DENTALTECH

SLIM
IMPLANT LINES

PRODUCT CATALOGUE
www.dentaltechworldwide.com

INDEX

BWS®

IMPLANT SURFACE

Osseointegration with over 30 years of history

OPTIMAL ROUGHNESS VALUE

SANDBLASTING AND ACID ETCHING

Sandblasting and etching processes of the implant surface allow to obtain optimal roughness values that make the adhesion of fibrin to the surface more tenacious and facilitate the bone healing process, significantly reducing the time.

CONTACT OSSEOINTEGRATION

FIBRIN ADHERENCE

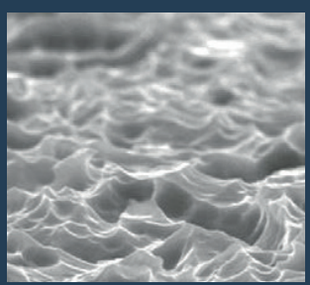
The capacity of BWS® to retain fibrin, lets osteoblasts migrate from the bone to the implant surface and reproduce there, generating new bone in direct contact with the titanium (contact Osseointegration).

SEM CONTROL

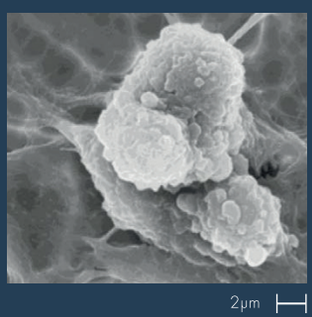
THE IMPLEMENTED PROTOCOL PROVIDES VERIFICATION OF EACH BATCH OF PRODUCTION

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).

Packaging takes place in controlled environments (Clean Room ISO 7) with packaging impermeable to micro organisms.
A gamma-ray sterilisation process guarantees the destruction of all contaminants.



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



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

BWS® surface is made by a sandblasting and acid etching process. This double process allow to obtain an extremely clean surface with a uniform and homogeneous roughness that promotes cell adhesion.

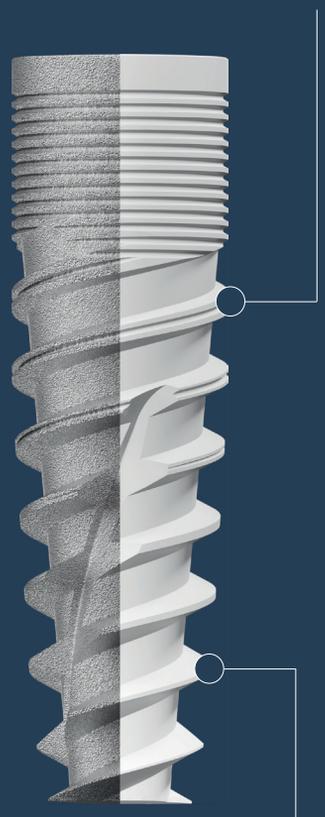
ImpLogic® AT 3.25
Active Thread

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.

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.

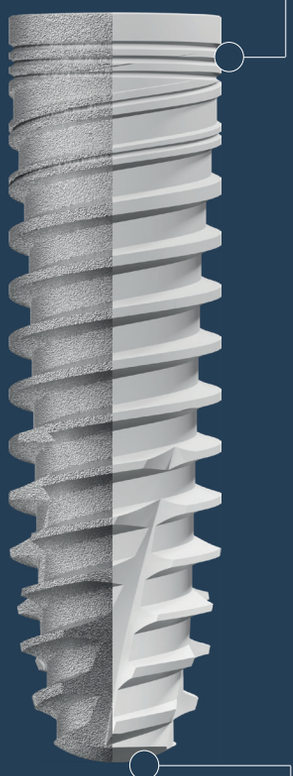
OPTIMAL CHOICE OF POSITIONING
Allows a change in direction in order to achieve the optimum position of restoration, especially in post-extraction sites.

ImpLassic FT3 3.25

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.

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.



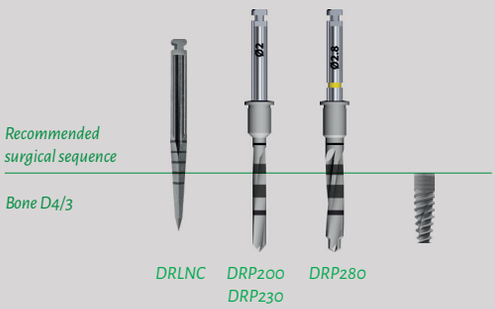
APICAL DRILLS
Drills with helicoidal progress to enhance stable penetration.

ImpLogic® AT DIAMETER - Ø 3.25 mm

Cover screw included

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.

Length (L) mm	REF
10	CVT3210/SC
11,5	CVT3211/SC
13	CVT3213/SC
16	CVT3216/SC



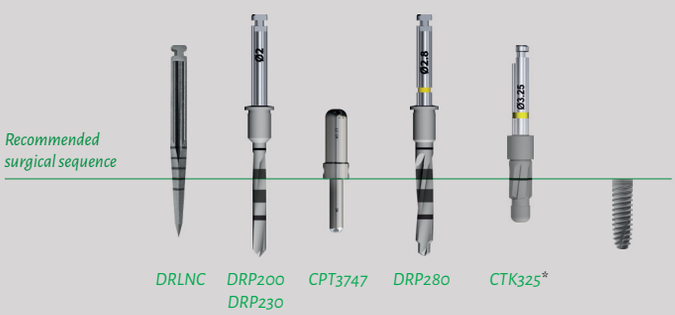
ImpLassic FT3 DIAMETER - Ø 3.25 mm

Cover screw included

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.

*It is reccomanded if the cortical bone is very persistent

Length (L) mm	REF
8	FTC3208/SC
10	FTC3210/SC
11,5	FTC3211/SC
13	FTC3213/SC
16	FTC3216/SC



Drill Stop

STOP Ø 4.5 mm Material: Ti5

Length (L) mm	REF
6	STC2506
7	STC2507
8	STC2508
10	STC2510
11,5	STC2511
13	STC2513
16	STC2516

Ø
4.5

Parallel drill L 23 mm Material: Inox

Diameter (Ø) mm	REF
2.0	DRP200
2.3	DRP230
2.8	DRP280

Countersink
Material: Inox

Diameter (Ø) mm	REF
3.25	CTK325

Drill Stop - Stop insertion and removal procedure

STOP insertion
Hold the drill on the stalk side and insert the stop, with the retentions facing the drill, until the point of contact with the metallic stop located on the drill itself. (Fig. 1 - 2 - 3).

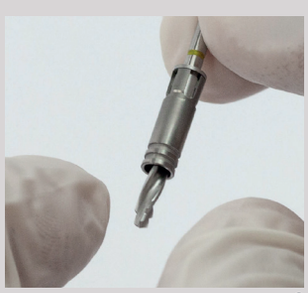
STOP removal
Hold the stop and remove the drill by pulling on the stalk side.

Depth STOP for different lengths. The advantages:

- Optimal check-depth during preparation of the surgical site, even in conditions of poor visibility of the operating field;
- Reduction of surgical risk;
- Reduction of operator stress;
- Greater safety for the patient;
- Easy Stop insertion and removal from the drills and greater safety in the surgical phase for the doctor and assistant.


1

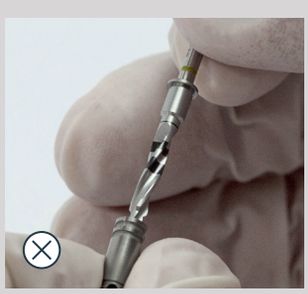

2


3

⚠

Warning
WRONG insertion STOP

Stop insertion with the retentions facing the tip of the drill is incorrect. (fig. 4 - 5).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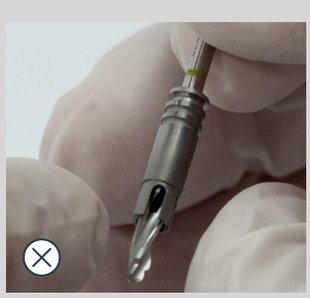
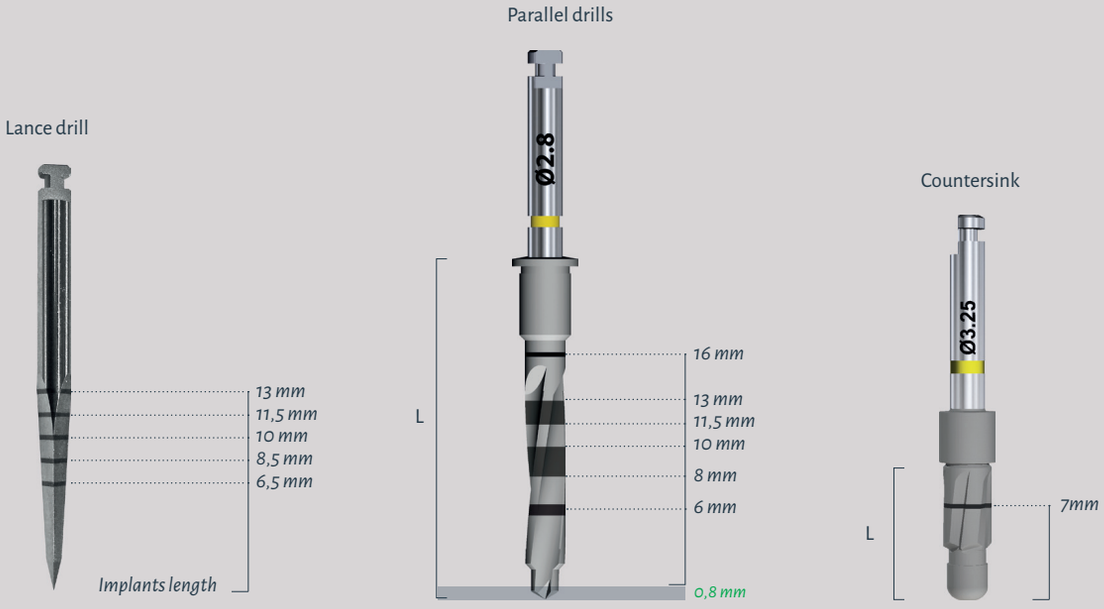

5

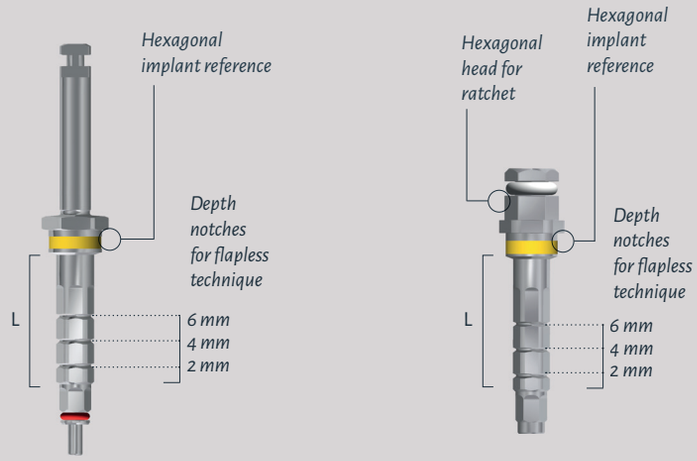
Drills - Reading depth notches and sharp drills

Lance drill - Parallel drills - Countersink



Screwdrivers

Implant CA connection - Implant ratchet connection



Implant CA connection

REF ICO325

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

Implant ratchet connection

REF IMA325

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. Material: Inox

O-Ring replacement tool

REF DRO325

Ø 3.25
L 10,5 mm

Dynamometric ratchet REF CCD070

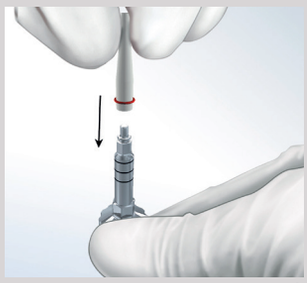
Screwdrivers - O-Ring replacement tool

DRO325

The tool facilitates replacement of the O-Ring on screwdrivers.

Warning

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



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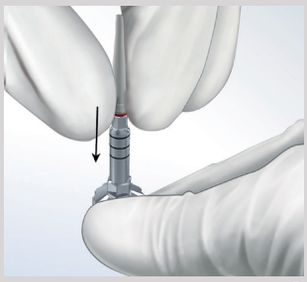
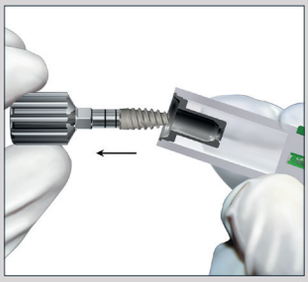


B

C

Screwdrivers - Implants insertion procedure



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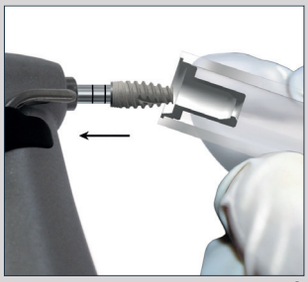

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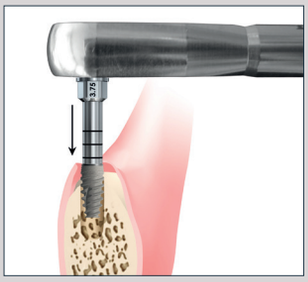

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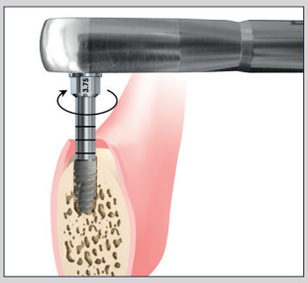


11

With manual 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. 6).

Begin implant insertion into the alveolar surgery using the manual direct screwdriver. In case the density of the bone allows it, it is possible to finish the implant insertion with the manual screwdrivers (Fig. 7).

With contra-angle implant connection

Insert the direct 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. 8).
Begin insertion of the implant in the alveolar surgery (Fig. 9) after having set the following parameters on the surgical unit:

» Bi-phase procedure (submerged) RPM 15-20. Torque max. 35-40 Ncm

» Monophasic procedure realized with submerged implants and healing screws, with deferred load RPM 15-20. Torque max. 40-45 Ncm

» 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. 10).
Complete the insertion of the implant using the dynamometric wrench connected to the direct screwdriver of the ratchets (REF IMA325). At times it is necessary to use the extensions, short REF PMC115 and long REF 110026 to connect to the tools described above (Fig.11).

Components for cemented/screwed prosthesis

Taper healing abutment
Material: Ti5
8/10 Ncm Lock manually

H	REF
2	VG3252
4	VG3254
6	VG3256

Open tray impression coping
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VTPR3200
8/10 Ncm Lock manually

Ø	REF	
3.8	TPR3200	Taper

Closed tray impression coping
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VTST32
8/10 Ncm Lock manually

Ø	REF	
3.8	TST325	Parallel

Implant analog
Material: Ti5

REF
AGL3212

Fastening screw included and available as a replacement (pack. 2 pcs.) REF VFD032

Straight abutment
Material: Ti5
20Ncm Torque adapter
REF TW0001

H	Ø	ML	REF
1,5	3.8	325	MAS3215
3	3.8	325	MAS3230

Straight abutment
Material: Ti5
(pack. 10 pcs.)
20Ncm Torque adapter
REF TW0001

Ø	REF
3.8	PLT325

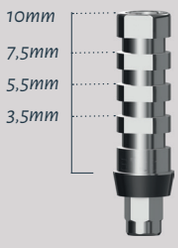
Angled abutment
Material:Ti5
20Ncm Torque adapter
REF TW0001

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

Temporary cylinder
Material: Peek
20Ncm Torque adapter
REF TW0001

ML	REF
325E	PKE325 ⬡
325R	PKR032 ○

Cutting line for use in digital environment



Cylinder abutment
Material: Ti5
20Ncm Torque adapter
REF TW0001

ML	REF
325E	PPE325 ⬡
325R	PPR032 ○

Castable abutment
Material: Pmma
20Ncm Torque adapter
REF TW0001

REF
PCA325 ⬡
PCR032 ○

Overcast abutment
Material: CRCO
20Ncm Torque adapter
REF TW0001

REF
CC3-HE ⬡
CCR-NP ○

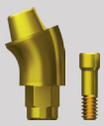
Components for MUA screwed prosthesis

Protection cap
Material: Ti5
Package 2 pcs.
Fastening screw included and available as a replacement (pack. 2 pcs.) REF VPCEM
8/10Ncm Lock manually

REF
GBT3200

MUA straight abutment
Material: Ti5
20Ncm Torque adapter REF PMC115

H	REF
1	BTA3210
2,5	BTA3225
4	BTA3240



MUA angled abutment
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.) REF VMF325
20Ncm Torque adapter REF TW0001

H	REF
1,5	DT32171
3	DT32173

MUA precision transfer (PDM/PPM)
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VFTEM
8/10Ncm Lock manually

REF
TBT3200

MUA abutment analogue
Material: Ti5

REF
ABT3200

Titanium abutment / MUA bonding base
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VPCEM
8/10Ncm Lock manually

REF
CIT3200

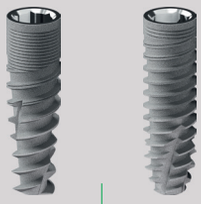
Overcast abutment MUA
Material: CRCO
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VPCEM
8/10Ncm Lock manually

REF
CCM-03

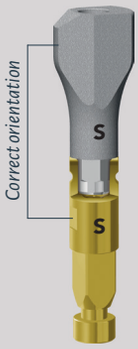
Castable abutment MUA
Material: Pmma
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VPCEM
8/10Ncm Lock manually

REF
CBR3200

Prosthetic components for digital flow



WARNING
DO NOT orient the Scan Abutment in other unsuitable positions



***Always** match the smaller portion of the Scan Abutment, which is oriented on the hexagon side of the connection, with the milling on the cylindrical portion of the digital analog body.*

REF
SCAN325

Scan abutment
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VFX325
8/10Ncm Lock manually
Digital CAD-CAM intraoral scan and laboratory scan. For single cemented and screwed elements. For multiple cemented elements.

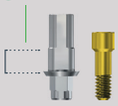
REF
6431311

Scan abutment
Material: Plastic (pack. 36 pcs.)
Digital CAD-CAM intraoral scan and laboratory scan. For single cemented and screwed elements.
On SIRONA abutment.

REF
AGL32DG

Digital analog
Material: Ti5
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 Dental Tech Libraries.*

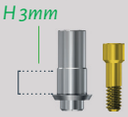
also available
ONLY digital file
H 3mm



REF
BST325 ⬡

Bonding base
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VFX325
20Ncm Torque adapter
REF TW0001
Digital CAD-CAM and traditional bonding technique.
For single cemented and screwed elements.
For multiple cemented elements.

also available
ONLY digital file
H 3mm



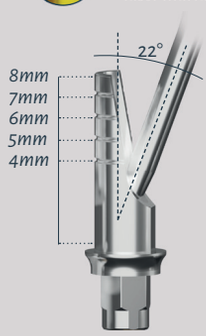
REF
BSR325 ○

Bonding base
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VFX325
20Ncm Torque adapter
REF TW0001
Digital CAD-CAM and traditional bonding technique. For multiple elements screwed into the implant.

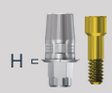
Bonding base for angled screw channel (T-Base)
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
20Ncm Torque adapter
REF 200011/200012

H	REF	Prosthetic screw
0,5	BSA325	350002
1	BSA3210	350028
2	BSA3220	350029

Use only the dedicated fixing screws, recognizable by the laser marking



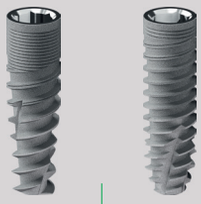
Every T-base for angled screw channel must keep the dedicated prosthetic screw in order to maintain the maximum inclination capacity of 22 ° of the screwing tool, whose deformation limit is 30Ncm.



H	REF
0,5	PSS325 ⬡
1	PSS3210 ⬡
2	PSS3220 ⬡
0,5	PSS325R ○
1	PSS3210R ○
2	PSS3220R ○

Bonding base Sirona
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VFX325
20Ncm Torque adapter
REF TW0001
Digital CAD-CAM and traditional bonding technique.
For single cemented and screwed elements.
For multiple cemented elements.

Prosthetic components for digital flow - Connection on MUA



REF

SCANMS

Scan abutment
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VPCEM
8/10Ncm Lock manually
Suitable for digital CAD-CAM technique for intraoral and laboratory scans. For multiple screw-retained elements.

REF

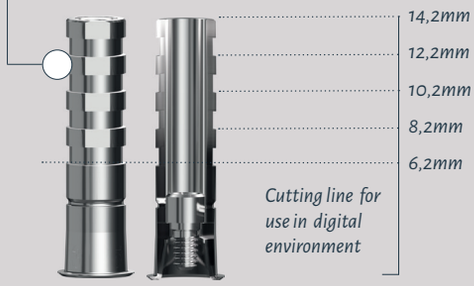
ABT3200DG

Digital analog
Material: Ti5
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 Dental Tech Libraries.

REF

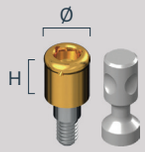
BCM325

MUA bonding base
Material: Ti5
Fastening screw included and available as a replacement (pack. 2 pcs.)
REF VPCEM
8/10Ncm Lock manually
Digital CAD-CAM bonding technique.



Overdenture prosthetic components

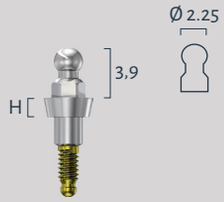
Abutment Dualock®
Material: Ti5
Transfer included REF IMCDS
20Ncm Torque adapter REF ADL150



H	REF
1	DT-L3251
2	DT-L3252
3	DT-L3253
4	DT-L3254
5	DT-L3255

Retention compatible with Zest LOCATOR®

Sphere abutment
Material: Ti5
20Ncm Torque adapter REF RDS225



H	REF
0,5	ASF3200
1,5	ASF3215
3	ASF3230

Sphere analog
Material: Ti5

REF
AAF225

O-ring

Material: Ti5

REF
POR225

Package 10 pcs.

REF
ORG225

Retention compatible with Ø 2.25 Sphere RHEIN83®

Instruments

Parallel PIN
Material: Ti5

REF
CPT3747

Surgical screwdriver
Material: Inox

REF
PGI100

Extension for drill
Material: Inox

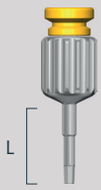
L mm	REF
9	KI589

Hand wheel
Material: Ti5

L mm	REF
6	AMC016

Extension
Material: Inox

L mm	REF
12,5	110026

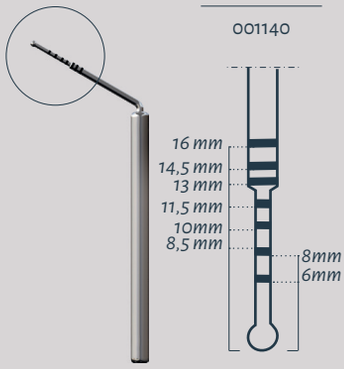


Screw driver
Material: Inox

L mm	REF	
4,5	GMX100	Micro
11,5	GMM250	Extra short
13,5	001152	Long

Depth gauge
Material: Ti5

REF
001140



Dynamometric ratchet

REF
CCD070

MUA 3.25 adaptor
Material: Inox

REF
PMC115

Screwdrivers adaptor
Material: Inox

REF	
TW0001C	Short
TW0001L	Long

Adaptor for dynamometric ratchet
Material: Inox

L mm	REF
7	ISO370

Hex screwdriver for dynamometric ratchet bonding bases for angled screw channel (T-Base)
Material: Inox

L mm	REF
16	TW0015C

Hex screwdriver for contra-angle bonding bases for angled screw channel
Material: Inox
Deformation limit is 30 Ncm

L mm	REF	
16	200011	Short
21	200012	Long

Hex screwdriver
Material: Inox

L mm	REF	
8	GCG0024	Short
14	GCG0030	Long

Adaptor for sphere abutment Ø 2.25
Material: Inox

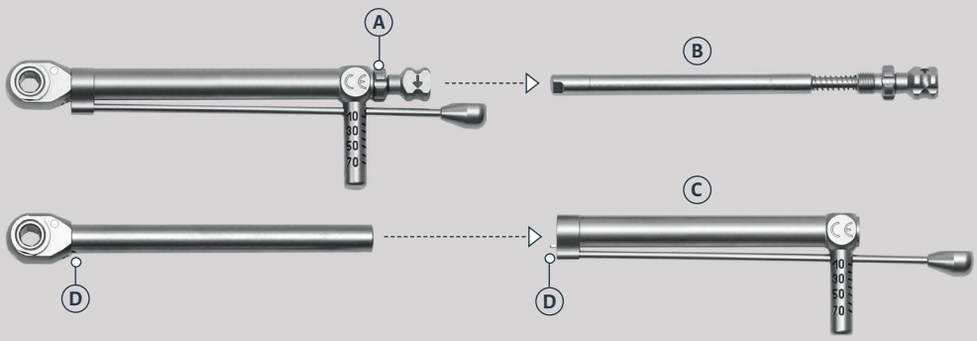
REF
RDS225

Adaptor for Dualock® abutment
Material: Ti5

REF
ADL150

Dynamometric ratchet cleaning and maintenance

CCD070



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.

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

» Dental Tech tools are supplied as non sterile in heat-sealed Pouches in containing the leaflet.
» Dental Tech 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 Dental Tech 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.

STERILIZATION

» Dental Tech validated the following Autoclave moist heat sterilization cycle: 3 minutes - 134 °C
» Since Dental Tech tools are manufactured in different materials, they shall be washed and sterilized one by one.

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.

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

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.

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.
» For taps, during preparation of the site with the drills, don't set forces greater than 55N/cm with micromotors equipped with the control-TORQUE device.

NON-ROTATING INSTRUMENT

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

BIBLIOGRAPHY

Abrahamsson I, Zitzmann NU, Berglundh T, Wennerberg A, Lindhe J. Bone and soft tissue integration to titanium implants with different surface topography: an experimental
study in the dog. Int.J.Oral Maxillofac Implants 2001;
16(3):323-32.

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.

The Role of Surface Topography
Herman, J Perio 1997;68:1117-1130.

Micro-threads eliminate bone lossdue 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 Analisis
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 sabbiata e mordenzata: uno studio sperimentale sul coniglio Antonio Scarano / Giovanna Iezzi* / Alessandro Quaranta** / Adriano Piattelli*

Implantologia orale numero 2 marzo 2007

Dentista moderno ottobre 2011
Progettazione e realizzazione di una superficie implatare dalla decontaminazione all'osteointegrazione
Chiara Giamberini / Angelo Tagliabue / Dino Azzalin / Giorgio Santarelli

Int J Periodontics Restorative Dent. 2006 Feb; 26(1): 9-17
Platform switching: a new concept in implant dentistry for controlling postrestorative crestal bone levels.
Lazzara RJ / Porter SS.

IVela-Nebot X, et al.
Benefits of an implant platform modification technique to reduce crestal bone resorption.
Implant Dent 2006;15:313–320

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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.
For more information about Dental Tech instruments and prosthetic components, consult the page:
dentaltechitalia.com/ifu-online

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MATERIALS LEGEND

CrCo	Cobalt-chrome alloy
Inox	Surgical stainless steel
Ptfe	Polytetrafluoroethylene
Peek	Polyetereeterechetone
Pmma	Polymethylmethacrylate
Ti5	Titanium gr.V ELI for medical use
Plastic	Polymer

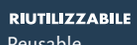
PACKAGING SYMBOLS LEGEND

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

Notified body identification

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