

PRODUCT CATALOG







implantlogistics.com | 844-383-8001



A PRECISION DENTAL IMPLANT SYSTEM



ABOUT IMPLANT LOGISTICS:

Implant Logistics was founded by general dentist and implantologist, Dr. Leo Malin, in response to a need he saw for affordable US-based implant systems that would be robust, simple to use, preserve bone and give

predictable results.

Implant Logistics provides implants, implant components and accessories that are designed to prevent the bone loss associated with most implant systems currently on the market. In addition, our implant systems are designed to be simple to use, to provide the full range of restorative options and are priced competitively.

Dr. Malin started delivering implant services in 1993 and in his quest for the best implants and components, he found that some of the implants manufactured in Europe that he felt were superior to the U.S. ones were simply not available to the US market. When the Morse tapered implants were introduced into the US they were significantly better than what was available in the U.S., however, Dr. Malin felt these systems could be improved and the cost of those systems was also prohibitive. He set about developing an improved implant system at a more affordable price. After much research and innovation, he set up manufacturing facilities in the U.S. and created the Implant One system of implants and components.

Implant Logistics continues to innovate and develop implants that are simple to use, give stable results and meet the needs of implant dentists.









IMPLANT MANUFACTURING:

AMS Micromedical, LLC was formed in 2011 to focus specifically on the Medical Device and Dental Implant fields.

AMS Micromedical management, quality assurance and engineering personnel have upwards of 30 years experience each in their respective fields. They offer impressive capabilities and excellent customer service.

Micro-sized parts suitable for CNC Swiss machining are their specialty: dental implants and related components, complete surgical kits, surgical drills and instruments, catheter components and other precision machined devices.

AMS Micromedical also offers numerous secondary operation capabilities including laser marking, pad printing and assembly. Our equipment and software is state of the art, our personnel are highly trained and experienced, and our facility is ISO 13485:2003, ISO 9001:2008 FDA registered. Prototype or low quantity production runs are considered.









www.amsmicromedical.com

TABLE OF **CONTENTS**:

About Implant Logistics	Page 1
Implant Manufacturing	Page 2
Features and Benefits	Page 4–5
Implants	
Standard Implants	Page 8
Wide Implants	
Implant Packaging Features	Page 9
Implant Abutments F	
Ti-Base Abutment	
MUA, Straight	
Multi-unit Abutment (MUA), Angled	
Scan Body	
Standard & Temporary Abutments	Page 16
Ball Abutment	
Positioner Denture Retaining Abutment	
Wide Post & Straight Abutments	Page 18
Implant Accessories F	
Healing Caps	
Closed Tray Impression Post	Page 21
Open Tray Impression Post	Page 21
Analog	Page 21
MUA Accessories	Page 22
Surgical and Restorative Tools F	Page 23–30
Surgical Kit	Page 24
Drill Kit	Page 25
Restorative Kit	Page 26
Bone Profiling Kit	Page 27
Drills and Drill Accessories	Page 28
Drivers	Page 29
Carrier Adapters	Page 30
Bone Profilers and Guide Pins	
Wrenches	Page 30
Abutment Extractors	Page 30

Procedures	Page 31–44
Implant Surgical Procedure	
Bone Profiling	
Closed Tray Impressions	
Open Tray Impressions	
Placement of Healing Cap	
Placement of Abutment	
and Cement Retained Restoration	Page 38
Placement of Multi-unit Abutment (MUA	A) Page 39
Placement of Positioner Denture	
Retaining Abutment	Page 40
Placement of Ball Abutment	
and Restoration	Page 41
Placement of	
Rhein83 Retentive Caps	Page 42
Abutment Removal	Page 43
Scan Body Procedure	Page 44
Information Sheets	Page 45–48
Intended Use of Surgical	
Kit Components	_
Direct Placement Implants	
Carrier Features	Page 47
Abutment Screw	Page 48
Implant One Glossary	Page 49

IMPLANT ONE FEATURES AND BENEFITS

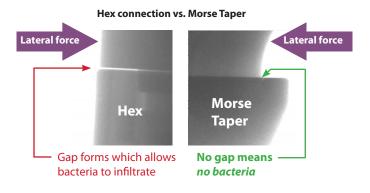
MORSE TAPER CONNECTION FOR BONE AND TISSUE HEALTH

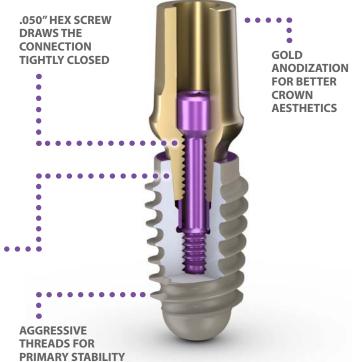
In implantology, bone and soft tissue health is the biggest determinate of successful implant integration, the aesthetics of the restoration, and the longevity of the implant. For this reason, at the core of the Implant One system is a 6° Morse Taper implant-abutment connection which ensures strong, enduring, bacteria-free implant experiences for patients.



Morse Tapers are widely used in applications where strong joints between mechanical components are paramount. They produce tight and secure connections that are resistant to multi-directional forces, like those that dental implants are routinely subjected to.

The radiographs below demonstrate the key difference between a standard hex implant-abutment connection and a Morse Taper connection when lateral forces are applied. The Morse Taper remains tightly closed to bacteria as the force is applied, but the hex does not.





SUB-CRESTAL PLACEMENT

The practical elimination of bacteria infiltration by the Implant One design allows the implants to be placed at or below the crest of bone which helps reduce the stress applied to the cortical plate, and

prevent tissue and bone die-back. This means better integration, better aesthetics and an implant that can last the lifetime of the patient.

All Implant One implants can and should be placed crestal or subcrestal in order to realize the full advantages of the system.





THREAD DESIGN

The Implant One system provides clinicians with two thread variants, Standard and Wide, so that optimum primary stability can be attained in every clinical case.

STANDARD THREAD IMPLANT

Suitable for all bone density types, the Standard Thread implants feature aggressive, self-tapping threads for increased initial stability and Microthreads • • to reduce pressure on the thin cortical plates, lessening the risk of pressure necrosis.



WIDE THREAD IMPLANT

The Wide Thread is ideal for immediate implant placement in extraction sites or in cases with poor bone density. The larger surface area of the threads provide maximum primary stability.

IMPLANT ONE ABUTMENTS



Implant One offers a complete line of abutments for individual, fullarch fixed, and full-arch removable restorations. All abutments feature Implant One's uniquely strong Morse Taper implant-abutment connection. This connection is so strong that it

would be impossible to remove the abutments, if ever necessary, if they did not include self-extraction features. ••••••

See all Implant One abutments beginning on page 11.

INTERNAL THREADS **ENABLE EXTRACTOR TOOL** TO RELEASE THE GRIP OF THE MORSE TAPER

EXTRACTOR TOOL

SERIES COLOR IDENTIFIERS

For ease of use, Implant One implants and restorative components are anodized with their series' color codes.

SERIES 300 = BLUE SERIES 400 = PURPLE SERIES 500 = LIGHT GREEN





7

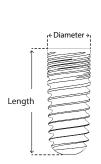
STANDARD AND WIDE IMPLANTS:





STANDARD IMPLANTS:

The Standard Thread implants feature aggressive, self-tapping threads for increased initial stability and "Microthreads" to reduce pressure on the thin cortical plates, lessening the risk of pressure necrosis. By varying the osteotomy diameter, this implant can be placed in bone of any density.

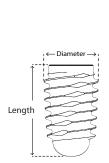


	300 series	400 series		500 s	eries
	4	DIAMETER			
LENGTH	3.5 mm	4.0 mm	4.5 mm	5.0 mm	5.5 mm
8 mm	IR3-3508-00	IR4-4008-00	IR4-4508-00	IR5-5008-00	IR5-5508-00
10 mm	IR3-3510-00	IR4-4010-00	IR4-4510-00	IR5-5010-00	IR5-5510-00
12 mm	IR3-3512-00	IR4-4012-00	IR4-4512-00	IR5-5012-00	IR5-5512-00
14 mm	IR3-3514-00	IR4-4014-00	IR4-4514-00	IR5-5014-00	IR5-5514-00



WIDE THREAD IMPLANTS:

The Wide Thread implant is designed for maximum primary stability when immediate implant placement in extraction sites is desired or in cases with poor bone density. Wide Thread implants should not be placed in dense bone.

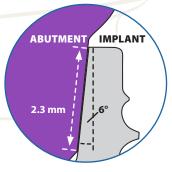


	300 series		400 series	500 series	
	← DIAMETER				
LENGTH	4.1 mm	4.5 mm	5.5 mm	6.5 mm	
8 mm	IW3-4108-00	IW3-4508-00	IW4-5508-00	IW5-6508-00	
10 mm	IW3-4110-00	IW3-4510-00	IW4-5510-00	IW5-6510-00	
12 mm	IW3-4112-00	IW3-4512-00	IW4-5512-00		
14 mm	IW3-4114-00	IW3-4514-00			



Common Features of all Implant One implants

- Optimized for bone health & aesthetics
- Self-tapping external threads
- Morse Taper implant-abutment connection: tight and bacteria-free
- Sub-crestal placement recommended



Internal Implant-Abutment Connection Details

Specifications

Material: 6AL4V E.L.I. Titanium Lengths (mm): 8, 10, 12, 14 Diameters (mm): 3.5, 4.0, 4.1, 4.5, 5.0, 5.5, 6.5 Internal Connection: 6° Morse Taper Connection Length: 2.3 mm Cover screw included





IMPLANT PACKAGING FEATURES:

Direct-placement implants



SIMPLIFIED PACKAGING



IMPLANT DRIVER SNAPS DIRECTLY INTO IMPLANT



IMPLANT MAY BE DRIVEN TO FULL DEPTH IMMEDIATELY



COVER SCREW

See procedure on page 32

Implants with carriers



PACKAGE WITH COVER



ADAPTER SNAPS ONTO CARRIER WHILE REMAINING STERILE

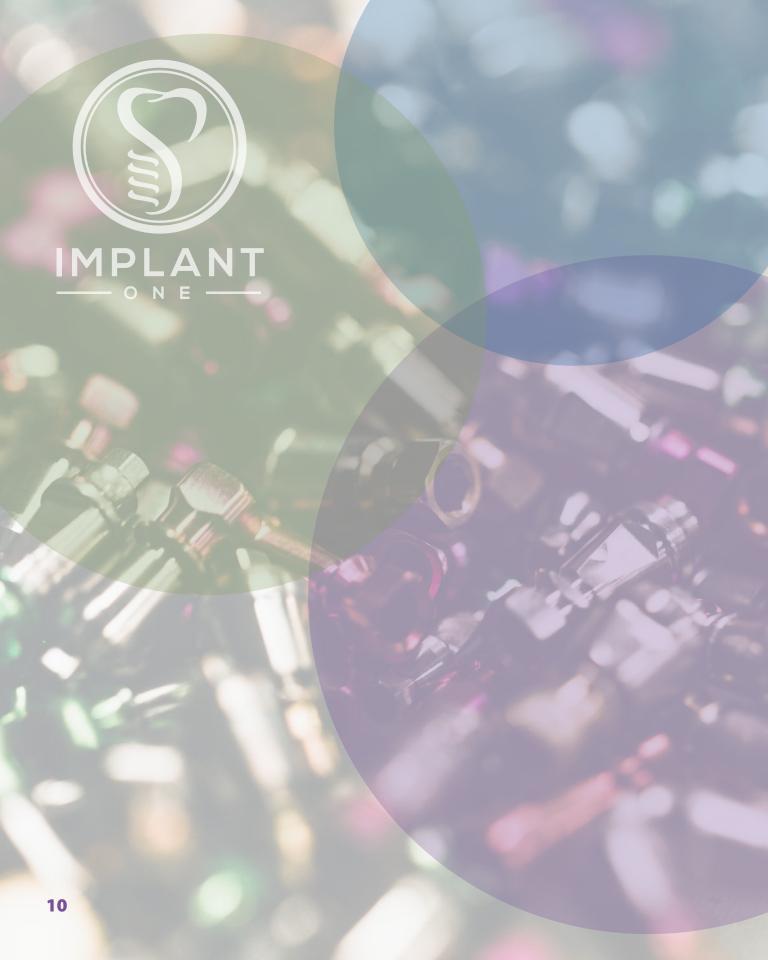


PACKAGING OPENS TO RELEASE IMPLANT AND CARRIER

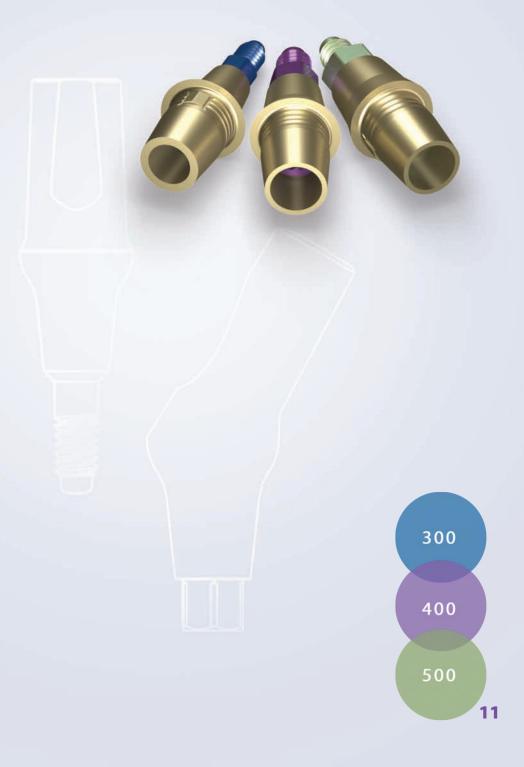


COVER SCREW IS PACKAGED IN THE COVER

See procedure on page 32



IMPLANT ABUTMENTS:



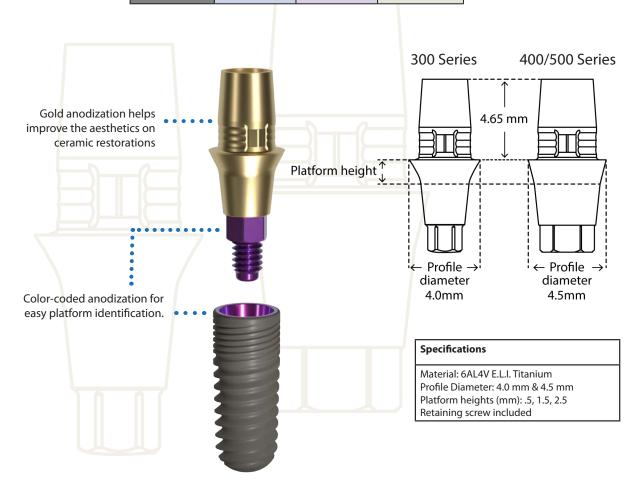


TI-BASE ABUTMENT

Ti-Base abutments are compatible with CAD-CAM systems. They are made of titanium and designed for all ceramic restorations.



PLATFORM HEIGHT	300 series	400 series	500 series
0.5 mm	ATB-0305-01	ATB-0405-00	ATB-0505-00
1.5 mm	ATB-0315-01	ATB-0415-00	ATB-0515-00
2.5 mm	ATB-0325-01	ATB-0425-00	ATB-0525-00







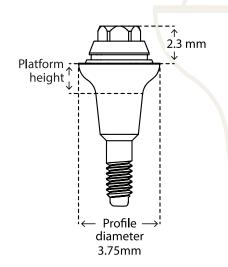
MULTI-UNIT ABUTMENT (MUA), STRAIGHT

Used to secure multi-unit screw-retained prosthetics. Straight MUAs are self-retaining with the threaded shank on the abutment.

PLATFORM HEIGHT	300 series	400 series	500 series
0.5 mm	MUA-0305-00	MUA-0405-00	MUA-0505-00
1 mm	MUA-0310-00	MUA-0410-00	MUA-0510-00
2 mm	MUA-0320-00	MUA-0420-00	MUA-0520-00
3 mm	MUA-0330-00	MUA-0430-00	MUA-0530-00
4 mm	MUA-0340-00	MUA-0440-00	MUA-0540-00
5 mm	MUA-0350-00	MUA-0450-00	MUA-0550-00







Specifications

Material: 6AL4V E.L.I. Titanium Profile Diameter: 3.75 mm Platform Heights (mm): .5, 1, 2, 3, 4, 5 Torque: 20 Ncm (300 Series) 30 Ncm (400 & 500 Series)

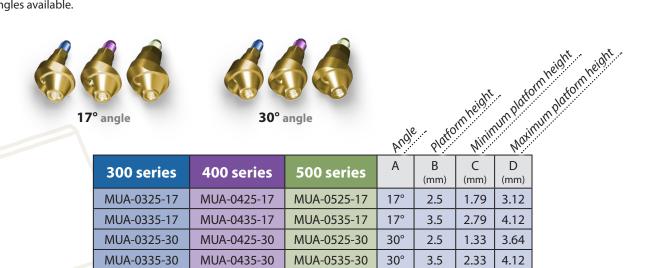


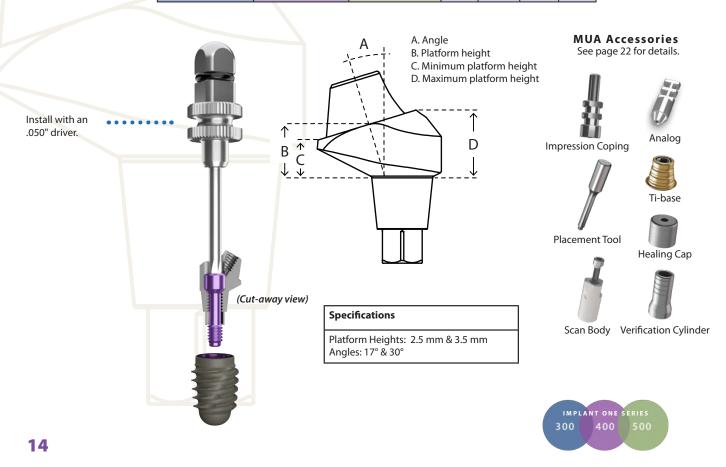
Scan Body Verification Cylinder

IMPLANT ONE SERIES 300 400 500

MULTI-UNIT ABUTMENT (MUA), ANGLED

Use Angled MUAs for paralleling abutments in non-aligned implants. The Implant One MUA line has 17° and 30° angles available.



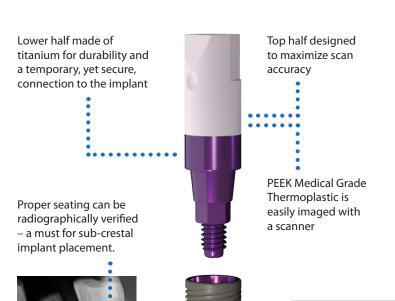


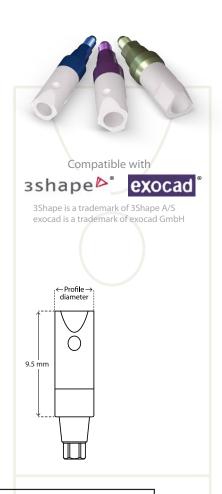


SCAN **BODY**

The Implant One Scan Body is designed with specialized geometry that helps CAD software pinpoint the exact location of an Implant One implant, its timing, and its relationship to the arch form.

	300 series	400 series	500 series
PART #	ASC-0300-00	ASC-0400-00	ASC-0500-00
PROFILE DIAMETER	3.5 mm	4.0 mm	4.0 mm





Specifications

Scannable Material: PEEK Medical Grade Thermoplastic Connection Material: 6AL4V E.L.I. Titanium and Body Height: 9.5 mm

Profile Diameter: 3.5 mm or 4 mm

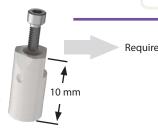
MUA Scan Body

Provides the same scanner visibility as above for Multi-Unit Abutments.

MUA-0345-SB

Made of PEEK ••••

Medical Grade
Thermoplastic



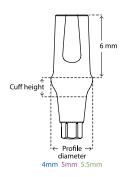
Requires a MUA Accessory Torque Driver

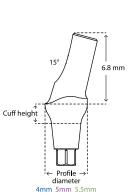
TDB-0060-24

TDB-0060-28



STANDARD ABUTMENT





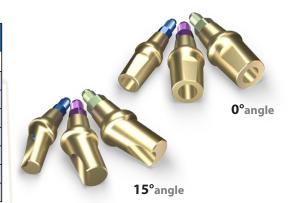
Standard abutments have a hexagonal male end for abutment orientation, are screw retained and may be modified by the dental laboratory. Standard abutments are offered straight or with a 15° angle.

	300 series		
HEIGHT	0 °angle	15°angle	
0.5 mm	APT-0305-00	APT-0305-15	
1 mm	APT-0310-00	APT-0310-15	
2 mm	APT-0320-00	APT-0320-15	
3 mm	APT-0330-00	APT-0330-15	
4 mm	APT-0340-00	APT-0340-15	
5 mm	APT-0350-00	APT-0350-15	
PROFILE DIAMETER	4 mm		

	400 series		
HEIGHT	0 °angle	15°angle	
0.5 mm	APT-0405-00		
1 mm	APT-0410-00	APT-0410-15	
2 mm	APT-0420-00	APT-0420-15	
3 mm	APT-0430-00	APT-0430-15	
4 mm	APT-0440-00	APT-0440-15	
5 mm	APT-0450-00		
PROFILE DIAMETER	5 mm		

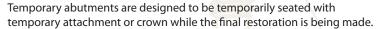
Specifications

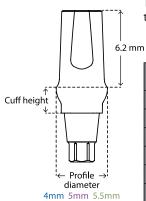
Material: 6AL4V E.L.I. Titanium Profile Diameters (mm): 4, 5, 5.5 Cuff heights (mm): .5, 1, 2, 3, 4, 5 Angles: 0°, 15°



	500 series	
HEIGHT	0 °angle	15°angle
0.5 mm	APT-0505-00	
1 mm	APT-0510-00	APT-0510-15
2 mm	APT-0520-00	APT-0520-15
3 mm	APT-0530-00	APT-0530-15
4 mm	APT-0540-00	APT-0540-15
5 mm	APT-0550-00	
PROFILE DIAMETER	5.5 mm	

TEMPORARY ABUTMENT





CUFF HEIGHT	300 series	400 series	500 series
0.5 mm	ATM-0305-00	ATM-0405-00	ATM-0505-00
1 mm	ATM-0310-00	ATM-0410-00	ATM-0510-00
2 mm	ATM-0320-00	ATM-0420-00	ATM-0520-00
3 mm	ATM-0330-00	ATM-0430-00	ATM-0530-00
4 mm	ATM-0340-00	ATM-0440-00	ATM-0540-00
5 mm	ATM-0350-00	ATM-0450-00	ATM-0550-00
PROFILE DIAMETER	4 mm	5 mm	5.5 mm



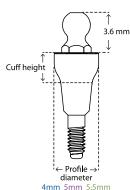
Specifications
Material: 6AL4V E.L.I. Titanium
Profile Diameters (mm): 4, 5, 5.5
Cuff heights (mm): .5, 1, 2, 3, 4, 5

1MPLANT ONE SERIES 300 400 500



BALL **ABUTMENT**

Ball abutments are a one piece abutments without orientation used for implant-retained soft tissue supported restorations. Using Rhein83 (rhein83usa.com) 2.5mm attachments, ball abutments provide optimal retention for every individual patient.



CUFF HEIGHT	300 series	400 series	500 series
2 mm	ABL-0320-00	ABL-0420-00	ABL-0520-00
3 mm	ABL-0330-00	ABL-0430-00	ABL-0530-00
4 mm	ABL-0340-00	ABL-0440-00	ABL-0540-00
5 mm	ABL-0350-00	ABL-0450-00	ABL-0550-00
PROFILE DIAMETER	4 mm	5 mm	5.5 mm



Use the Ball Abutment Driver to attach to the implant

DEH-0000-00

Specifications

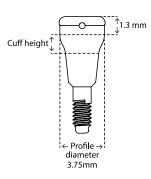
Material: 6AL4V E.L.I. Titanium Profile Diameters (mm): 4, 5, 5.5 Cuff heights (mm): 2, 3, 4, 5 Maximum torque: 20Ncm 300 Series 30Ncm 400 & 500 Series





POSITIONER DENTURE RETAINING ABUTMENT

Abutments for retaining overdenture restorations. Retention inserts sold separately.



CUFF HEIGHT	300 series	400 series	500 series
0.5 mm	ALR-0305-00	ALR-0405-00	ALR-0505-00
1 mm	ALR-0310-00	ALR-0410-00	ALR-0510-00
2 mm	ALR-0320-00	ALR-0420-00	ALR-0520-00
3 mm	ALR-0330-00	ALR-0430-00	ALR-0530-00
4 mm	ALR-0340-00	ALR-0440-00	ALR-0540-00
5 mm	ALR-0350-00	ALR-0450-00	ALR-0550-00
6 mm	ALR-0360-00	ALR-0460-00	ALR-0560-00
7 mm	ALR-0370-00	ALR-0470-00	ALR-0570-00





Use the Positioner Driver to attach to the implant.

DLR-0345-00

Specifications

Material: 6AL4V E.L.I. Titanium Profile Diameter: 3.75 mm

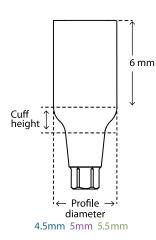
Cuff heights (mm): .5, 1, 2, 3, 4, 5, 6, 7 Maximum torque: 20Ncm 300 Series 30Ncm 400 & 500 Series

IMPLANT ONE SERIES
300 400 500



WIDE POST ABUTMENT

Wide Post Abutments are designed for being manually customized by dental laboratories for patient specific abutments.



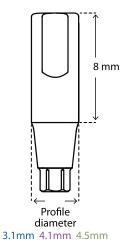
CUFF HEIGHT	300 series	400 series	500 series
0.5 mm	AWP-0305-00	AWP-0405-00	AWP-0505-00
1 mm	AWP-0310-00	AWP-0410-00	AWP-0510-00
2 mm	AWP-0320-00	AWP-0420-00	AWP-0520-00
3 mm	AWP-0330-00	AWP-0430-00	AWP-0530-00
4 mm	AWP-0340-00	AWP-0440-00	AWP-0540-00
5 mm	AWP-0350-00	AWP-0450-00	AWP-0550-00
PROFILE DIAMETER	4.5 mm	5 mm	5.5 mm

Specifications

Material: 6AL4V E.L.I. Titanium Profile Diameters: 4.5 mm, 5 mm, 5.5 mm Cuff heights (mm): .5, 1, 2, 3, 4, 5

STRAIGHT ABUTMENT

Straight abutments are ideal for placement in narrow spacing areas. The top of the abutment is thinner than on the standard abutment. Straight abutments can be prepped and fitted with a custom crown.



300 series	400 series	500 series	
AST-0300-00	AST-0400-00	AST-0500-00	
3.1 mm	4.1 mm	4.5 mm	PROFILE Ø

Specifications

Material: 6AL4V E.L.I. Titanium
Profile Diameters: 3.1 mm , 4.1 mm, 4.5 mm
Height from top of implant to top of abutment: 8 mm Maximum torque: 20Ncm 300 Series
25Ncm 400 & 500 Series



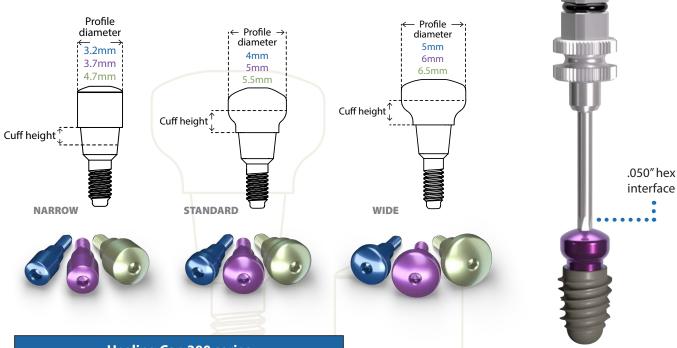


IMPLANT ACCESSORIES:



IMPLANT ONE **HEALING CAPS** (Healing Abutments, Tissue Formers)

Used for tissue forming during the gingival healing period.



Healing Cap 300 series					
CUFF HEIGHT	NARROW	STANDARD	WIDE		
1 mm	HCN-0310-00	HCS-0310-00			
2 mm	HCN-0320-00				
3 mm	HCN-0330-00	HCS-0330-00	HCW-0330-00		
5 mm	HCN-0350-00	HCS-0350-00	HCW-0350-00		
7 mm	HCN-0370-00				
PROFILE DIAMETER	3.2 mm	4 mm	5 mm		

Specifications
Material: 6AL4V E.L.I. Titanium Profile Diameter: 3.2 mm – 6.5 mm Cuff Heights (mm): 1, 2, 3, 4, 5, 6, 7 Maximum Torque: 6 Ncm

Healing Cap 400 series						
CUFF HEIGHT	NARROW	STANDARD	WIDE			
1 mm	HCN-0410-00	HCS-0410-00				
2 mm	HCN-0420-00					
3 mm	HCN-0430-00	HCS-0430-00	HCW-0430-00			
5 mm	HCN-0450-00	HCS-0450-00	HCW-0450-00			
7 mm	HCN-0470-00					
PROFILE DIAMETER	3.7 mm	5 mm	6 mm			

Healing Cap 500 series						
CUFF HEIGHT	NARROW	STANDARD	WIDE			
1 mm	HCN-0510-00	HCS-0510-00				
2 mm	HCN-0520-00					
3 mm	HCN-0530-00	HCS-0530-00	HCW-0530-00			
5 mm	HCN-0550-00	HCS-0550-00	HCW-0550-00			
7 mm	HCN-0570-00					
PROFILE DIAMETER	4.7 mm	5.5 mm	6.5 mm			



CLOSED TRAY IMPRESSION POST (Impression Pin, Impression Coping)



Flat face will be parallel with implant hex flat when properly seated.

WHEN FULLY SEATED, POST WILL SIT FLUSH ON TOP OF THE IMPLANT.



Specifications

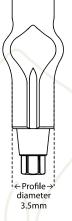
Material: 6AL4V E.L.I. Titanium Profile Diameter: 3.5 mm

300 series	400 series	500 series
IPC-0300-00	IPC-0400-00	IPC-0500-00

Replacement Caps For Closed Tray Impression Posts

Pack of 10 IPC-1 X 10

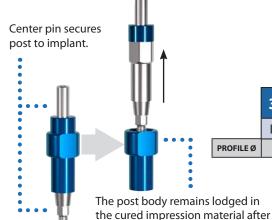




OPEN TRAY IMPRESSION POST

Two-piece post used to make an open tray impression.

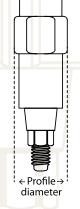
removal of the center pin.





Specifications

Material: 6AL4V E.L.I. Titanium Profile Diameter: 5.3 mm – 6.3 mm

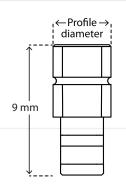


ANALOG

Used in the dental laboratory to represent the implant connection. Suitable for both digital and traditional model workflows.



	300 series	400 series	500 series
	ALG-0300-09	ALG-0400-09	ALG-0500-09
PROFILE Ø	3.5 mm	4 mm	4.7 mm



MUA ACCESSORIES

FOR ALL SERIES 300, 400 & 500 MULTI-UNIT ABUTMENTS



Healing Cap

Placed on top of Multi-Unit Abutments during the gingival healing period.

MUA-0345-HC



Placement Tool

MUA-0345-PT



Open Tray Impression Coping

MUA-0345-IP



Closed Tray Impression Coping IPC-0345-00



Analog

Used in the dental laboratory to represent the MUA connection. New design includes a gingival mask retention groove.

ALG-0345-00



Digital Scan Body

Attaches to the MUA for digital optical scans.

MUA-0345-SB



Ti-base

Used by labs to make screw-retained connections to MUA.

MUA-0345-TB



Burnout Sleeve

For analog prothesis production.

MUA-0345-BN



Verification Cylinder

Used for temporary restorations and verification jigs.

MUA-0345-VC



TDB-0060-24 TDB-0060-28

Accessory Torque Drivers

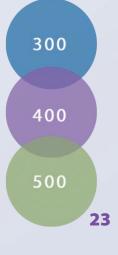
#6 Hexalobular Ball

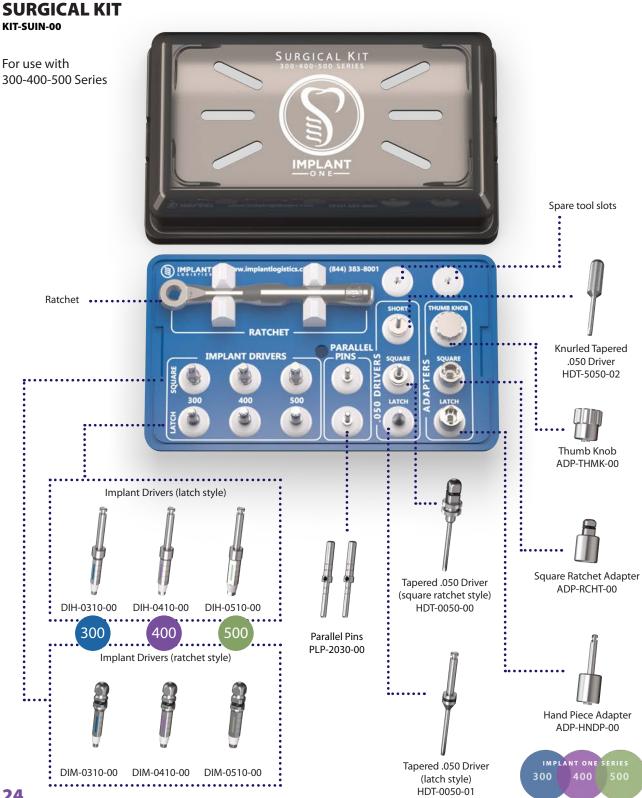


SURGICAL & RESTORATIVE TOOLS:









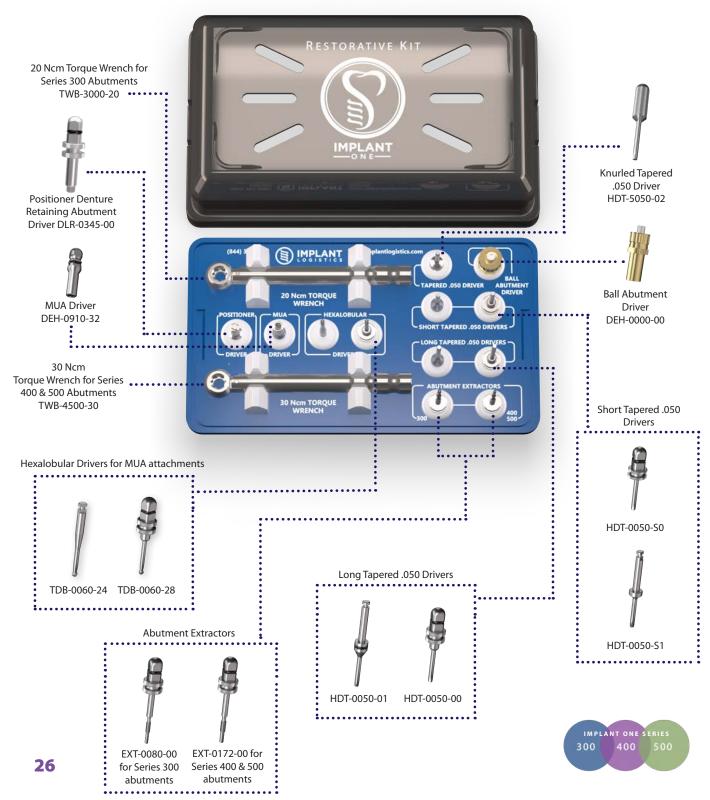


DRILL KIT



RESTORATIVE KIT

KIT-REIN-00





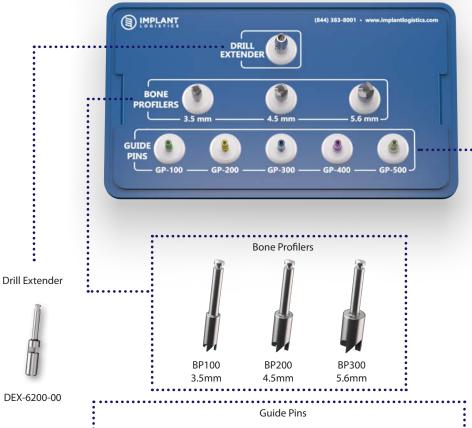
BONE PROFILING KIT

KIT-BOPR-00

Compatible with all Implant One Series

The Implant One Bone Profiler Tools aid in uncovering an implant after the healing period and prior to restoration.





GP100

Series 100

GP200

Series 200

GP300

Series 300

GP400

Series 400

GP500

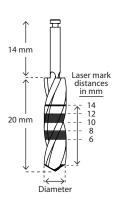
Series 500



DRILLS

3-fluted drills engineered for efficiency and bone health.





IMPLANT-DRILL PAIRING CHARTS

Recommended final drills for Implant One implants						
STAI	IDARD IMPLANTS			WIDE IMPLANTS		
						500 series
DRILL	IMPLANT DIAMETER (mm)					
DRS-3020-01 (3.0mm)	3.5			4.1		
DRS-3520-00 (3.5mm)		4.0		4.5		
DRS-4020-00 (4.0mm)		4.5				
DRS-4520-00 (4.5mm)			5.0		5.5	
DRS-5020-00 (5.0mm)			5.5			6.5

DRILL ACCESSORIES

Drill Extender Extends reach of drill by 17 mm.



DEX-6200-00

Lance Drill Used to create a purchase at the implant site.



DRS-LANC-00

Parallel Pin Used for angulation verification of



PLP-2030-00





IMPLANT DRIVERS

Used to drive Implant One implants to final depth. PEEK insert facilitates placment of implants directly from packaging. See page 47 for more information.

DRIVER	300 series	400 series	500 series
Latch Style	DIH-0310-00	DIH-0410-00	DIH-0510-00
Ratchet Style	DIM-0310-00	DIM-0410-00	DIM-0510-00



Latch Style Ratchet Style

ABUTMENT DRIVERS





DEH-0910-32

MUA Accessory Torque Drivers

#6 hexalobular ball, required for MUA accessories.



Positioner Driver

For securing Positioner Denture Retaining Abutments.



DLR-0345-00

Ball Abutment Driver



DEH-0000-00

.050" DRIVERS

Used to replace and remove cover screws, healing caps and most abutments.



Latch, Tapered HDT-0050-S1

Ratchet, Tapered HDT-0050-S0

Knurled, Tapered HDT-5050-02

Latch, Straight HDS-0050-01

Latch, Tapered, Long Ratchet, Tapered, Long HDT-0050-01

HDT-0050-00

Ratchet, Straight HDS-0050-00

CARRIER ADAPTERS

Used to transfer implants with carriers into osteotomies. See page 47 for more information.



Ratchet Adapter

ADP-RCHT-00



Hand Piece Adapter



ADP-HNDP-00

Thumb Knob Adapter



ADP-THMK-00

BONE PROFILERS & GUIDE PINS

Guide pins guide the bone profilers in the proper orientation and stop them at the correct depth. Also available for Series 100 and 200.



Bone Profilers safely remove soft and hard tissue that has grown over the top of the implant during integration, thus allowing abutments to be fully seated.



WRENCHES

Ratchet

Multi-use manual ratchet.



Breakaway Torque Wrenches

For installing abutments. The heads disengage when the pre-calibrated torques are met.





TWB-3000-20 Calibrated to 20 Ncm for use with Implant One 300 Series abutments.



TWB-4500-30 Calibrated to 30 Ncm for use with Implant One 400 and 500 Series abutments.

ABUTMENT **EXTRACTORS**

Specially-designed extractors release the Morse taper implant-abutment connection to allow removal and replacement of Implant One abutments.

See page 41 for procedure information.



EXT-0080-00 for Implant One 300 Series abutments.

EXT-0172-00 for Implant One 400 and 500 Series abutments.



PROCEDURES:



IMPLANT SURGICAL PROCEDURE

IMPLANT ONE BONE PROFILER TOOL

CLOSED TRAY IMPRESSIONS

OPEN TRAY IMPRESSIONS

PLACEMENT OF HEALING CAP

PLACEMENT OF ABUTMENT AND CEMENT RETAINED RESTORATION

PLACEMENT OF MULTI-UNIT ABUTMENT

PLACEMENT OF DENTURE RETAINING ABUTMENT

PLACEMENT OF BALL ABUTMENT AND RESTORATION

RHEIN83 RETENTIVE CAPS

ABUTMENT REMOVAL

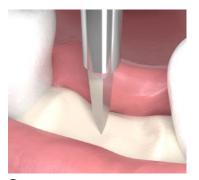
SCAN BODY



SURGICAL PROCEDURE



1 Make a full-thickness flap of the soft tissues to access the bone ridge.



2 Use the lance drill to mark the cortical bone for the subsequent drills.



3 Use a pilot drill to establish orientation and initial depth for the parallel pin.



4 Use a parallel pin to evaluate parallelism with natural teeth or other adjacent implant sites.



5 Take an x-ray with the parallel pin inserted into the osteotomy to verify parallelism.



6 Widen the diameter of the implant site using sequential drills of increasing diameter. The drill depth should correspond to the length of the selected implant.

FINAL PLACEMENT OF IMPLANT



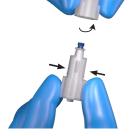
Remove the tray from the implant box, and peel back the tray cover, exposing the implant container.





2a Firmly press the implant driver (handpiece or ratchet) into the implant until it clicks. Pull the implant out of the container. Skip to Step 6.

Implants with car

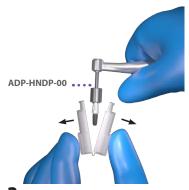


2b Hold the flat sides of the implant container firmly. Rotate the top portion of the container 1/8 of a turn counter clockwise to remove the plastic cap, while holding the base closed.

OR

FINAL **PLACEMENT OF IMPLANT** (Continued)

For implants with carriers only



3 Snap a motorized hand piece, ratchet wrench, or thumb knob onto the exposed carrier and release the implant from the container tube.



4 Rotate the implant into the osteotomy approximately half-way down or until finger tight.



5 Remove the carrier by carefully placing the .050 hex driver into the carrier hole and turning counterclockwise.

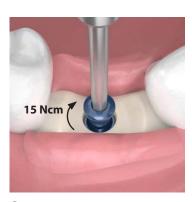
The carrier should only be used to stabilize the implant in the osteotomy site and then be removed. Drive to final depth with an implant driver (see Step 6).



6 Use the appropriate implant driver from the surgical kit, and either the ratchet wrench or a motorized hand piece to rotate the implant into the osteotomy. The depth marks on the driver help you to gauge when you have reached the depth determined by the surgical plan. Do not exceed the maximum torque of 60 Ncm.



Direct Placement Implants with Implants carriers

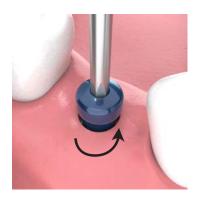


8 Drive the cover screw or healing cap into the implant to a maximum torque of 15 Ncm or finger tighten. Close and suture if needed.



IMPLANT ONE BONE PROFILER TOOLS

Sub-crestal placement of implants usually results in bone and soft tissue growing over the top of the implant during the integration period. The Implant One Bone Profiler tools safely remove this growth in order to thoroughly expose the implant for restoration. *Made of Stainless Steel*.



1 Remove the cover screw or healing cap.



3 The profiler slides over the guide pin.



2 Install the guide pin which matches the implant's platform into the implant using an .050 Hex Driver.



4 With a handpiece, rotate the profiler to cut away excess bone and tissue that has grown over the top of the implant. Remove the guide pin and continue with restoration.

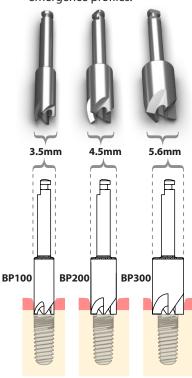
Guide pins also available for Series 100 and 200



The guide pins are color coded for each of the Implant One platforms.



The profilers are available in 3 sizes, to facilitate different emergence profiles.



CLOSED TRAY IMPRESSIONS



1 Remove tissue over the implant using a tissue punch or surgical blade.



2 Remove cover screw with the .050 hex tool.



3 Use the Bone Profiler Kit to remove excess bone and tissue that has grown over the top of the implant. See page 34.



4 Align the appropriate series impression post into the implant. The impression post has a hex on the bottom which will fit into the internal hex in the implant. Finger tighten with .050 hex tool.



5 X-ray to verify proper seating of the impression post. There should be no gap between the implant and the impression post.



7 Place a healing cap or temporary abutment with restoration on the implant while final restoration is being fabricated.



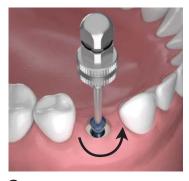
6 After impression is complete, use the .050 Hex Driver to turn the screw counter clockwise to remove the impression post from the implant. Send impression and impression post to the laboratory. If you decide to place the impression post back in the impression, attach an analog, or let the laboratory do that step.

Products illustrated in this procedure: IPC-0300-00 closed tray impression post, HCS-0330-00 healing cap, IR3-3508-00 implant, HDT-0050-00 hex driver

OPEN TRAY IMPRESSIONS



1 Remove tissue over the implant using a tissue punch or surgical blade.



2 Remove cover screw with the .050 Hex Driver.



3 Use the Bone Profiler Kit to remove excess bone and tissue that has grown over the top of the implant. See page 34.



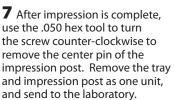
4 Align the appropriate series impression post into the implant. The impression post has a hex on the bottom which will fit into the internal hex in the implant. Finger tighten with .050 hex tool.



5 X-ray to verify proper seating of the impression post. There should be no gap between the implant and the impression post.

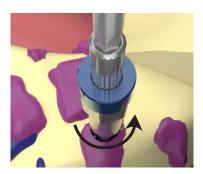


6 Customize the open tray so the impression post sticks out through the tray during the impression. Take the impression.





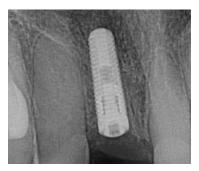
impression post will be



8 Place a healing cap or temporary abutment with restoration on the implant while final restoration is being fabricated.



PLACEMENT OF **HEALING CAP** (Healing Abutment, Tissue Former)



1 X-ray to verify implant has appropriate integration.



2 Use biopsy punch or surgical blade to expose the cover screw of the implant.



3 Remove cover screw with the .050 hex tool.



4 Use bone profiler if needed. See page 47.



5 Place the appropriate healing cap (see below) to aid in the tissue development and emergence profile for the final restoration. Tighten to 10Ncm or finger tight.



6 X-ray to verify the healing cap is fully seated.

Determining Appropriate Cuff Height and Width



Cuff height: Measure from the top of the implant to the top of the tissue and add one mm.

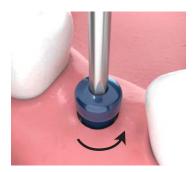


Width: Determined by the emergence profile the doctor is trying to develop in the soft tissue.

Molars will have a significantly wider emergence profile than an anterior tooth.

If implant is sub-crestal, use a narrow healing cap as it will not interfere with the adjacent bone when seating.

PLACEMENT OF ABUTMENT AND CEMENT RETAINED RESTORATION



Use an .050 Hex Driver to turn the healing cap counterclockwise and remove it.



Insert the final abutment into the implant using the proper orientation. Tighten to finger tight.



Try on the final restoration



Verify proper fit of restoration, proper contacts, proper occlusion. Take an x-ray to verify restoration is fully seated.



Remove the restoration and tighten the abutment with a torque wrench.

Torque specifications:
300 Series: 20 Ncm
400 & 500 Series: 30Ncm



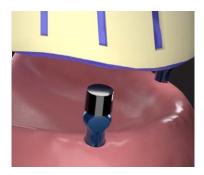
Cement the crown over the abutment. Remove excess cement.



PLACEMENT OF **MULTI-UNIT ABUTMENT** (MUA, transmucosal)

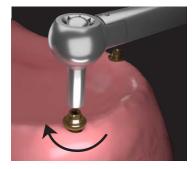
Multi-unit Abutments are used to secure multi-unit screw-retained prosthetics in one of the following case types:

- **1.** Attaching Zirconia hybrid prosthetics.
- 2. Retrofitting a pre-made denture following immediate placement and immediate load of a temporary/healing prosthesis. These healing appliances and attachments are generally replaced with the final prosthesis following implant integration.
- 3. Attaching a milled or cast titanium bar which supports a denture type restoration attached to the metal substructure.



1 Take an implant level impression using standard impression posts. Send impression to the laboratory for them to pick the correct Multiunit Abutments and make a customized open tray.

4 APPT 3: When case is returned from the laboratory use the base plate and wax rims to register jaw relations. Send to laboratory.



2 APPT 2: When case is returned from the laboratory, remove healing caps, insert abutments, and drive them into the implants using the DEH-0910-32 Abutment Driver and a torque wrench.

Torque specifications: 300 Series: 20 Ncm, 400 & 500 Series: 30Ncm



5 APPT 4: When case is returned from the laboratory, try in the polymethylmethacrylate (PMMA) setup. Make adjustments as necessary during the temporary period (6 weeks recommended).

After the adjustments have been made and appliance is satisfactory, remove appliance and return to laboratory for scan of the modified appliance and creation of new final appliance.



3 Using the custom tray, take a second impression with the MUA-0345-IP Impression Copings over the abutments. Send impression to the laboratory for master cast, base plate and wax rims for jaw relations.

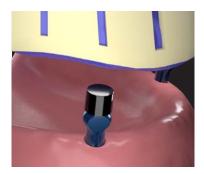


6 APPT 5: When final appliance is returned, insert prosthesis and tighten sleeve screws to 20 Ncm.



PLACEMENT OF POSITIONER DENTURE RETAINING ABUTMENT

Denture Retaining Abutments are used to secure removable denture prosthetics.



1 Take an implant level impression using standard impression posts. Send impression to the laboratory for them to pick the correct abutments and make a customized tray.



2 APPT 2: When case is returned from the laboratory, remove healing caps, insert abutments, and drive them into the implants using the DLR-0345-00 Abutment Driver and a torque wrench.

Torque specifications: 300 Series: 20 Ncm 400 & 500 Series: 30Ncm



3 Using the custom tray, take a second impression with the appropriate impression copings over the abutment. Send impression to the laboratory for master cast, base plate and wax rims for jaw relations.

4 APPT 3: When case is returned from the laboratory use the base plate and wax rims to register jaw relations. Send to laboratory.



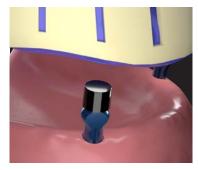
5 APPT 4: When case is returned from the laboratory, try in denture setup. Make adjustments as necessary before processing final restoration.

6 APPT 5: When final denture is returned insert appliance, adjust occlusion, retention caps and denture base as necessary.



PLACEMENT OF BALL ABUTMENT AND RESTORATION

Ball Abutments are used to secure removable denture prosthetics.



1 Take an implant level impression using standard impression posts. Send impression to the laboratory for them to pick the correct ball abutments and make a customized tray.



2 APPT 2: When case is returned from the laboratory, remove healing caps, insert abutments, and drive them into the implants using the DEH-0000-00 Ball Abutment Driver and a torque wrench.

Torque specifications: 300 Series: 20 Ncm 400 & 500 Series: 30Ncm



3 Take a second impression using a custom tray, with abutments in place and Rhein Impression Transfers over the abutments. Send impression to the laboratory for master cast, base plate and wax rims for jaw relations.

4 APPT 3: When case is returned from the laboratory use the base plate and wax rims to register jaw relations. Send to laboratory.



5 APPT 4: When case is returned from the laboratory, try in denture setup. Make adjustments as necessary before processing final restoration.

6 APPT 5: When final denture is returned insert appliance, adjust occlusion, retention caps and denture base as necessary.

Choosing Platform Height for Ball Abutments

Measure from the top of the implant to the top of the tissue and add one to two mm.





PLACEMENT OF RHEIN83 RETENTIVE CAPS

In a prosthesis with metal housings, remove caps using a rotary tool at a low RPM, or the Rhein83 cap removal tool. For all others, use a pointed instrument, such as a spatula, or the Rhein83 cap extractor tool.

Insert the new caps with the Rhein83 cap insertion tool. Green caps inserted in metal housings should have a drop of cyanoacrylic adhesive applied to the inside of the housing before insertion.

RHEIN83 RETENTIVE CAP COLORS AND RETENTION:		
Cap Color/Name		Retention
Clear		Standard
Pink		Soft
Yellow (Standard and Undersized Internal Diameter)		Extra Soft
Green		Very Elastic
Extra Resilient Gold		Slightly Elastic
Extra Resilient Silver		Elastic
Titan		Standard
Gray		Rigid

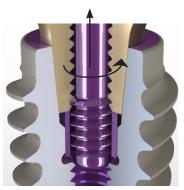


ABUTMENT REMOVAL PROCEDURE

Permanent abutments are easily removed in the Implant One system with an abutment removal tool unique for a tapered implant connection.



Using a .050 tapered hex driver, unscrew the fixation screw.



Gently lift up the driver while rotating it counter-clockwise to engage the screw in the internal threads of the abutment.



Continue to turn the abutment removal tool until the abutment releases from the tapered connection of the implant.



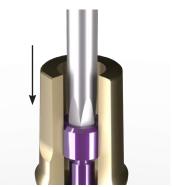
Continue turning the fixation screw counter-clockwise until it disengages the threads of the implant. You will feel it clicking when this happens.



You may now unscrew the fixation screw out of the abutment.



The abutment is now easily pulled out of the implant.



Apply downward force on the hex driver to catch and fix the driver to the screw.



Insert an abutment removal tool and turn it clockwise until it reaches the bottom of the abutment.

Products illustrated in this procedure: .050 Hex Driver - HDT-0050, Abutment Extractor - EXT-0172



IMPLANT ONE **SCAN BODY PROCEDURE**

The Implant One Scan Body is designed with specialized geometry that helps CAD software pinpoint the exact location of an Implant One implant, its timing, and its relationship to the arch form. Follow the steps below to ensure the most accurate scans for your patients' restorations.



1 Place the scan body into the implant or analog. The scan body's series and the implant's series must match, e.g., 300 Series to 300 Series.

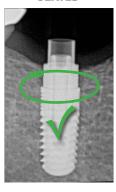
IMPORTANT:

The dimple must face the buccal or the facial in order to get an acceptable scan.



2 Finger tighten the abutment screw with an Implant One tapered .050" hex driver (HDT).

SEATED



NOT-SEATED



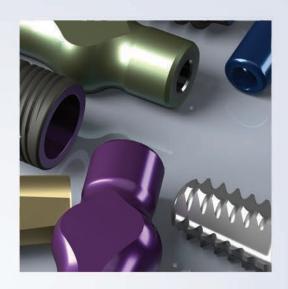
3 Take an X-ray to confirm proper seating of the scan body (intraoral only). There should be no gap between the implant and the scan body.



4 Take the optical scan with the scan body properly installed.



INFORMATION SHEETS:



INTENDED USE OF SURGICAL KIT COMPONENTS

DIRECT PLACEMENT IMPLANTS

CARRIER FEATURES

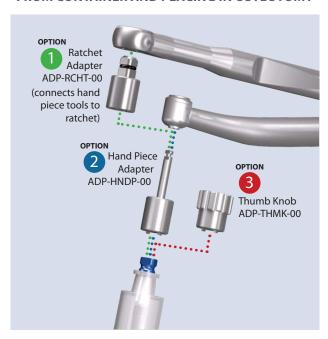
ABUTMENT SCREW





INTENDED USE OF **SURGICAL KIT COMPONENTS**

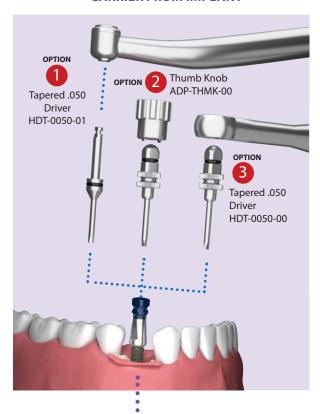
OPTIONS FOR REMOVING IMPLANT WITH CARRIER FROM CONTAINER AND PLACING IN OSTEOTOMY



OPTIONS FOR DRIVING IMPLANT TO FULL DEPTH



OPTIONS FOR REMOVING CARRIER FROM IMPLANT



Do not drive implant to full depth with the carrier – it may damage the hex connection inside the implant.

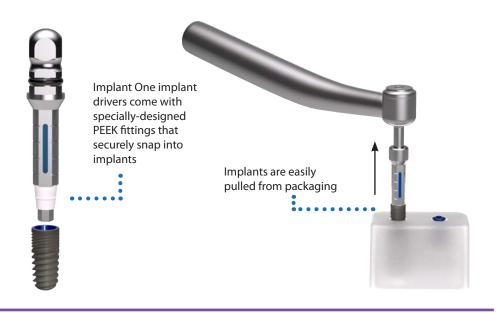
Use one of these options with Direct Placement implants (see next page)

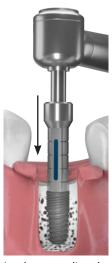




IMPLANT ONE **DIRECT PLACEMENT IMPLANTS**

Many of our implants are now equipped with the Direct Placment feature which eliminates the need for a carrier.





Implants are directly placed into their osteotomy sites and driven to full depth. No intermediate steps required.

IMPLANT ONE CARRIER FEATURES

Carriers are used to transfer an implant to the osteotomy when the Direct Placement feature is not available.

- Auto-Removal feature simplifies removal of the carrier from the implant after it is stabilized in the osteotomy.
- The carrier can be cut off and used as a temporary abutment.

SPECIFICATIONS

Material: 6AL4V E.L.I. Titanium Profile Diameter: 4.5 mm – 5.5 mm .050" hex interface





Screw can be loosened using a Hand Piece Driver, or a Ratchet/Finger Driver

Auto-Removal feature forces carrier out of implant as .050" hex fixation screw is turned counter-clockwise Handpiece adapter or thumb knob snaps onto carrier allowing for easy, sterile transfer from packaging to osteotomy





Color-coded anodization for easy platform identification

IMPLANT ONE SERIES
300 400 500



IMPLANT ONE **ABUTMENT SCREW**

Usage:

The tip of the abutment screw should protrude approximately 2.6mm (5 to 6 exposed threads).

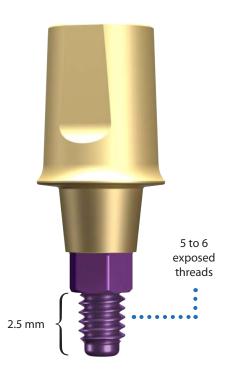
When turning the screw into the implant, the screw should turn 5 to 6 turns for proper thread engagement. Do not exceed specified torque.

SPECIFICATIONS

.050" hex interface

Material: 6AL4V E.L.I. Titanium Diameter: 1.1 mm – 1.4 mm Height: 9.6 mm









IMPI ANT ONF GLOSSARY

Abutment A part used to connect a crown to an implant.

Analog A part used by the laboratory to replicate implants and their position in a dental model. The analog is screwed onto the impression coping then set into a plaster model during casting.

Anodization Process of coating a metal with a colored, protective film by chemical or electrolytic means.

Carrier This part comes attached to the implant in the package. This is a removable piece that helps the dentist transfer the implant from the package to the osteotomy site without having to touch the implant.

Cover Screw *alternate terms: healing screw, cover cap* Placed over the implant during the healing period to keep the inside of the implant free of bacteria, tissue and bone.

Cuff Height On an abutment, the distance from the top of the implant to the bottom of the restoration (not necessarily the bone ridge since the implant can be placed sub-crestal).

Dental Implant An artificial tooth root that provides a stable and permanent base for a replacement tooth.

Fixation Screw Screw used to fully engage an abutment to its implant. In the Implant One system, it is the taper of the implant-abutment connection that makes a permanent, sealed bond between them. See Morse Taper.

Gingival Height Measurement from the top of the bone to the top of the gingiva.

Healing Cap A tall cap that covers the top of the implant after it is integrated, keeping the implant free of bacteria, tissue and bone, and helps properly shape the gingiva for the placement of the abutment and crown once it returns from the lab.

Implant Driver Tool that interfaces directly with an implant and is used to drive it to final depth. Carriers must be removed when the torque exceeds 6 Ncm.

Impression A negative imprint of hard and soft tissues in the mouth from which a positive reproduction can be formed. Used by laboratories to create accurate custom abutments and crowns.

Impression Coping An accessory used to pinpoint the exact position of the implant on the dental impression.

Irrigation Process of cleaning a wound by flushing or washing out with water or a medicated solution.

Morse Taper A self-holding, steeply tapered connection between two mechanical components used widely in the orthopedic, aeronautical, and mechanical machining industries. The unique attributes of this connection create a very strong, and hermetically sealed connection, which, in the Implant One system, prevents bacteria from growing inside its implants. The Morse taper was invented by Stephen A. Morse in 1864.

Overdenture A complete denture supported both by mucosa and by a few remaining natural teeth and/or dental implants to permit the denture to fit over them.

Profile Diameter The outer diameter of an abutment where it meets the gingival tissue.

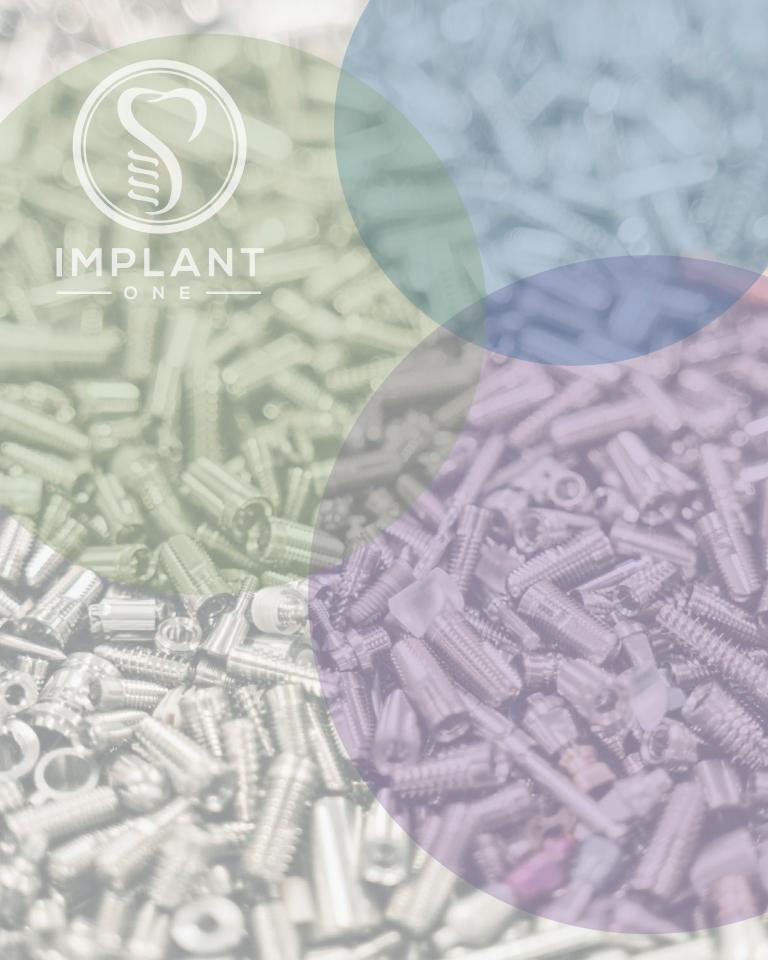
Profiler Tool used to cut away excess bone and tissue that has grown over the top of the implant during healing period prior to restoration.

RPM Revolutions per minute.

Sub-crestal Refers to placing an implant below the crest of the bone ridge.

Surgical Stent An appliance made prior to surgery that helps guide the surgical drills during the implant surgery.

Torque The force that produces rotation, measured in Newton Centimeters (Ncm). Too much torque will cause damage to bone cells.





implantlogistics.com







711 Spartan Dr. Sparta | WI 54656 (608) 498-4855 | 844-383-8001