUTARALDEHYDE OR SODIUM HYPOCHLORITE ), as long as 15 minutes.
- Rinse generously
- Examine the equipment and make sure there are no organic remains. Carefully scrub the outer parts with a non-metal bristled brush.

### MANUAL RINSE

- Place the equipment into ultrasound bath, and wash it for approx. 18 minute and then rinse carefully.

### DRY

- Perfectly dry the equipment, seal it individually with material suitable for moist heat sterilisation.

## CHECK

After the cleaning phases, check that none of the instruments presents signs of corrosion, contamination or damage. Especially use a magnifying lens to check the most concealed areas, the joints and the handles.

If any contamination is detected, repeat the cleaning procedure.

In case of damage, dispose of the instrument as established by the laws in force for waste management.

## STERILISATION

Sterilise in a steam autoclave saturated with distilled water by using a systematically validated and controlled sterilisation method, according to provisions laid down by standard ISO 17665-1:2007 "Sterilisation of healthcare products" (as amended). Requirements for validation and routine control of moist heat sterilisation in healthcare facilities".

- Dental Tech validated the following Autoclave moist heat sterilization cycle:

3 minutes

134 °C



**Warning** The use of suitable protection during cleaning and sterilisation of contaminated instruments enhances personal safety during these phases.

Since Dental Tech tools are manufactured in different materials, they shall be washed and sterilized one by one.

## PRESERVATION

After the sterilisation phase, the instruments must be preserved in the sterilised package in a dry, dust-free place, far from heat sources. The bags must only be opened before use.

The storage period of sterilised items must not exceed the period recommended and indicated on the bag.

## DISPOSAL PROCEDURES

At the end of its life the medical device must be disposed of according to the methods established by national laws in force for waste management.

# INSTRUMENTS FOR SURGERY WARNINGS AND LEGENDS

## INSTRUMENT FOR SURGERY

The surgical instrumentation of the Dental Tech Implant System is simple and essential, responding to every clinical need and treatment protocol. All drills and components are laser marked, to allow preparation of the implant site correctly to the established depth, and a predictable and safe positioning of the implant. The instruments are available individually or in sets with different types of surgical kit.

## HOW TO USE THE SURGICAL INSTRUMENTS

So as not to cause mechanical and/or thermal damage to bone tissue in the zone in which the implant is to be inserted, and to obtain a congruous surgical site (indispensable to achieving good osseointegration of the implant) some fundamental rules must be respected:

- Use drills with gradual diameter progression: the same instruments must not be used for more than 25 osteotomies;
- Do not exceed 800 RPM during the osteotomy;
- Do not exceed 20 RPM in the event of tapping with the contra-angle;
- Ensure, during the osteotomy, that the instruments work in axis;
- Do not exert lateral pressure during the osteotomy and tapping;
- The osteotomy must be performed exercising light pressure and back and forth movements on the axis of the instrument;
- Use generous irrigation with physiological solution, both during drilling and tapping of the surgical site;
- Ensure that during the intervention the irrigation canals of the instruments are clear;
- Avoid categorically, during surgery, the cooling of instruments and the implant site with the air-water syringes tips.

## NON-ROTATING INSTRUMENT

The non-rotating instrument is compatible with all Dental Tech implant systems.







## WARNINGS

**RESPONSABILITY** The use of non-original components, produced by third-parties may compromise the functionality of the implants and their elements, compromising the final result and voiding the guarantee of the manufacturer. The application of the product occurs outside the control of Dental Tech and is the sole responsibility of the end user. We accept no liability for any damage resulting from such activities.











**INSTRUCTIONS FOR USE** These are to be considered solely as recommendations. This information is not sufficient and does not exempt the user from ensuring the adequacy of the product for its intended use through continued training.

**VALIDITY** This nullifies all previous versions. The images, the content and the products illustrated are subject to modification without warning.

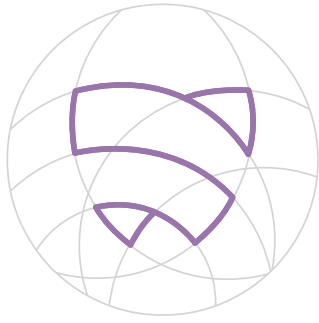
## MATERIALS LEGEND

 Au	Gold Alloy
 inox	Surgical Stainless Steel
 Peek	Polyetereeterechetone
 Pmma	Polymethylmethacrylate
 Ti <sub>5</sub>	Titanium gr.V ELI for medical use
 Plastic	Polymer

## PACKAGING SYMBOLS LEGEND

 LOT	Lot number
 STERILE R	Sterilized by gamma rays
 NON STERILE	Not sterile
 REF	Product code
 RIUTILIZZABILE	Reusable
	Use by
	Non-reusable
	Attention, consult the supplied documentation
	Directive 93/94/CEE conformity mark
 0123	Notified body identification

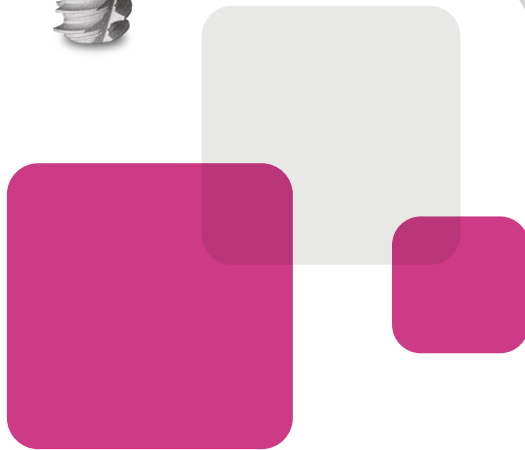
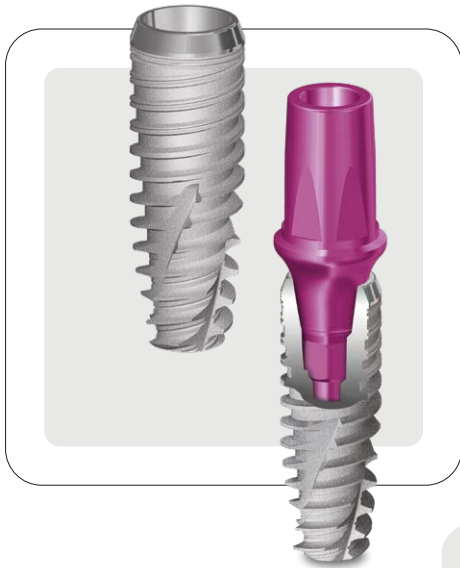
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ora  
Dental Implant

# IMPLANT LINE

IMPLASSIC FTP





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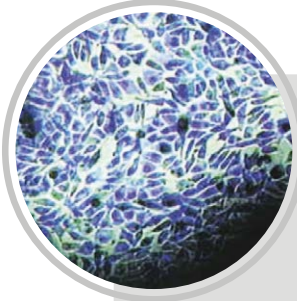


# BWS®

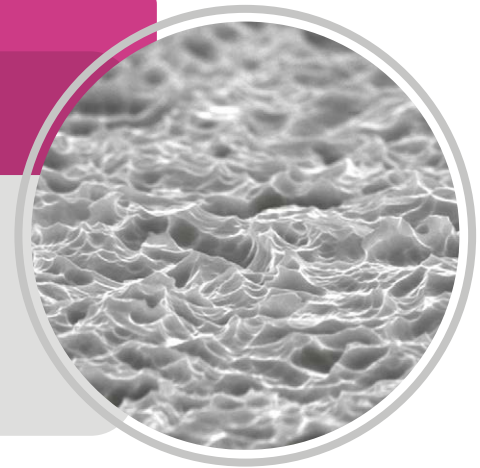
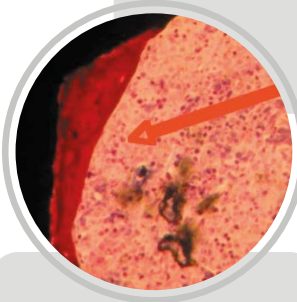
a surface with over 20 years of history

## CONSTANT OVER TIME

The capacity of **BWS®** to **retain fibrin**, lets osteoblasts migrate from the bone to the implant surface and reproduce there, **generating new bone** in direct contact with the titanium (contact Osseointegration).



Bone tissue grown in direct contact with the surface **BWS®**

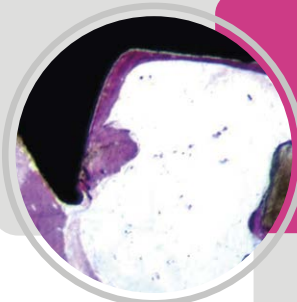


20 µm

SEM HV: 20.00 kV WD: 10.6470 mm  
SEM MAG: 4.82 kx Det: SE Detector  
View field: 62.05 µm

VEGA\\TESCAN Dental Tech

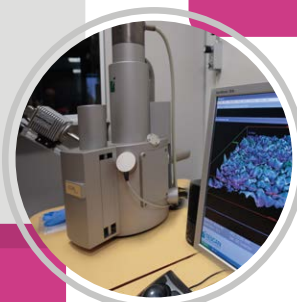
The process of sandblasting and acid etching the implant surface makes it possible to obtain **optimal values of roughness** creating the strongest fibrin adhesion to the surface and facilitating the bone healing process by **significantly reducing the time**.



2µm

EHT=18.00 kV WD=13 mm Mag=6.50 K X  
Photo No.=6159 Detector= SE1

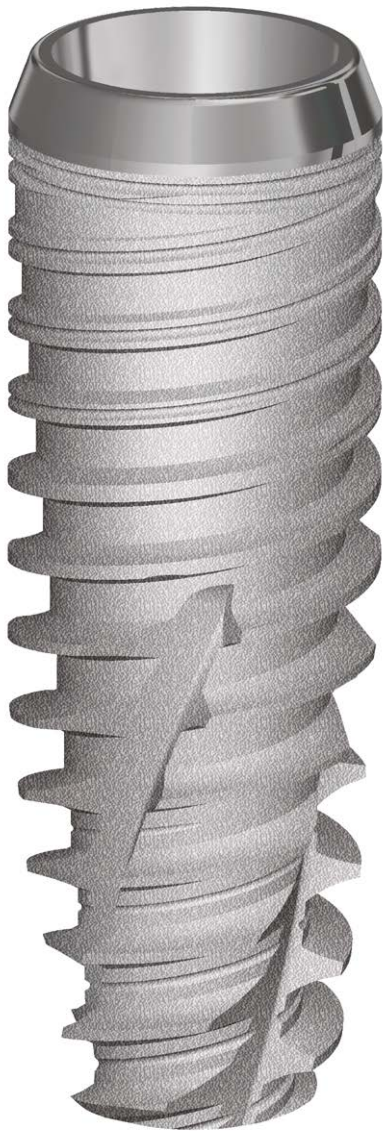
After the surface treatment and the classic washings, Dental Tech implants are additionally cleaned with **Argon Cold Plasma** to minimize carbon contamination. Subsequently, minute controls are performed on the fixture with **scanning electron microscopes (SEM)**.



## BWS®

- ✓ Packaging in controlled environments
- ✓ Clean room ISO 7
- ✓ Packaging impermeable to micro-organisms
- ✓ Gamma ray sterilisation process guarantee the creation of products that are extremely safe for users and their patients

# TECHNICAL FEATURES



Conometric connection at 6°, with hexagonal position index and screw through, extremely precise and stable.



Smooth collar 0,75mm. The eccentric course between implant and connection diameter offers an anatomical path to the prosthetic component.



The geometric peculiarity of the cortical spiral allows to obtain an high primary stability, even in the presence of a few millimeters of bone.



Thanks to the flat shape of the central loop, the FTP implant allows the condensation of the bone matrix during the insertion of the fixture.



Apical spiral with progressive course allow greater directionality in insertion, in addition to the high primary stability in poor quality bone.



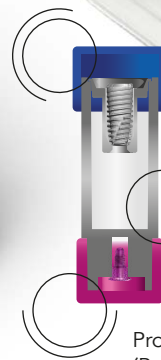
The atraumatic apex, without cutting areas, makes the implant suitable even in cases where it is necessary to safeguard anatomical structures, such as maxillary sinus and alveolar nerve.

# PACKAGING

ORA Dental Implant GHBH endosseous implants are supplied in sterile packaging which, if undamaged, guarantees the implant is protected from external agents and, if stored correctly, their sterility.



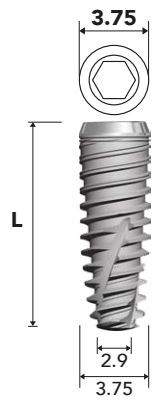
Protective implant cap supported by a titanium ring. (Surgical colour code)



**Transparent ampoule**

Protective closure screw cap. (Prosthetic colour code)

# SURGICAL PROCEDURE AND REFERENCE CODES



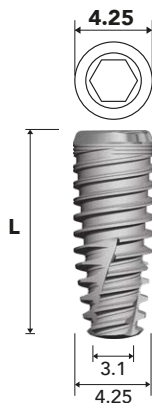
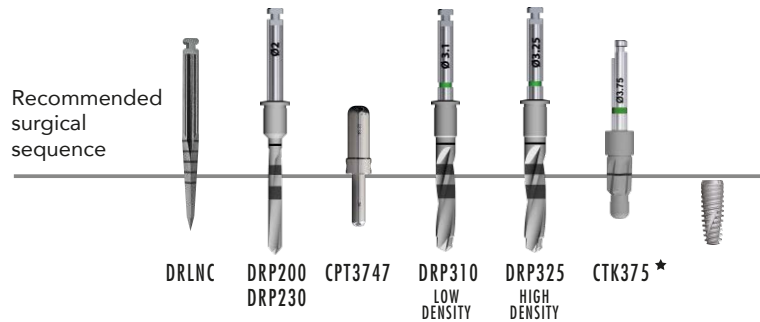
Diameter (Ø) mm **Ø 3.75**

Lenght (L) mm	REF
10	<b>FTP3710/SC</b>
11,5	<b>FTP3711/SC</b>
13	<b>FTP3713/SC</b>
16	<b>FTP3716/SC</b>

Prosthetic colour code ●  
Surgical colour code ●

Cover screw included

Recommended surgical sequence



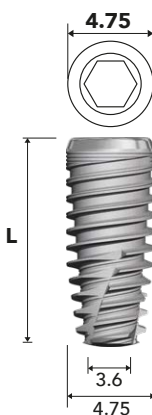
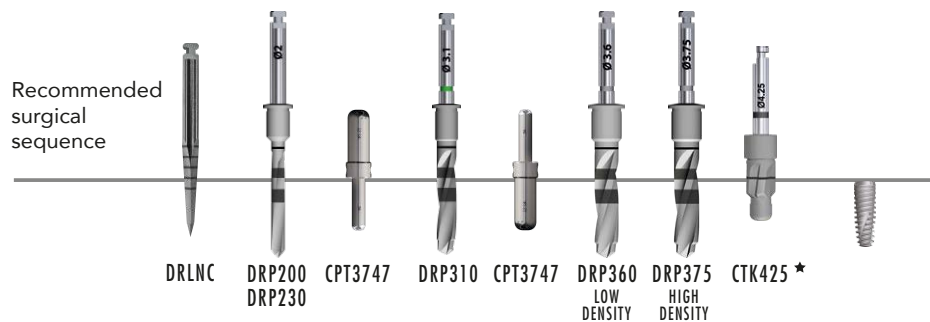
Diameter (Ø) mm **Ø 4.25**

Lenght (L) mm	REF
8	<b>FTP4208/SC</b>
10	<b>FTP4210/SC</b>
11,5	<b>FTP4211/SC</b>
13	<b>FTP4213/SC</b>
16	<b>FTP4216/SC</b>

Prosthetic colour code ●  
Surgical colour code ●

Cover screw included

Recommended surgical sequence



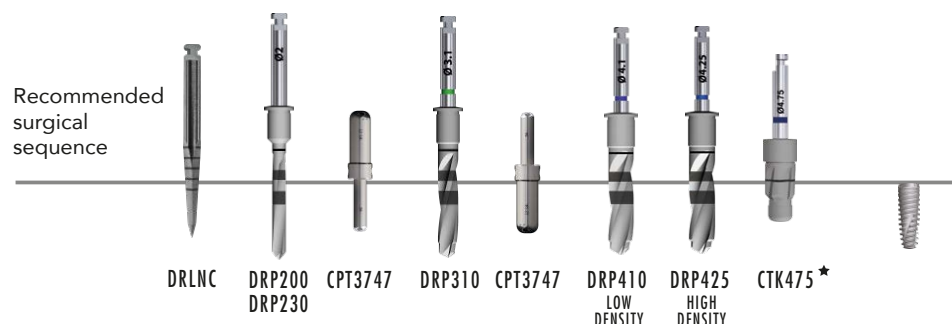
Diameter (Ø) mm **Ø 4.75**

Lenght (L) mm	REF
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10	<b>FTP4710/SC</b>
11,5	<b>FTP4711/SC</b>
13	<b>FTP4713/SC</b>

Prosthetic colour code ●  
Surgical colour code ●

Cover screw included

Recommended surgical sequence

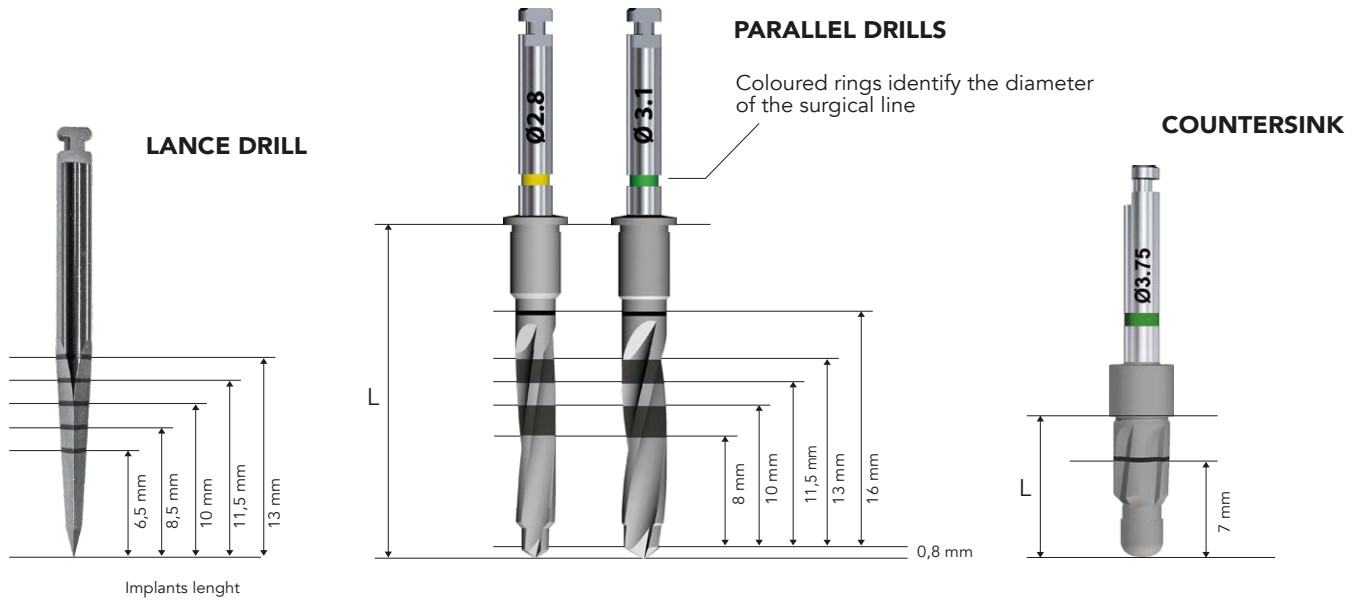


★ It is recommended if the cortical bone is very persistent.

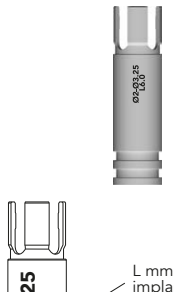


**Warning** All DRP drills are 0,8 mm longer than the implant. In the planning stage and while drilling in proximity to vital anatomical structures, this added length must be considered.

# READING DEPTH NOTCHES AND SHARP DRILLS



## DRILL STOP




**Ti<sub>5</sub>**

Ø 2-Ø 3.25  
L 8.0  
L mm implant

Diameter (Ø) mm    **Stop**

**Ø 4.5**

Lenght (L) mm	REF
6	<b>STC2506</b>
7	<b>STC2507</b>
8	<b>STC2508</b>
10	<b>STC2510</b>
11,5	<b>STC2511</b>
13	<b>STC2513</b>
16	<b>STC2516</b>



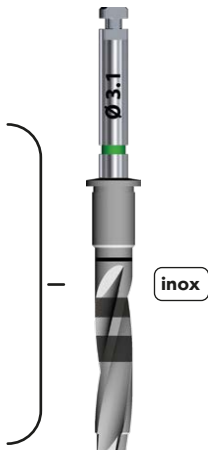
**Ti<sub>5</sub>**

Ø 2-Ø 4.25  
L 8.0

Diameter (Ø) mm    **Stop**

**Ø 5.5**

Lenght (L) mm	REF
6	<b>STC3406</b>
7	<b>STC3407</b>
8	<b>STC3408</b>
10	<b>STC3410</b>
11,5	<b>STC3411</b>
13	<b>STC3413</b>
16	<b>STC3416</b>



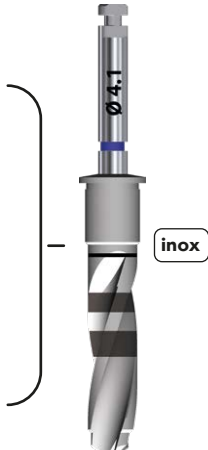
**inox**

Ø 3.1

Lenght (L) mm    **Parallel Drill**

**L 23**

Diameter (Ø) mm	REF
2.0	<b>DRP200</b>
2.3	<b>DRP230</b>
2.8	<b>DRP280</b>
3.1	<b>DRP310</b>
3.25	<b>DRP325</b>



**inox**

Ø 4.1

Lenght (L) mm    **Parallel Drill**

**L 23**

Diameter (Ø) mm	REF
3.6	<b>DRP360</b>
3.75	<b>DRP375</b>
4.1	<b>DRP410</b>
4.25	<b>DRP425</b>



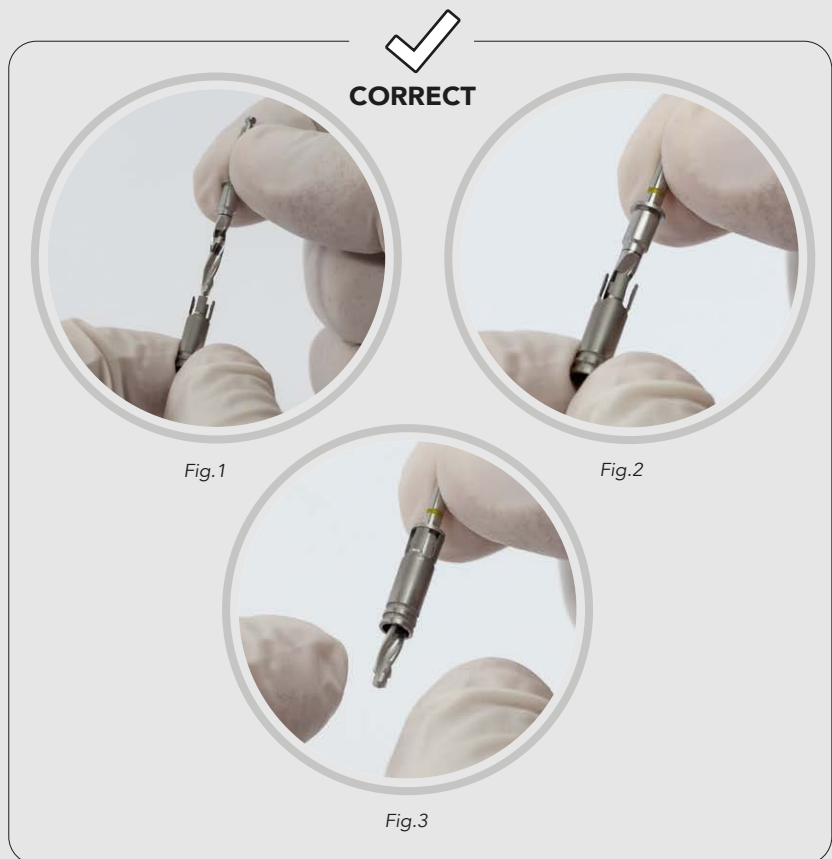
# STOP INSERTION AND REMOVAL PROCEDURE

## STOP INSERTION

Hold the drill by the stalk and insert the stop, with the retentive flaps facing towards the drill, until it comes into contact with the metal stop located on the drill itself. (Fig. 1 - 2- 3)

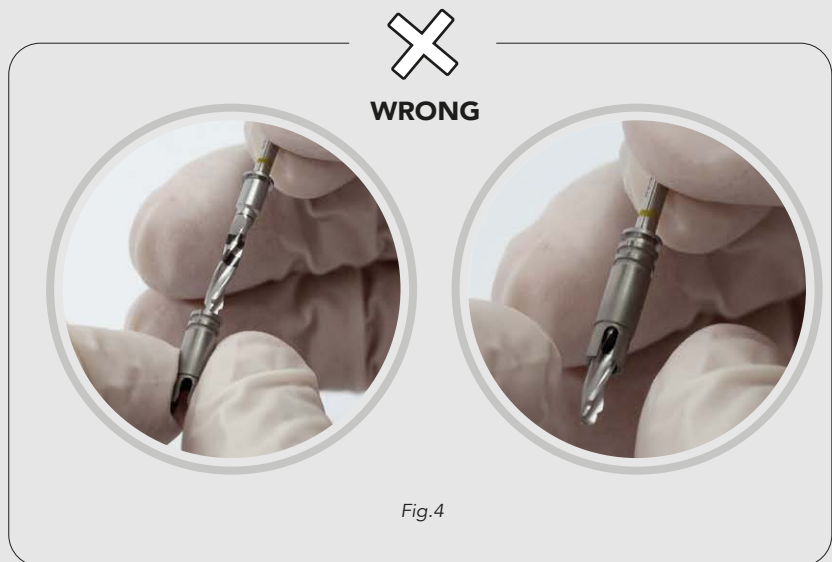
## STOP REMOVAL

Hold the stop and remove the drill, pulling on the side of the stalk.



## STOP WRONG INSERTION

The Stop insertion with the wings facing the tip of the drill is incorrect. (Fig. 4)



## DEPTH STOP FOR DIFFERENT LENGTHS

### ADVANTAGES

- Optimum control of depth during Preparation of the surgical site, even in conditions of poor visibility in the operative field;
- Reduction of surgical risk;
- Reduction of operator stress;
- Greater patient safety;
- Facilitates the insertion and removal of the drill stop and increased safety during surgery for the doctor and assistant, the cutting portion of the instrument is never touched by the operators.

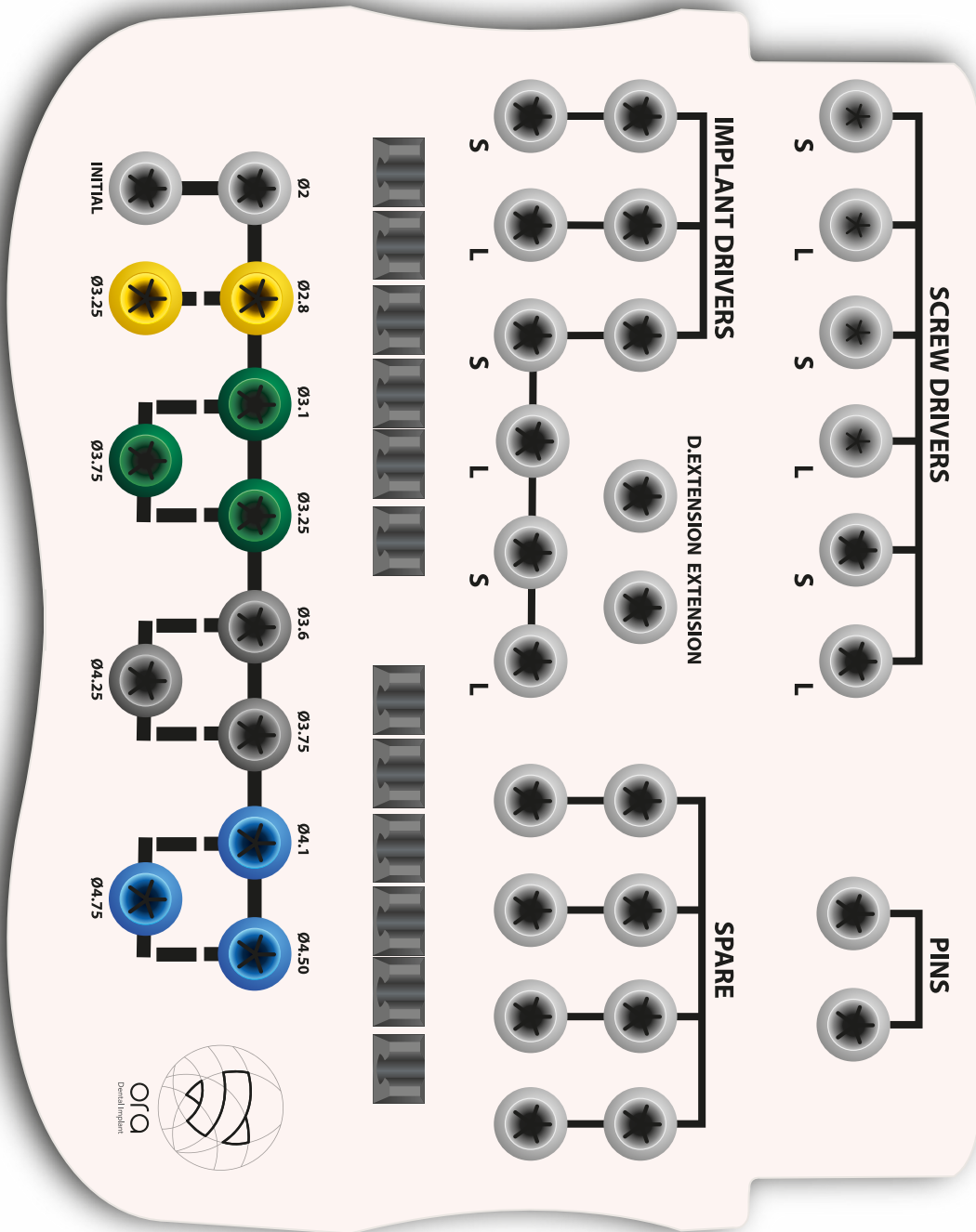


# SURGICAL TRAY - "TRAY IM"

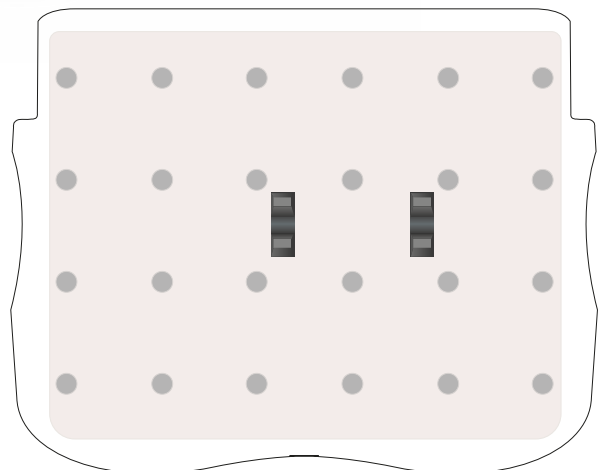
REF TRAY IM

## DIMENSIONS

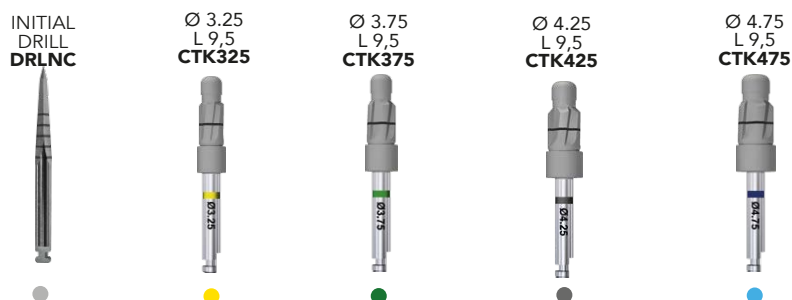
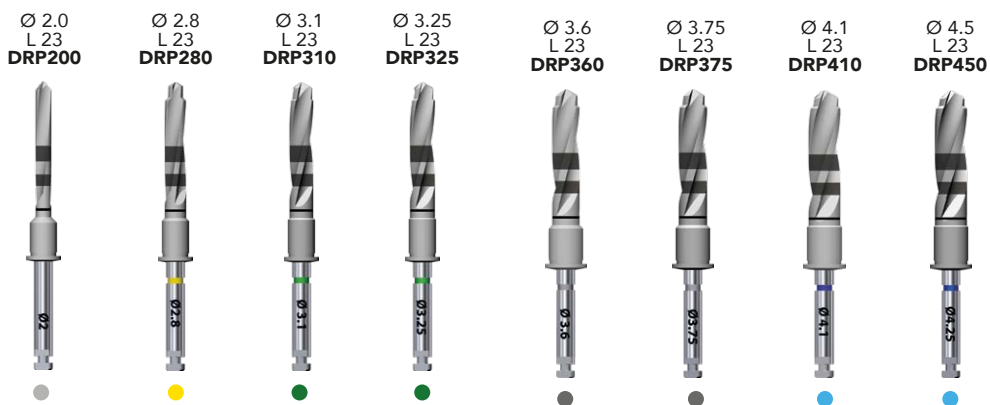
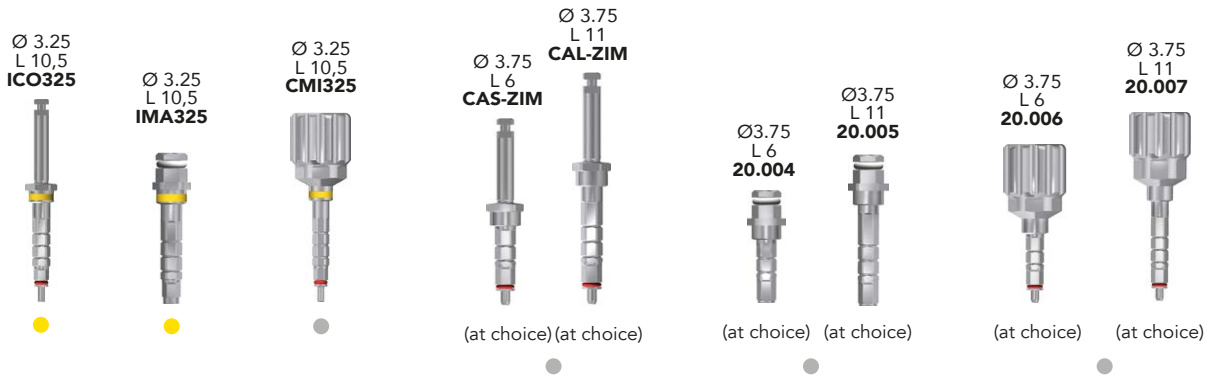
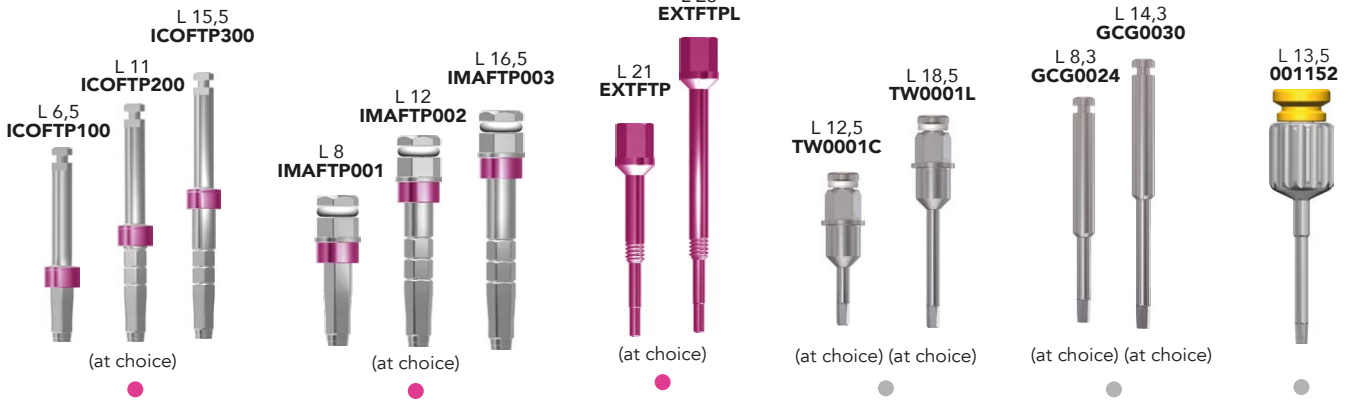
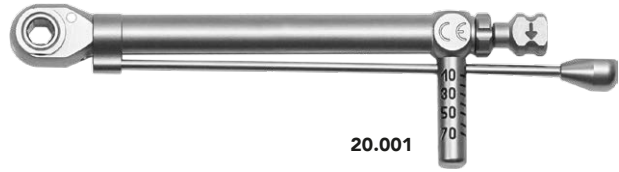
176x143 mm - h 63,5 mm



**COMPARTMENT INSIDE  
DYNAMOMETRIC RATCHET 20.001**

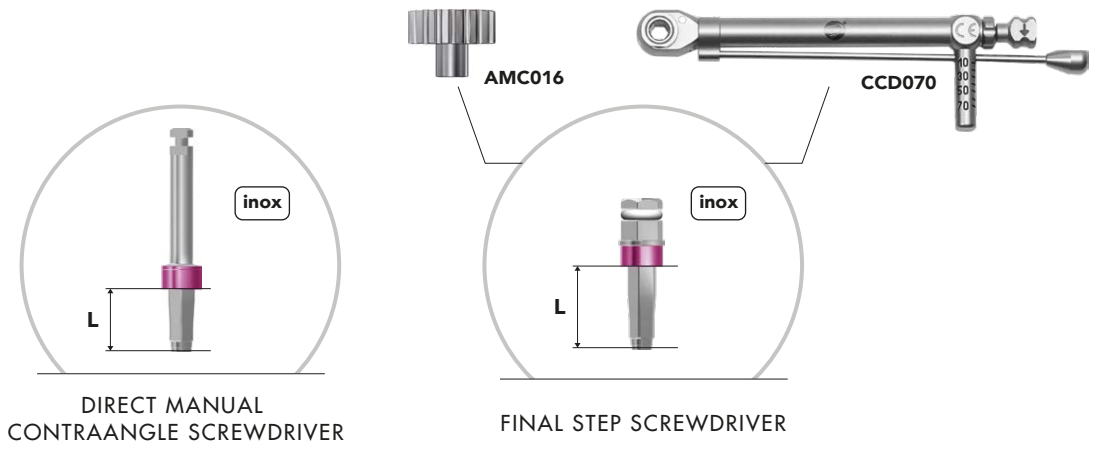


# SURGICAL TRAY - "TRAY M"



# SCREWDRIVERS

## FEATURES AND MEASURES



**DIRECT MANUAL CONTRAANGLE SCREWDRIVER**

**FINAL STEP SCREWDRIVER**

**L 6,5**

REF **ICOFTP100**



REF **IMAFTP001**



**L 8**

**L 11**

REF **ICOFTP200**



REF **IMAFTP002**



**L 12**

**L 15,5**

REF **ICOFTP300**



REF **IMAFTP003**



**L 16,5**

**L** Length mm

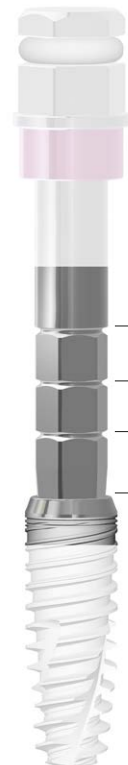


Hexagonal implant reference

Hexagonal head for ratchet



Hexagonal implant reference



6 mm

4 mm

2 mm

CONNECTION

**DIRECT MANUAL CONTRAANGLE SCREWDRIVER**

**FINAL STEP SCREWDRIVER**

It allows the implant removal from the ampoule and its insertion into the surgical site by ratchet or handwheel.

**SCREWDRIVERS'** References in millimeters. Useful for the management of hard and soft tissues in the positioning of the implants.

## WITH MANUAL SCREWDRIVER

Insert the screwdriver (IMAFTP001-IMAFTP002-IMAFTP003), connected to the handwheel (AMC016), into the implant making a slight rotation to allow good matching of the two hexagons (implant - screwdriver) and remove the implant. (Fig. 1)

Begin insertion of the implant in the alveolar surgical site using the manual screwdriver. Where bone density permits, it is possible complete insertion of the implant using the manual wrenches. (Fig. 2)

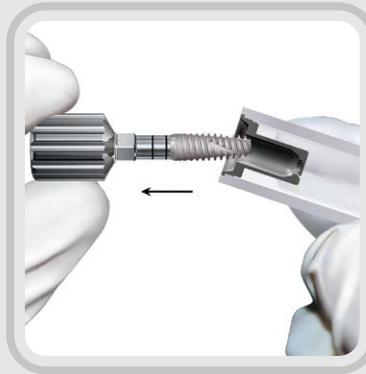


Fig.1

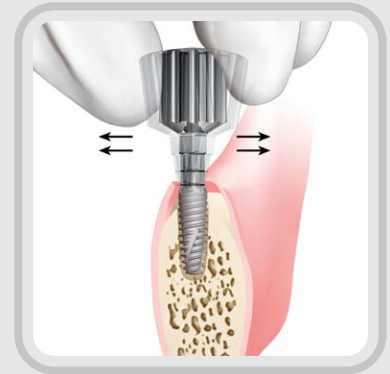


Fig.2

## WITH DIRECT CONTRA-ANGLE SCREWDRIVER

Insert the direct manual contra-angle screwdriver into the implant with a slight rotating motion to allow the correct coupling of the two hexagons (implant - screwdriver) and remove the implant. (Fig. 3)

Begin insertion of the implant in the alveolar surgery (Fig. 4) after having set the following parameters on the surgical unit:

- 1) Bi-phase procedure (submerged) RPM 15-20 Torque max. 35-40 Ncm
- 2) Monophasic procedure realized with submerged implants and healing screws, with deferred load RPM 15-20 Torque max. 40-45 Ncm
- 3) Monophasic procedure with immediate load/prosthesis RPM 15-20 Torque is incremental from 20 to 70 Ncm

If a surgical unit with good torque control is available, both in quantity and quality, it is possible to terminate insertion of the implant with the contra-angle; if the opposite is true, insert the device in the alveolar surgery as long as the power of the machine permits and complete the insertion manually proceeding as follows.



Fig.3



Fig.4

**To remove, exercise a slight lateral movement, right and left, in order to free the conometric matching.**

**To remove, exercise a slight lateral movement, right and left, in order to free the conometric matching.**

## FINAL SCREWDRIVER

Ensure that the tool is inserted in the position suitable for screwing and turn until the implant reaches the desired position. (Fig. 5)

Complete the insertion of the implant using the dynamometric wrench connected to the direct screwdriver of the ratchets. At times it is necessary to use the extensions, short REF. PMC115 and long REF. 110026 to connect to the tools described above. (Fig. 6)

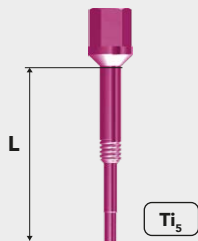


Fig.5



Fig.6

**To remove, exercise a slight lateral movement, right and left, in order to free the conometric matching.**

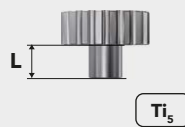


**PROSTHETIC EXTRACTOR**

Lenght (L) mm	REF
21	<b>EXPFTP</b>
28	<b>EXPFTPL</b>

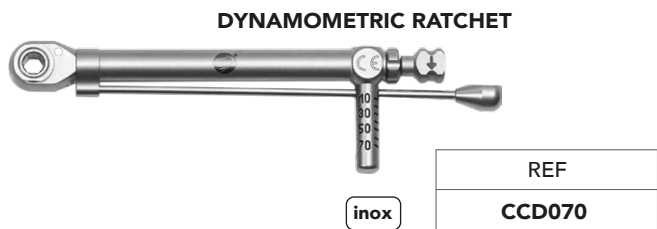
Ti<sub>5</sub>

**HANDWHEEL**



Lenght (L) mm	REF
6	<b>AMC016</b>

Ti<sub>5</sub>



**DYNAMOMETRIC RATCHET**

REF
<b>CCD070</b>

inox

**ADAPTOR FOR DYNAMOMETRIC RATCHET**



**ISO connection for ratchet**

Lenght (L) mm	REF
7	<b>ISO370</b>

inox



**PARALLEL PIN**

REF
<b>CPT3747</b>

Ti<sub>5</sub>

**RATCHET**



REF
<b>PGI100</b>



**EXTENSION**

Lenght (L) mm	REF
7	<b>PMC115</b>
12,5	<b>110026</b>

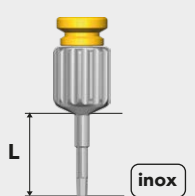
inox



**EXTENSION FOR DRILL**

Lenght (L) mm	REF
9	<b>KI589</b>

inox



**HEX SCREWDRIVER**

Lenght (L) mm		REF
4,5	Micro	<b>GMX100</b>
11,5	Extra Short	<b>GMM250</b>
13,5	Long	<b>001152</b>

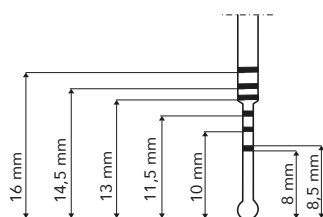
inox



**HEX CA DRIVER**

Lenght (L) mm		REF
8,3	Short	<b>GCG0024</b>
14,3	Long	<b>GCG0030</b>

inox



**DEPTH GAUGE**

REF
<b>001140</b>

Ti<sub>5</sub>

# HEALING ABUTMENT PROSTHETIC CONNECTION



ORA Dental Implant GHBH's FTP implant line offers clinicians **versatility of use** that makes this type of implant suitable for any surgical indication.

The **6° conometric connection**, with hexagonal position index and through screw, allows an accurate and stable matching of the prosthetic components.

Conometric matching at 6° between fixture and abutment, with the presence of a hexagonal index to facilitate the positioning of the abutment.



## IMPLASSIC FTP

Ø mm	Length mm
3.75	10 - 11,5 - 13 - 16
4.25	8 - 10 - 11,5 - 13 - 16
4.75	8 - 10 - 11,5 - 13

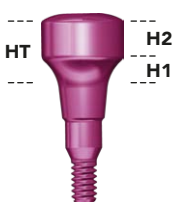
### ⚠ Important Warning

Excessive torques can compromise the hexagonal shape of the screws and screwing tools, causing impediments, even irreversible, during operating and prosthetic phases. The recommended tightening torques for the screws are summarized in the following table:

SCREW DESCRIPTION	INSTRUMENT	TORQUE Ncm
Surgical Screw	Manual screwdrivers	manually 8/10Ncm
Healing Abutment	Manual screwdrivers	manually 8/10Ncm
Transfer Screw	Manual screwdrivers	manually 8/10Ncm
Fixing Screw Abutment MUA (M1,4)	Manual screwdrivers	manually 8/10Ncm
Scan Abutment screws	Manual screwdrivers	manually 8/10Ncm
Fixing Screw Abutment	Adaptor for dynamometric ratchet Contra-Angle Screwdriver	20Ncm



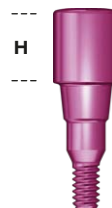
Given the importance of tightening torque, it is recommended to always monitor the perfect functionality of the tightening tools, evaluating carefully the tools and subjecting them to constant maintenance. It is always recommended to start tightening the screws using manual screwdrivers and, only for the determination of the correct tightening torque, for screws that have a specific torque, use the appropriate tools to impress the indicated torque.



### ANATOMIC HEALING ABUTMENT

Height (HT) mm	H1	H2	REF
4	2	2	<b>VGFTP4050</b>
6	3	3	<b>VGFTP6050</b>

Ti<sub>5</sub>



### CYLINDRICAL HEALING ABUTMENT

Height (H) mm	REF
4	<b>VGFTP3540</b>
6	<b>VGFTP3560</b>

Ti<sub>5</sub>



# COMPONENTS FOR PROSTHETIC CONOMETRY

## FASTENING SCREW

Included and available as a replacement

REF **VMTP037**  
Tighten to 20 Ncm

Ti<sub>s</sub>



### CONOMETRIC ABUTMENT 0°



Ti<sub>s</sub>

(HT) mm	REF
1	<b>MTP3710</b>
2	<b>MTP3720</b>

### CONOMETRIC ABUTMENT 10°



Ti<sub>s</sub>

(HT) mm	REF
1	<b>PTP3711</b>
1	<b>PTP3711R</b>
2	<b>PTP3712</b>
2	<b>PTP3712R</b>

### CONOMETRIC ABUTMENT 20°



Ti<sub>s</sub>

(HT) mm	REF
1	<b>PTP3721</b>
1	<b>PTP3721R</b>
2	<b>PTP3722</b>
2	<b>PTP3722R</b>

### CONOMETRIC CAP FOR WELDING



Ti<sub>s</sub>

REF
<b>CPD400</b>

### CONOMETRIC CAP FOR AESTHETIC MATERIAL



Ti<sub>s</sub>

REF
<b>CPP004</b>

### CONOMETRIC TRANSFER SNAP



Pmma

REF
<b>CAI055</b>

### CONOMETRIC ANALOG



Ti<sub>s</sub>

REF
<b>AFTPCAP</b>

### HEALING ABUTMENTS PROSTHETIC CONOMETRY ABUTMENTS



Pmma

REF
<b>CGD100</b>

# OVERVIEW PROSTHETIC COMPONENTS

## FASTENING SCREW

Included and available as a replacement

REF **VMTP037**  
Tighten to 20 Ncm

Ti<sub>s</sub>



### STRAIGHT ABUTMENT SNAP



Ti<sub>s</sub>

(HT) mm	REF
2	<b>PDFTP100</b>
3	<b>PDFTP200</b>

### ANGLED ABUTMENT 10° SNAP



Ti<sub>s</sub>

(HT) mm	REF
2	<b>PAFTP1001</b>
3	<b>PAFTP1002</b>

### ANGLED ABUTMENT 20° SNAP



Ti<sub>s</sub>

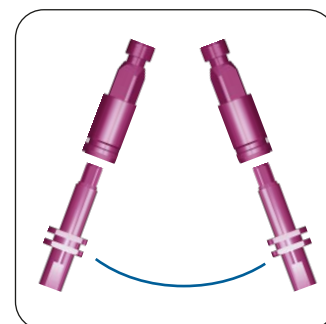
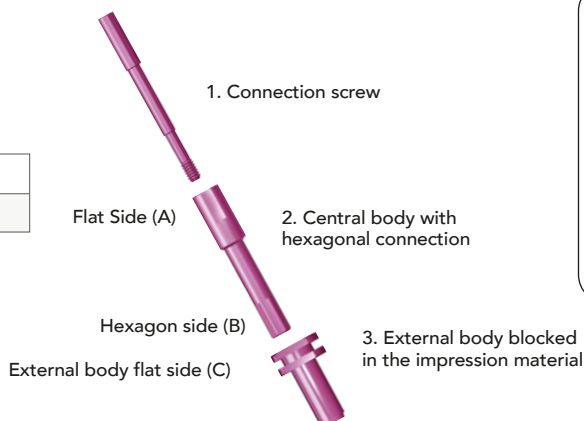
(HT) mm	REF
2	<b>PAFTP2001</b>
3	<b>PAFTP2002</b>

### THREE-PART PRECISION TRANSFER FOR PICK-UP TECHNIQUE



Ti<sub>s</sub>

REF
<b>TPRFTP</b>



Transfer for Pick Up technique. Used with a perforated impression tray, it allows the removal of the central body of the Transfer by extracting the anti-rotation hexagonal connection, in order to facilitate the removal of the impression, in the event of disparallelisms between implants.

Indications Analog alignment:

the flat side (A) is always corresponding to the connection hexagon side (B). For a practical alignment it is recommended to keep the flat side (A) and connection hexagon side (B) in correspondence with the external body flat side (C).

### PLASTER ANALOG



Ti<sub>s</sub>

REF
<b>AGFTP37</b>

### TRANSFER SNAP

For PDFTP and PAFTP abutments



Peek

REF
<b>SNAPFTP</b>

Pack. 4 pcs

# OVERVIEW PROSTHETIC COMPONENTS

## EQUATOR FTP



(HT) mm	REF
0,5	030FTPE05
1	030FTPE1
2	030FTPE2
4	030FTPE4

20 Ncm Torque adapter

## KIT SMART BOX



REF
335SBC

## CAPS ASSORTMENT KIT



REF
192ECE

## VIOLET CAP GR 2700 (strong)



REF
140CEV

Pack. 4 pcs

## CLEAR CAP GR 1800 (standard)



REF
140CET

Pack. 4 pcs

## PINK CAP GR 1200 (soft)



REF
140CER

Pack. 4 pcs

## YELLOW CAP GR 600 (extra-soft)



REF
140CEG

Pack. 4 pcs

## BLACK CAP FOR LABORATORY



REF
140CEN

Pack. 4 pcs

## STAINLESS STEEL HOUSING



REF
141CAE

Pack. 4 pcs

## SMARTBOX HOUSING WITH BLACK CAP



REF
330SBE

## LABORATORY ANALOG



REF
144AE

Pack. 2 pcs

## IMPRESSION COPINGS NORMAL SIZE – OT EQUATOR



REF
044CAIN

Pack. 2 pcs

## TRANSPARENT PROTECTIVE DISKS



REF
100PD

Pack. 10 pcs

# OVERVIEW PROSTHETIC COMPONENTS

## FASTENING SCREW

Included and available as a replacement

REF **VMTP037**  
Tighten to 20 Ncm



Ti<sub>s</sub>

### ABUTMENT TYPE SIRONA S



HT

Ti<sub>s</sub>

(HT) mm	REF	
0,5	PSFTP050	●
1	PSFTP100	●
2	PSFTP200	●

Suitable for digital and traditional bonding technique CAD-CAM. For single screwed elements on the implant. **Portion coronal compatible SIRONA.**

### ROTATING ABUTMENT TYPE SIRONA S



HT

Ti<sub>s</sub>

(HT) mm	REF	
0,5	PSFTP050R	●
1	PSFTP100R	●
2	PSFTP200R	●

Suitable for digital and traditional bonding technique CAD-CAM. For single screwed elements on the implant. **Portion coronal compatible SIRONA.**

### SCAN ABUTMENT SIRONA



Plastica

REF
<b>6431311</b>

Pack. 36 pcs

Digital CAD-CAM Intraoral Scan and Laboratory Scan. For single cemented and screwed elements. On SIRONA pillar.

### CYLINDER



Ti<sub>s</sub>

REF	
CTFTP420	●
CTFTP420R	●

### CASTABLE ABUTMENT



Pmma

REF	
CCFTP370	●
CCFTP370R	●

### PREMILLED



\*

Ti<sub>s</sub>

REF
PRML11FTP
PRML16FTP

### \* FASTENING SCREW

Included and available as a replacement

REF **VMTP037**  
Tighten to 20 Ncm

The Pre-Milled are indicated to design and carry out customized abutment processing depending on the patient's clinical case. The Dental Technician, through the ORA Libraries, has the possibility to determine the morphology of the abutment with the main CAD Designers. The Pre-Milled are available in 2 diameters (11.5mm and 16mm) for each prosthetic platform, depending on the inclination designed and are compatible with the most widespread attachment-machine on the market.

# PROSTHETIC DIGITAL COMPONENTS

## SCAN ABUTMENT



\* **SCAN ABUTMENT SCREW** included

Also available as a replacement.  
REF **VFSFTP**

Ti<sub>5</sub>

REF
<b>SCANFTP</b>

Digital CAD-CAM Intraoral Scan and Laboratory Scan.  
For single cemented and screwed elements - multiple cemented elements.

## DIGITAL ANALOG



Ti<sub>5</sub>

REF
<b>AGFTP37DG</b>

Analog for digital models, specific for applications through the manufacture of models made with 3D printing/prototyping. The characteristic shape with rounded edges, allows easy insertion into the model seat, without interference and friction with the resinous material of the models. The apical screw allows to always obtain a total working stability. This prosthetic component must be used through the ORA Libraries.

## DIGITAL ANALOG - INDICATIONS OF USE



CORRECT POSITIONING



**!**  
WARNING  
DO NOT orient the Scan Abutment in the unsuitable and aligned secondary position

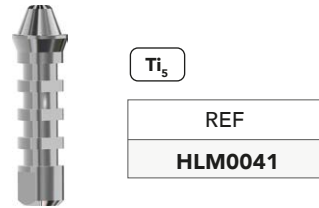
It is necessary to match up the smaller portion of the Scan Abutment, which is **always** oriented on the hexagonal side of the connection, with the side of the external square shape of the analogous digital body.

# OVERVIEW PROSTHETIC COMPONENTS FOR TORONTO BRIDGE, SCREWED BRIDGE AND FULL ARCH

## ABUTMENT MUA TRANSFER



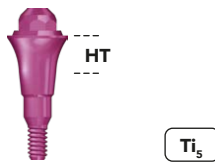
## ABUTMENT MUA ANALOG



## PROTECTION CAP MUA



## STRAIGHT ABUTMENT MUA



(HT) mm	REF
1,5	<b>PEFTP150</b>
3	<b>PEFTP300</b>

## ANGLED ABUTMENT 17° MUA



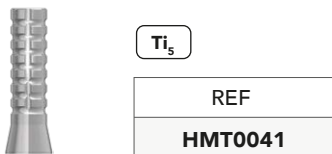
(HT) mm	REF
2	<b>PEFTP1720</b>
3	<b>PEFTP1730</b>

## ANGLED ABUTMENT 30° MUA



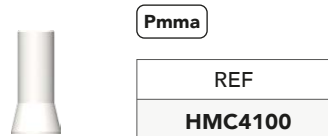
(HT) mm	REF
2	<b>PEFTP3020</b>
3	<b>PEFTP3030</b>

## CYLINDER MUA



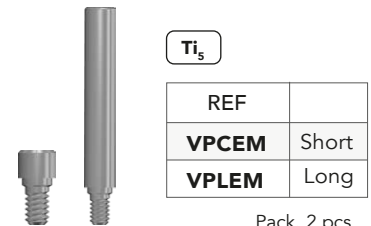
Prosthetic screw NOT included

## CASTABLE ABUTMENT MUA



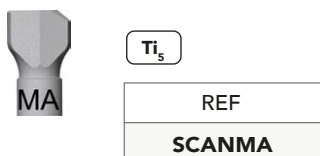
Prosthetic screw NOT included

## PROSTHETIC SCREW



## ABUTMENT MUA DIGITAL COMPONENTS

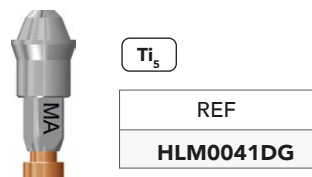
### SCAN MUA



Screw included (REF VPCEM)

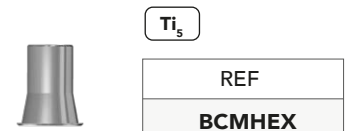
Suitable for digital CAD-CAM technique, for intraoral and laboratory scans. For multiple screwed elements.

### DIGITAL ANALOG MUA



Analog for digital models, specific for applications through the manufacture of models made with 3D printing/prototyping. The characteristic shape with rounded edges, allows easy insertion into the model seat, without interference and friction with the resinous material of the models. The apical screw allows to always obtain a total working stability. This prosthetic component must be used through the ORA Libraries.

### BONDING BASE FOR ABUTMENT MUA



Suitable for digital CAD-CAM technique, for intraoral and laboratory scans. For multiple screwed elements.

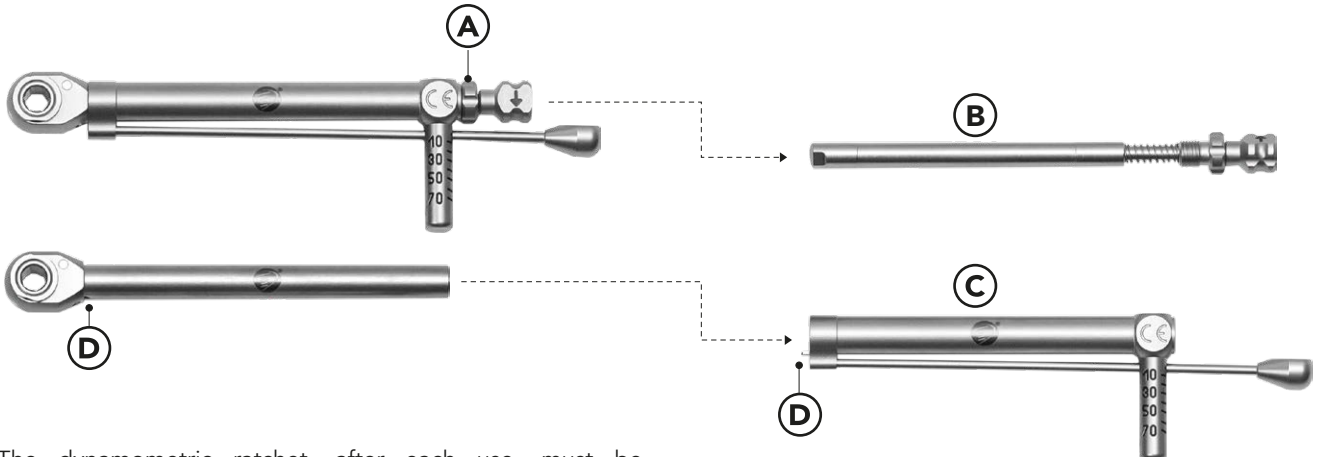


# INSTRUMENTS



**DYNAMOMETRIC RATCHET**  
REF **CCD070**

## CLEANING AND MAINTENANCE



The dynamometric ratchet, after each use, must be disassembled for cleaning. This maintenance operation does not require any tools.

Completely unscrew the screw **(A)**, remove the whole pawl **(B)** and then the flexible dynamometric bar **(C)**. Once disassembled, clean according to the instructions for use and maintenance attached to the device, brush with non-metallic rigid bristles, even in hollow areas with pipe cleaner for a complete removal of biological residues.

Once the cleaning and disinfection phase has been completed, reassemble the ratchet using the reverse disassembly procedure, making sure to match the pin **(D)** in the housing dedicated.

## TIGHTENING TOOLS FOR DYNAMOMETRIC RATCHET

### ADAPTOR FOR FASTENING SCREWS

inox



	REF
Short	<b>TW0001C</b>
Long	<b>TW0001L</b>

### OCTA ABUTMENT ADAPTOR

inox



REF
<b>TW0080</b>

### ISO CONNECTION FOR RATCHET

inox



Lenght (L) mm	REF
7	<b>ISO370</b>

### HEX SCREWDRIVER

inox



Lenght (L) mm		REF
8,8	Short	<b>GCG0024</b>
14,8	Long	<b>GCG0030</b>

# PRELIMINARY INDICATIONS FOR SURGICAL INSTRUMENT USE

## PREVENTION

Besides correct and continuous long-term maintenance, wear and tear of the instruments can also be prevented and slowed down.

In the first place every instrument must only be used for the envisaged and indicated use.

The instruments used must be cleaned immediately after the end of surgery.

Remove residue and encrustations only with soft brushes and NOT with metal brushes.

When envisaged, disassemble the instruments and deeply clean the cavity. The devices must be fully immersed in the most appropriate detergents or disinfectants for the material, and left to rest for a period of time that never exceeds the manufacturer's instructions.

After disinfecting them, rinse thoroughly with water and dry the devices with a clean and dry cloth. Complete with a jet of compressed air.

## PACKAGING AND STERILITY

- ORA Implant tools are supplied as non sterile in heat-sealed Pouches in containing the leaflet.
  - ORA Implant tools can be used again and therefore it has to be washed and sterilised prior to their usage.
- Dental Tech validated the following cleansing and disinfection method:

## MANUAL CLEANING

- Just after the use of ORA Implant equipment, place the equipment into a container with a peracetic acid based solution at concentration of 2% (NO GLUTARALDEHYDE OR SODIUM HYPOCHLORITE ), as long as 18 minutes.
- After-ward rinse carefully.

## MANUAL DISINFECTION

- Place the equipment into a container with a peracetic acid based solution at concentration of 4% (NO GLUTARALDEHYDE OR SODIUM HYPOCHLORITE ), as long as 15 minutes.
- Rinse generously
- Examine the equipment and make sure there are no organic remains. Carefully scrub the outer parts with a non-metal bristled brush.

## MANUAL RINSE

- Place the equipment into ultrasound bath, and wash it for approx. 18 minute and then rinse carefully.

## DRY

- Perfectly dry the equipment, seal it individually with material suitable for moist heat sterilisation.

## CHECK

After the cleaning phases, check that none of the instruments presents signs of corrosion, contamination or damage. Especially use a magnifying lens to check the most concealed areas, the joints and the handles.

If any contamination is detected, repeat the cleaning procedure.

In case of damage, dispose of the instrument as established by the laws in force for waste management.

## STERILISATION

Sterilise in a steam autoclave saturated with distilled water by using a systematically validated and controlled sterilisation method, according to provisions laid down by standard ISO 17665-1:2007 "Sterilisation of healthcare products" (as amended). Requirements for validation and routine control of moist heat sterilisation in healthcare facilities".

- Dental Tech validated the following Autoclave moist heat sterilization cycle:

3 minutes

134 °C



**Warning** The use of suitable protection during cleaning and sterilisation of contaminated instruments enhances personal safety during these phases.

Since ORA tools are manufactured in different materials, they shall be washed and sterilized one by one.

## PRESERVATION

After the sterilisation phase, the instruments must be preserved in the sterilised package in a dry, dust-free place, far from heat sources. The bags must only be opened before use.

The storage period of sterilised items must not exceed the period recommended and indicated on the bag.

## DISPOSAL PROCEDURES

At the end of its life the medical device must be disposed of according to the methods established by national laws in force for waste management.

# INSTRUMENTS FOR SURGERY WARNINGS AND LEGENDS

## INSTRUMENT FOR SURGERY

The surgical instrumentation of the Dental Tech Implant System is simple and essential, responding to every clinical need and treatment protocol. All drills and components are laser marked, to allow preparation of the implant site correctly to the established depth, and a predictable and safe positioning of the implant. The instruments are available individually or in sets with different types of surgical kit.

## HOW TO USE THE SURGICAL INSTRUMENTS

So as not to cause mechanical and/or thermal damage to bone tissue in the zone in which the implant is to be inserted, and to obtain a congruous surgical site (indispensable to achieving good osseointegration of the implant) some fundamental rules must be respected:

- Use drills with gradual diameter progression: the same instruments must not be used for more than 25 osteotomies;
- Do not exceed 800 RPM during the osteotomy;
- Do not exceed 20 RPM in the event of tapping with the contra-angle;
- Ensure, during the osteotomy, that the instruments work in axis;
- Do not exert lateral pressure during the osteotomy and tapping;
- The osteotomy must be performed exercising light pressure and back and forth movements on the axis of the instrument;
- Use generous irrigation with physiological solution, both during drilling and tapping of the surgical site;
- Ensure that during the intervention the irrigation canals of the instruments are clear;
- Avoid categorically, during surgery, the cooling of instruments and the implant site with the air-water syringes tips.

## NON-ROTATING INSTRUMENT

The non-rotating instrument is compatible with all ORA implant systems.







## WARNINGS

**RESPONSABILITY** The use of non-original components, produced by third-parties may compromise the functionality of the implants and their elements, compromising the final result and voiding the guarantee of the manufacturer. The application of the product occurs outside the control of ORA and is the sole responsibility of the end user. We accept no liability for any damage resulting from such activities.



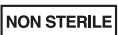







**INSTRUCTIONS FOR USE** These are to be considered solely as recommendations. This information is not sufficient and does not exempt the user from ensuring the adequacy of the product for its intended use through continued training.

**VALIDITY** This nullifies all previous versions. The images, the content and the products illustrated are subject to modification without warning.

## MATERIALS LEGEND

	Gold Alloy
	Surgical Stainless Steel
	Polyetereeterechetone
	Polymethylmethacrylate
	Titanium gr.V ELI for medical use
	Polymer

## PACKAGING SYMBOLS LEGEND

	Lot number
	Sterilized by gamma rays
	Not sterile
	Product code
	Reusable
	Use by
	Non-reusable
	Attention, consult the supplied documentation
	Directive 93/94/CEE conformity mark
 0123	Notified body identification

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Abrahamsson I, Zitzmann NU, Berglundh T, Linder E., Wennerberg A, Lindhe J. The mucosal attachment to titanium implants with different surface characteristics: an experimental study in dogs. *J Clin Periodontal* 2002; 29(5): 448-55.

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Micro-threads eliminate bone loss due to crestal disuse atrophy  
Hansson, *Clin Oral Imp Res*, 1999.

Topografia della neoformazione ossea perimplantare: studio sperimentale  
G Petrone, G. Iezzi, M. Piattelli, A. Scarano  
Dipartimento di scienze Odontostomatologiche,  
Università " G. D'Annunzio" Chieti- Pescara.

Surface Chemistry Effects of topographic Modification of Titanium Dental Implant Surfaces:

### 1. Surface Analysis

M. Morra, dr. chem / C. Cassinelli, dr. Biol / G. Bruzzone, MD  
A. Capri, MD / G. Di Santi, MD / R. Giardino, MD / M. Fini, MD.  
*Int. JOMI* 2003; 18:40-45

Surface Chemistry Effects of topographic Modification of Titanium Dental Implant Surfaces:

### 2. In Vitro Experiments

M. Morra, dr. chem / C. Cassinelli, dr. Biol / G. Bruzzone, MD  
A. Capri, MD / G. Di Santi, MD / R. Giardino, MD / M. Fini, MD.  
*Int. JOMI* 2003; 18:46-52

Valutazione della precisione della connessione tra moncone ed impianto

Benedicenti S.\* / Balboni C.\*\* / Maspero F. \* / Benedicenti A.\*  
*Quintessence International* 3/4 bis 2001

Adesione cellulare epiteliale su superfici di titanio sabbiate e acidificate: studio in vitro

I. Vozza / A. Scarano\* / S. Rossi / M. Quaranta  
*Supplemento n.1 a Doctor OS anno XIV n.1 gennaio 2003*

Valutazione istologica della risposta ossea a una nuova superficie implantare sabbia e mordenzata: uno studio sperimentale sul coniglio  
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