Bone Reduction Guide Package

implant concierge™


V3
MPG5

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Primary Features

Indicator Lines:

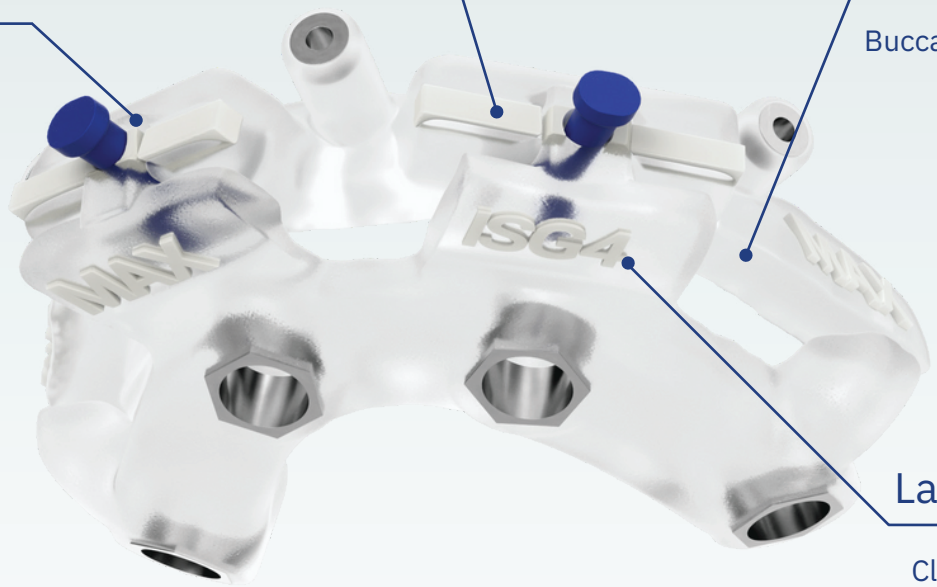
Verify each step with confidence

Dovetail Joints:

Secure and stable connection

Conservative:

Buccal only design



Labeled System:

Clear recognition

Anatomical Verification:

Precise fit to anatomy

Horizontal Design:

Low Profile and strong

Overview

The Bone Reduction Guide Package is a comprehensive surgical manual that provides a detailed step-by-step plan utilizing a sequential guided approach to ensure predictable bone reduction, implant placement, and provisional restoration delivery with confidence.

Suggested Items:

Surgical:

- Guided Surgical Kit
- Anchor Pin Drills and Pin
- Bone Reduction Instruments
- Bone Profiler
- Abutment Driver
- Contra-angle Driver

Provisional:

- Luting Material
- Polishing Bar
- Carbide Bur
- Healing Caps
- MUA Abutments
- Temporary Cylinders

Delivery Guide #1

The Delivery Guide is designed to intimately fit onto the existing teeth for terminally dentate cases or the alveolar crest for fully edentulous cases. This guide contains inspection windows that allow you to verify that the Delivery Guide is seated anatomically.

Bone Reduction Guide #2

The Bone Reduction Guide seats intimately on the buccal bone and serves as the foundation for each guide to connect using dovetail joints.

Multi-Purpose Guide #3

The Multi-Purpose Guide can serve up to three different functions:

1. Helps anatomically verify that the bone reduction is adequate
2. Provides guidance to help deliver the multi-unit abutments
3. A vertical spacer with indexes to assist the positioning of the Passive Fit Bridge

Implant Surgical Guide #4

The Implant Surgical Guide provides depth and direction control for each implant osteotomy. If applicable, implant timing marks may be included to indicate rotational placement of the implant.

Blue Pins

The Blue Pins can be used for two purposes:

1. Ensure the guides are aligned and secure
2. To protect the screw access channel on your temporary cylinders

Block Out Gaskets

Block Out Gaskets are pre-trimmed gaskets that are placed over the temporary cylinders to ensure that the Passive Fit Bridge does not lock onto the Multi-Purpose Guide or anatomy.

Bone Reduction Model

The printed model allows you to stage the delivery of the guides to see the planned bone reduction. It can also serves as an analog model if ordered.

Surgical Protocol

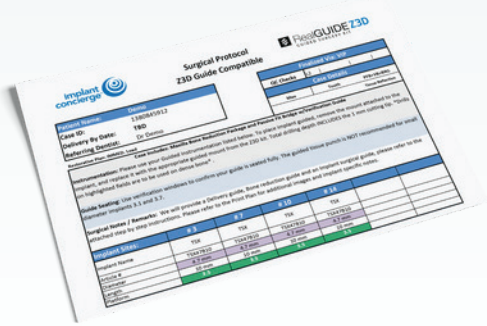
The Surgical Protocol provides case specific notes from your finalized plan,the implant manufacturer's drilling protocol and anchor pin information.

Implant Report

The Implant Report is generated by the RealGUIDE™ software. It includes information regarding the implants, abutments and bone density measurements.

Provisional Component List

The Provisional Component List provides information regarding restorative components needed to order for surgery.



Screw-Retained Bridge

The Screw-Retained Bridge is a PMMA surgery-ready provisional intended for a chair-side immediate pick-up. It is designed with injection ports on the buccal gingiva and occlusal openings to allow the luting material to bond to the temporary cylinders. The SRB works in harmony with the BRG and the MPG.

PFB Lab Duplicate

The PFB Lab Duplicate an exact "unfinished" PMMA copy of the Passive Fit Bridge. If added to the package, be sure to order an extra set of temporary cylinders and prosthetic screws. Send the PFB Lab Duplicate to the restoring doctor or lab to assist in the fabrication of the final prosthesis.

Immediate Denture

The Immediate Denture is optional. It can be used if primary implant stability is not achieved or an immediate fixed restoration is not indicated. It can also be used for a chairside conversion, if desired.

Bite Verification Applianc

The Bite Verification Appliance allows you to correctly align the Passive Fit Bridge to the opposing dentition horizontally and vertically.

Deliver Bone Reduction Guide

Soft Tissue Reflection

- Do not extract teeth yet. Only extract teeth if indicated on the surgical protocol sheet
- Reflect the soft tissue from the buccal alveolar bone extending apically to allow the Bone Reduction Guide to seat properly
- Adequate soft tissue reflection must be achieved to ensure accurate seating of the Bone Reduction Guide

Position Bone Reduction

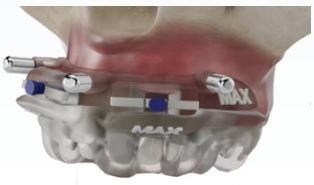
- Verify the Bone Reduction Guide [#2] fits intimately onto the buccal bone

Connect Delivery Guide to Bone Reduction Guide

- Seat the Delivery Guide [#1] over the dentition
- Utilize the anatomical verification windows to ensure that the Delivery Guide [#1] is fully seated
- Verify the Bone Reduction Guide [#2] intimately fits onto the buccal bone
- Connect the Bone Reduction Guide [#2] to the Delivery Guide [#1]
- Ensure the indicator lines are aligned and secure the Guides with the Blue Pins.

Deliver Anchor Pins

- Do not drill all anchor pin osteotomies at the same time
- Keep constant apical pressure on the guides while drilling the anchor pin osteotomies
- Drill the anchor pin osteotomy that is closest to the midline
- Insert the anchor pin until it reaches depth
- Repeat for each anchor pin site alternating bilaterally



Extractions & Alveoloplasty

Remove Delivery Guide

- Remove the Blue Pins
- Carefully remove the Delivery Guide [#1], from the Bone Reduction Guide [#2]

Extract Teeth

- Extract teeth as indicated on the Surgical Protocol
- Ensure not to use the Bone Reduction Guide [#2] as a leverage bar

Alveoloplasty

- Minimizing contact with the Bone Reduction Guide [#2], reduce the alveolar crest until level with the guide

Connect Multi-Purpose Guide

- Connect the Multi-Purpose Guide [#3] to the Bone Reduction Guide [#2]
- Verify the indicator lines are aligned
- If indicator lines are not aligned, additional alveoloplasty is required
- Use the Blue Pins to secure guides together

Remove Multi-Purpose Guide

- Remove the Blue Pins
- Remove the Multi-Purpose Guide [#3] from the Bone Reduction Guide [#2]

Implant Osteotomies & Placement

Connect Implant Surgical Guide

- Connect the Implant Surgical Guide [#4] to the Bone ReductionGuide [#2]
- Verify the indicator lines are aligned
- Use the Blue Pins to secure the guides together

Implant Osteotomies

- Carefully review and follow the Surgical Protocol and implant manufacturer guidelines

Implant Placement

- Fully guided cases will allow implant placement through the guide as indicated on the Surgical Protocol
- Ensure proper rotation of the implant is aligned to the guide markers (if provided)
- Non-fully guided cases will require removal of the Surgical Guide [#4] before placing the implants

Remove Implant Surgical Guide

- Remove the Blue Pins
- Remove the Implant Surgical Guide [#4]
- If the implant is placed sub-crestal, remove the bone around the implant shoulder to allow abutment to seat

Guided Prosthetics

Photogrammetry: Scan Bar Screw-Retained Bridge

Connect Multi-Purpose Guide (MPG)

- Connect the Multi-Purpose Guide [#3] to the Bone Reduction Guide [#2]
- Verify the indicator lines are aligned
- Use the Blue Pins to secure the guides together

Deliver Multi-Unit Abutments

- Deliver the multi-unit abutments (MUAs) as indicated on the Provisional Component List
- For angled implants, use the carrier to align the MUA hex driver with the indicator line on the Multi-Purpose Guide [#4]
- If the abutment does not fully seat, you may need to profile the bone around the implant shoulder
- Tighten the abutments according to manufacturer's torque recommendations

Verify Seat of MUAs with Radiograph

- Take a radiograph to verify proper seat of the multi-unit abutments (MUA)

Remove Multi-Purpose Guide

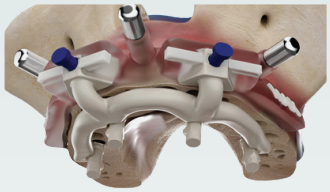
- Remove the Blue Pins
- Remove the Multi-Purpose Guide [#3]

Deliver Multi-Unit Scan Bodies

- Deliver the multi-unit scan bodies ensuring they are fully seated

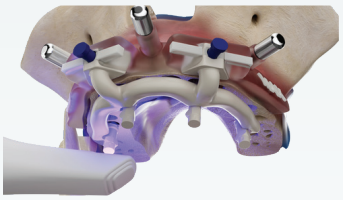
Deliver Scan Bar

- Connect the Scan Bar to the Bone Reduction Guide [#2]
- Verify that the indicator lines are aligned
- Use the Blue Pins to secure the Scan Bar
- If the Scan Bar touches the scan body, adjust with a bur to maintain a clearance of 1-2 mm



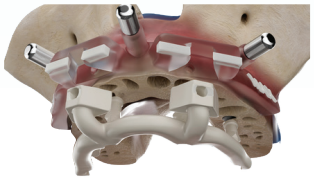
Capture Scan Bar and Scan Bodies

- Capture an intraoral scan of the Scan Bar and scan bodies
- Ensure there are no voids



Remove Scan Bar

- Remove the Blue Pins
- Remove the Scan Bar
- Do not remove the scan bodies

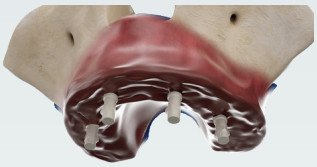


Remove Bone Reduction Guide

- Remove the Anchor Pins and then the Bone Reduction Guide [#2]
- Evaluate the surgical site and smooth any sharp edges if needed

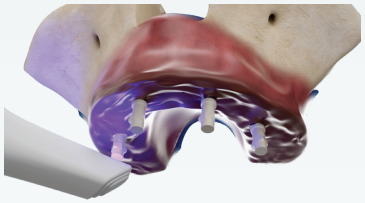
Suture Tissue

- Apply bone graft, if needed
- Suture the tissue around the Multi-Unit Abutments (MUA) and scan bodies



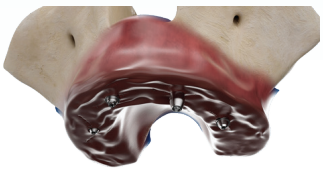
Capture Scan Bodies and Soft Tissue

- Capture an intraoral scan of the scan bodies and surrounding tissue
- Ensure there are no voids



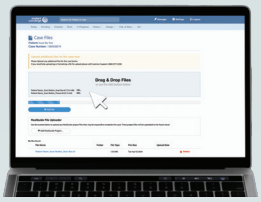
Remove Scan Bodies & Deliver Healing Caps

- Remove the scan bodies
- Seat healing caps over the Multi-Unit Abutments (MUA)



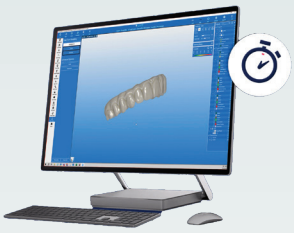
Send Files to Implant Concierge

- Open the Implant Concierge Platform
- Upload your .STL files using the Red Action buttons



Implant Concierge to Design Screw-Retained Bridge

- Implant Concierge will confirm receipt of .STL files
- Implant Concierge will design the Screw-Retained Bridge
- The provisional bridge .STL file will be uploaded



30 - 60 Min

Print Screw Retained Bridge

- Print Screw-Retained Bridge in office or local lab

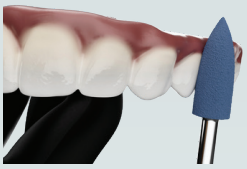
Note: Implant Concierge can also print and ship

Stain and Glaze Screw-Retained Bridge

- Stain and glaze Screw-Retained Bridge
- Ensure screw access channels are free of debris

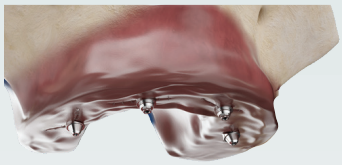
Finish and Polish Screw-Retained Bridge

- Use a fine rubber point or/and a wheel to polish all surfaces



Remove Healing Caps

- Remove the Healing Caps



Deliver Screw-Retained Bridge

- Seat the Screw-Retained Bridge
- Initially, hand tighten each prosthetic screw in a star pattern
- Torque the prosthetic screws according to manufacturer's recommendations

Adjust Occlusion

- Adjust occlusion to achieve bilateral contacts

Note: It is common for bite to be slightly open immediately after surgery. Final occlusal adjustments should be made 24 – 36 hours after surgery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or scan the QR code to view the video
version of this booklet.

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