ENGLISH - EN

TSH® Prosthodontic Procedure

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SYMBOL	LEGEND
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	Caution!
	This is a medical device intended for use on patients.
	Implants are supplied sterilized. Sterilized by gamma irradiation. The sterile barrier is the outer blister sealed with Tyvek.
	If the packaging is damaged or has been opened accidentally, the sterility of the implants that are supplied sterilized may be compromised. Do not use the product and immediately inform the manufacturer at the email address garantiacalidad@phibo.com.
	The reuse and/or reprocessing of disposable products can lead to loss of functionality and/or safety of the product and, potentially, cause problems for the patient.
 'Do not re-sterilize'	Re-sterilization of disposable products can lead to loss of functionality and/or safety of the product and cause potential problems for the patient.
'Single patient use'	The use of disposable products for more than one patient can result in loss of functionality and/or safety of the product and, potentially, cause problems for the patient.
	Medical devices must be safely disposed of in approved medical containers for such purposes, and in accordance with the requirements of current local regulations.
	The labeling of the products referred to in these instructions for use includes traceability with UDI encoding/unique identification of the device.
'IFU' 	These instructions for use are electronic and are not attached in paper format. They are intended for health professionals. The instructions can be downloaded from the Downloads section of the manufacturer's website at www.phibo.com.
 **0123**	CE 0123 represents certification by TUV SUD.

TECHNICAL INFORMATION

The information below is not sufficient for the use of Phibo® dental implants, but the person who manipulates it must have sufficient training and information on the dental implant technique for the use of Phibo® dental implants.

If you are not familiar with the clinical procedure described here, you can contact your advisor in the Phibo® business area and they will provide you with any information and/or training you may require to perform this procedure.

Consult the detailed information in the implant package insert before use. The instructions for use and maintenance of Phibo® products are listed in the documents and procedure manuals for the Phibo® implant system.

Phibo® prosthodontic components and instruments are supplied unsterilized. They must be cleaned, disinfected and sterilized before and after use, according to the process described in the document “Cleaning, Disinfection and Sterilization of Prosthodontic Components and Instruments” PROSPLD

IMPORTANT BEFORE USING PHIBO®

In its innovative and patented design, the Phibo® implant system incorporates advanced technological features, developed only for professionals who understand technology as an advantage and design as a benefit.

Phibo® complies with all the requirements established by European laws and guidelines relating to the manufacture and distribution of medical and health products. The Phibo® implant system is certified and authorized for sale by the corresponding European Notified Body. Phibo Dental Solutions, S.L. complies with the most rigorous international quality regulations for healthcare products, guaranteeing the perfect quality of its products, with the sole objective of constantly increasing customer satisfaction.

The use of other components or products not manufactured by Phibo Dental Solutions, S.L., that come into contact with the originals of the Phibo® implant system manufactured by Phibo Dental Solutions, S.L. according to the original design specifications, may cause serious damage to the patient's health as they are not contemplated for use with those referred to in the documentation provided by the manufacturer.

Any use of non-original components or instruments indicated in this procedure, which come into contact with those referred to, will automatically void any type of warranty on the products manufactured by Phibo Dental Solutions, S.L.

The use and application of the Phibo® dental implant system is beyond the manufacturer's control.
The user is responsible for any damages that may be caused by the use of the product, releasing Phibo Dental Solutions, S.L. from liability for damages or losses resulting from improper handling or use.

The reuse of single-use products may result in potential deterioration of their features, which involves the risk of tissue infection, surgical or prosthodontic failure and/or deterioration of the patient's health.

Phibo® implant system documentation is periodically renewed according to the state of science and technology. Phibo® product users should request product information on a regular basis, in addition to attending regularly established product and technical training courses. The use and placement of Phibo® implants in unsuitable areas and the use of surgical instruments or prosthetic components not listed in this procedure can cause serious damage to the patient's health and total loss of product warranty. The Phibo® implant system is designed for teeth rehabilitation in a single or multiple way, according to the traditional clinical processes listed in this documentation, and cases with insufficient bone for implant placement, clinical risk cases such as sinus lift, fillings, advanced surgical techniques, unsuitable or severe cases of non-parallel implants, among others, are excluded from any warranty.

The Phibo® implant system is distributed internationally in different countries with different technical and health regulations and legislations, and there may be differences in the procedure content from one country to another. Please contact the exclusive Phibo® distributor in your country and request documentation regarding the products and their availability.

Phibo Dental Solutions, S.L. reserves the right to modify and evolve the products listed in this procedure without prior notice.

Any illustrations that may appear in this document are not made to scale.

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INTRODUCTION

The objective of this Prosthodontic Procedure is to allow for a global view of all attachments, establishing the procedure for the different prosthodontic restorations that can be performed on the Phibo® TSH® system, both for clinical and laboratory use. From single cases, multiple cases, fixed prostheses and complete restorations to their different forms of connection: cement-retained or screw-retained.

With the Phibo® TSH® system, you can apply many of the options available in current Implantology. The Phibo® TSH® implant system has a range of attachments that allow for simple prosthodontic restorations on implants, providing solutions so that aesthetic and functional components guarantee effective treatment for the patient.

2 options of impression taking are available. Direct closed-tray and indirect open-tray. Both are available with different attachments.

The Phibo® TSH® system has the Rotation or Anti-rotation Implant Direct Castable Abutment, for use in both single and multiple screw-retained restorations.

Phibo® TSH® has a range of millable abutments, with different heights and angulation for use in cement-retained prosthetic restorations.

IMPLANT-DEPENDENT PROCEDURES AND PROSTHODONTIC RESTORATIONS.

EARLY LOADING

Temporary or permanent restoration with occlusal contact, after 6 weeks in the mandible and 8 weeks in the maxilla, from implant insertion.

The prosthetic process is performed in the laboratory.

DELAYED LOADING

Temporary or permanent restoration with occlusal contact, after 3 months in the mandible and 6 months in the maxilla, from implant insertion.

The prosthetic process is performed in the laboratory.

FEATURES OF THE DIFFERENT PROSTHETIC ATTACHMENTS

ANTI-ROTATION MILLABLE BURS

The range of milling pillars is machined from titanium. It includes the following abutment types:

. Millable abutments with 2 mm and 4 mm shoulders for the implant series TSH® 2, 3, 4 and 5. The abutment retention screw is supplied separately.

. 15° and 25° angled millable abutments for the TSH® 3 and 4 implant series. They are provided without a transmucosal height and with a transmucosal height of 1mm. They are supplied together with the retention screw.

As the name suggests, Millable Abutments are designed to be milled and modified at the user's convenience for use in cement-retained restorations. The fixation torque for the retention screw is 35 Ncm.

INDICATIONS

. For single and multiple cement-retained restorations on the abutment, in general

. To level the emergence height of the crown to the adjacent natural teeth and soft tissue thickness.

. If the occlusal height from the implant is greater than 6mm.

. If it is necessary to adjust the height of the opposing arch and parallelize the insertion axis of the prosthesis.

. In fixed restorations with non-parallel implants.

. In single or multiple restorations where, due to the position of the implant, the entry hole of the retention screw in a screw-retained prosthesis compromises the restoration aesthetics.

PRECAUTIONS

. Possible prolonged tissue response due to the cement used.

. Retention of the prosthesis due to excess cement.

. Less control of crown or bridge seating during the cementation process.

CONTRAINDICATIONS

. If the occlusal height from the implant platform is less than 4mm.

IMPLANT DIRECT UCLA ABUTMENT

The range of implant direct castable abutments is machined from plastic.

They are indicated for single and multiple screw-retained or overdenture restorations for the Phibo® TSH® system.

The range of implant direct castable abutments consists of:

- Anti-rotation Ucla Castable Abutment: Suitable for single fixed screw-retained crowns.
- Rotation Ucla Castable Abutment: Suitable for multiple fixed restorations, or overdentures. The different types of castable abutments in the Phibo® BNT® & TSH® system are supplied separately from the retention screw, which is fixed at a torque of 35 N.cm.

CONTRAINDICATIONS

In those cases where the entry hole of the retention screw compromises the aesthetics of the

restoration.

BALL ABUTMENTS

The ball abutment is a base abutment for the fabrication of mucosa-implant-supported overdenture restorations. The ball abutment is machined from titanium. Available for series 3 and 4 in the following sizes.

. TSH® Series 3 implants:

Abutments with 2.0mm and 4.0mm transmucosal area.

. TSH® Series 4 implants:

Abutments with 2.0mm and 4.0mm transmucosal area.

The final insertion torque to the implant is 35 N.cm. Maximum allowable angulation: 30º between implants

INDICATIONS

. Base abutment for the fabrication of mucosa-implant-supported ball-retained overdenture restorations, in the Mandibular area.

. In cases with significant deficit of the mandibular elastic bone mass, where the placement of implants for other types of rehabilitation involves a high risk of bone fracture.

RELATIVE CONTRAINDICATIONS

. In the maxillary bone. As a greater number of implants have to be placed due to low bone density, the adjustment of the relines and overdenture to the abutment is more complicated.

. In all cases where another type of restoration is indicated.

. In restorations with more than two implants with severe non-parallelism (since inserting the prosthesis would be difficult).

COMPLEMENTARY ATTACHMENTS

. Machined titanium O-ring cap:

An attachment that is integrated into the lower part of the overdenture and retains it to the implant when connected to the ball abutment. The element that provides the retention functionality between the cap and the abutment is a rubber

O-ring seated inside the cap.

IMPRESSION TAKING

METALLIC IMPRESSION COPING

FEATURES

· Machined titanium attachments.

. Available for open-tray technique: metal carrier with long screw

. Available for closed-tray technique: metal carrier with short screw

. The blister contains: impression carrier, open-tray long screw and closed-tray short screw.

INDICATIONS

· Implant Direct Impression.

· In cases of severe non-parallelism between implants or between implants and teeth, impressions are taken with open-tray and a long retention screw using the open-tray impression carrier.

· In cases of parallelism between implants or between implants and teeth, impressions can be taken with closed-tray and a short retention screw using the closed-tray impression carrier.

RECOMMENDATIONS

· The procedure for placing and fixing the impression carrier on the implant must be followed.

· In case of significant thickness of soft tissue, it is advisable to perform
a placement control X-ray of the carrier to the implant shoulder.

ATTACHMENTS AND CLINICAL MATERIALS

· Metal impression carrier for open-tray or impression carrier for closed-tray for TSH® systems, depending on the chosen technique.

· Phibo® system 25 mm driver.

· *Single tray.

· *Impression material.

· *Impression material adhesive. LABORATORY

· TSH® implant analog

· Phibo® system 1.25 mm driver.

*MATERIAL NOT SUPPLIED BY Phibo®

OPERATING PROCEDURE

CLINICAL PROCEDURE

· Remove the healing abutment.

· Select the impression taking technique (open or closed tray) and, therefore, its corresponding impression carrier. Fix the 1.25 mm driver on the retention screw, pass it through the carrier until it protrudes at the lower end.

· Fix the carrier and screw assembly to the implant head. To do this, place the assembly on the implant by threading it until you notice that the base of the metal carrier has come into contact with the head of the implant, then loosen the retention screw and turn the impression body slightly clockwise or counterclockwise. If the body does not rotate, it means that it is adjusted to the implant hexagon, if it rotates, a slight pressure in the occlusal-gingival direction must be combined with a turn until you notice that the assembly fits between the hexagons. Finish threading the retention screw and tighten it

manually (It is advisable to check the fixation using periapical x-ray).

· Air dry the carrier.

· Apply the impression material around the carrier.

· Insert the tray into the mouth with the rest of the impression material and wait for it to set.

· Open-tray technique: Remove the set screw and drag the tray with the carrier body.

· Closed-tray technique: Remove the tray directly once the impression material has set and remove the impression carrier from the implant.

· Replace the healing abutment.

· Send to the laboratory:

· Impression tray.

· Impression carrier with the corresponding screw.

· Implant analog.

· Bite registration.

· Opposing arch model.

LABORATORY PROCEDURE

· Open-tray technique: Place the implant analog on the body of the open-tray carrier retained in the impression material and secure it with the retention screw.

· Closed-tray technique: Attach the implant analog to the closed-tray carrier using the screw. Insert the assembly into the tray by matching the flat faces, apply light pressure until you hear the retention click.

· Pour soft resin into the soft tissue area and wait for it to set

· Pour plaster into the rest of the tray to get the final working model.

· Open-tray technique: Once the plaster has hardened, remove the retention screw and detach the model.

· Closed-tray technique: Once the plaster has hardened, separate the model from the tray and remove the metal impression carrier by loosening the retention screw.

· Condition and place the model on the semi-adjustable articulator. Use the records taken before surgery.

· Examine:

- o Implant position (angulation and parallelism).
- o Available spaces and dimensions.
- o Soft tissue height for emergence profile preparation.
- o Type of opposing arch.

· With the information obtained, choose the optimal abutments and the necessary attachments to manufacture the prosthesis in the laboratory.

PERMANENT CEMENT-RETAINED RESTORATIONS

MILLABLE ABUTMENTS

FEATURES

. Machined titanium abutment with a smooth transition area on the shoulder. The fixation torque of the abutment to the implant is 35 N.cm.
. The fixed prostheses cemented to the milling abutment are manufactured by casting the base structure into metal, modeled after the titanium abutment itself.

INDICATIONS
. For single and multiple cement-retained restorations on the abutment, in general.
. To level the emergence height of the crown to the adjacent natural teeth and soft tissue thickness.
. When it is necessary to adjust the height of the opposing arch and parallelize the insertion axis of the prosthesis.
. In single or multiple restorations where, due to the position of the implant, the entry hole of the retention screw in a screw-retained prosthesis compromises the restoration aesthetics.

CONTRAINDICATIONS

. When the occlusal height from the implant is less than 4mm.

ATTACHMENTS AND CLINICAL MATERIALS
. Phibo® 1.25 mm driver
. Phibo® torque wrench.
. *Implant impression record.
. *Impression material.
. *Single tray
*MATERIAL NOT SUPPLIED BY Phibo®

LABORATORY
. TSH® implant analog.
. TSH® Millable Abutments.
. TSH® permanent clinical screw.
. Phibo® 1.25 mm driver

OPERATING PROCEDURE
IMPRESSION TAKING AND MOLDING (See impression taking procedure)

LABORATORY PROCEDURE
SELECTION AND PLACEMENT OF MILLABLE ABUTMENT
· Choose the type of Millable Abutment depending on:

- o Soft tissue height from the implant shoulder to the free gingival margin.
- o Non-parallel implants.
- o Emergence profile of the prosthesis.

· Insert the chosen abutment to the implant analog, adjusting the hexagons with small turns, and manually screw the retention screw until the millable abutment is fixed on the TSH® implant analog.

· Check the height of the Millable Abutment in relation to the opposing arc and the parallelism with adjacent teeth and/or abutments.

· Shape the abutment by milling if necessary.

PREPARATION OF THE PROSTHESIS

· Seal the entry hole of the retention screw of the millable abutment with wax and prepare the abutment with a spacer.

· Wax up directly on the abutment once it has been shaped by milling (if indicated) after applying the appropriate separator.

· Model the structure for casting with wax or resin.

· Perform the casting on metal.

· Remove the casted structure into the cylinder.

· Reline and adjust the shoulder.

· Apply ceramic coating without glazing, if applicable.

· Make a guide on the model for the position of the Millable Abutment in the mouth.

· Remove the Millable Abutment from the model.

CLINICAL PROCEDURE, STRUCTURE SAMPLE

· Remove the healing abutment from the implant.

· Place the abutment or abutments on the acrylic resin guide made in the laboratory.

· Attach the abutment to the implant using the acrylic resin positioning guide and thread the retention screw until the abutment is fixed, gently tightening by hand.

· Mount the prosthesis structure on the abutment in the mouth.

· Check the fit of the structure.

· Adjustments of the abutment shoulder to the implant.

- o Passivity.
- o Relationship with the gingiva.
- o Contact points.
- o Occlusion.

· Remove the structure from the mouth and assemble it back into the working model.

· Replace the healing abutment.

LABORATORY PROCEDURE FOR STRUCTURE FINISHING

· Finish the ceramic coating and glazing.

CLINICAL PROCEDURE

PLACEMENT OF ABUTMENTS AND PERMANENT PROSTHESIS.

· Remove the healing abutment from the implant.

· Place the abutment or abutments on the acrylic resin guide made in the laboratory.

· Attach the abutment to the implant using the acrylic resin positioning guide and thread the retention screw until the abutment is fixed, gently tightening by hand.

· Tighten the retention screw using the 1.25 mm driver tip and the torque wrench at a torque of 35 N.cm.

· Mount the prosthesis structure on the abutment in the mouth.

· Check the fit of the structure.

- o Adjustments of the abutment shoulder to the implant.
- o Passivity.
- o Relationship with the gingiva.
- o Contact points.
- o Occlusion.

PERMANENT SCREW-RETAINED RESTORATIONS ON IMPLANT DIRECT CASTABLE ABUTMENT

The range of implant direct castable abutments is machined from plastic.

They are indicated for single and multiple screw-retained or bar-retained overdenture restorations for the Phibo® TSH® system.

The range of implant direct castable abutments consists of:

- Anti-rotation Ucla Castable Abutment: Suitable for single fixed screw-retained restorations.
- Rotation Ucla Castable Abutment: Suitable for multiple fixed restorations, or bar-retained overdentures. The different types of castable abutments in the Phibo® TSH® system are supplied separately from the retention screw, which is fixed at a torque of 35 N.cm.

CONTRAINDICATIONS

In those cases where the entry hole of the retention screw compromises the aesthetics of the restoration.

ATTACHMENTS AND CLINICAL MATERIALS

. Phibo® 25mm diver

. Phibo® torque wrench.

. *Implant impression record.

. *Impression material.

. *Single tray.

*MATERIAL NOT SUPPLIED BY Phibo®

LABORATORY

. TSH® implant analog.

. Castable Abutment & TSH®.

. TSH® permanent clinical screw.

. TSH® laboratory screw.

. Phibo® 1.25 mm driver.

OPERATING PROCEDURE

CLINICAL PROCEDURE

IMPRESSION TAKING AND MOLDING

(See impression taking procedure)

LABORATORY PROCEDURE

SELECTION AND PLACEMENT OF UCLA ABUTMENT

· Choose the type of Castable Abutment to fabricate the prosthesis and check.

- o Soft tissue height from the implant platform to the free gingival margin.
- o Emergence profile of the prosthesis.

· Insert the chosen castable abutment into the implant analog.

· Check the height in relation to the opposing arc and the parallelism with adjacent teeth and/or abutments.

· Model the structure in wax or resin for casting onto the castable abutment. Cast the modeled structure using a standard process.

· Reline and polish the structure if necessary.

CLINICAL PROCEDURE, STRUCTURE SAMPLE

· Remove the healing abutment from the implant.

· Attach the structure sample to the implant with the retention screw.

· Check the fit of the structure.

- o Adjustments of the abutment shoulder to the implant.
- o Passivity.
- o Relationship with the gingiva.
- o Points of contact.
- o Occlusion.

· Remove the structure from the mouth and assemble it back into the working model.

· Replace the healing abutment.

LABORATORY PROCEDURE FOR STRUCTURE FINISHING

·Finish the ceramic coating and glazing.

CLINICAL PROCEDURE

PLACEMENT OF PERMANENT PROSTHESIS.

· Remove the healing abutment from the implant.

· Attach the prosthesis to the implant with the retention screw.

· Tighten the retention screw using the 1.25 mm driver tip and the torque wrench to a torque of 35 N.cm.

· Check the fit of the structure.

- o Adjustments of the abutment shoulder to the implant.
- o Passivity.
- o Relationship with the gingiva.
- o Points of contact.
- o Occlusion.

PERMANENT OVERDENTURE RESTORATIONS ON BALL ABUTMENT

FEATURES

The Ball Abutment is a base abutment for the fabrication of mucosa-implant-supported overdenture restorations. The Ball Abutment is machined from titanium.

The following Ball Abutment sizes are available for TSH® Implant Series 3 and 4. Abutments with 2.0mm and 4.0mm transmucosal area.

The final fixation torque to the implant is 35 N.cm.

COMPLEMENTARY ATTACHMENTS

· Machined titanium O-ring cap:

An attachment that is integrated into the lower part of the overdenture and retains it to the implant when connected to the ball abutment. The element that provides the retention functionality between the cap and the abutment is a rubber O-ring seated inside the cap.

INDICATIONS

· Base abutment for the fabrication of mucosa-implant-supported ball-retained overdenture restorations, in the Mandibular area.

· In cases with significant deficit of the mandibular elastic bone mass, where the placement of implants for other types of rehabilitation involves a high risk of bone fracture.

RELATIVE CONTRAINDICATIONS

· In maxillary bone. As a greater number of implants have to be placed due to low bone density, the adjustment of the relines and overdenture to the abutment is more complicated.

· In all cases where another type of restoration is indicated.

RECOMMENDATIONS

. Periodically replace the retention O-ring.

. Periodically check the patient until a perfect fit is achieved between the soft tissue and the prosthesis.

ABUTMENT OPTIONS

. TSH® Series 3 implants:

Abutments with 2.0mm and 4.0mm transmucosal area.

. TSH® Series 4 Implant:

Abutments with 2.0mm and 4.0mm transmucosal area.

APPLICABLE PROCEDURES

. Standard.

ATTACHMENTS AND MATERIAL

CLINIC

. Phibo® 25 mm driver

. Phibo® torque ratchet.

. *Implant impression record.

. *Impression material.

. *Single tray.

*MATERIAL NOT SUPPLIED BY Phibo®

LABORATORY

. TSH® implant analog.

. TSH® Ball Abutment.

. Metal O-ring cap for TSH® ball abutment.

. Phibo® mechanical or manual 1.25 mm driver.

OPERATING PROCEDURE

CLINICAL PROCEDURE

IMPRESSION TAKING AND MOLDING

(See impression taking procedure)

LABORATORY PROCEDURE

SELECTION AND PLACEMENT OF BALL ABUTMENT

· Choose the height of the transmucosal area of the Ball Abutment most suitable for reconstruction.

· Place the chosen abutment on the TSH® implant analog.

· Check the abutment height in relation to the opposing arch and the space for the overdenture.

LABORATORY PROCEDURE, PROSTHESIS FABRICATION

· Model the overdenture structure.

· Fix the metal O-ring cap to the overdenture with temporary material.

CLINICAL PROCEDURE, STRUCTURE SAMPLE

· Remove the healing abutments.

· Place the structure on the abutments.

· Check.

- o Adjustments of the abutment shoulder to the implant.
- o Passivity.
- o Relationship with the gingiva.
- o Occlusion.

· Remove the structure and abutments from the mouth.

· Replace the healing abutments.

LABORATORY PROCEDURE FOR STRUCTURE FINISHING

· Shape the structure if necessary.

· Remove the caps and temporary cement

· Fix the caps permanently with acrylic resin

CLINICAL PROCEDURE

PLACEMENT OF ABUTMENTS AND PERMANENT PROSTHESIS.

. Remove the healing abutment.

. Attach the Ball Abutment to the implant using the 1.25mm driver tip and the torque wrench at a torque of 35 N.cm.

. Mount the overdenture on the abutments in the mouth.

. Check

- o Adjustments of the abutment shoulder to the implant.
- o Passivity.
- o Relationship with the gingiva.
- o Occlusion.

Instruct the patient in the procedure for inserting and removing overdentures, as well as in maintaining oral hygiene.

Normal wear and tear require periodic replacement of the rubber O-ring, removing the old one with a probe and replacing it with a new one.

ROTATION CASTABLE ABUTMENT

ATTACHMENTS AND CLINICAL MATERIALS

. Phibo® 1.25 mm mechanical or manual driver

. TSH® impression carrier
. TSH® healing abutment
. *Impression record
. *Impression material
. Phibo® torque ratchet
. TSH® clinical screw
. *Single tray
*MATERIAL NOT SUPPLIED BY Phibo

LABORATORY
. TSH® implant analog
. Rotation castable abutment for TSH®
. TSH® laboratory screw
. Phibo® 1.25mm manual driver

OPERATING PROCEDURE
CLINIC
IMPRESSION TAKING AND MOLDING
(See impression taking procedure)

LABORATORY PROCEDURE
SELECTION AND PLACEMENT OF UCLA ABUTMENT
· Choose the type of Castable Abutment to fabricate the prosthesis and check.
    o Soft tissue height from the implant platform to the free gingival margin.
    o Emergence profile of the prosthesis.
· Insert the chosen castable abutment into the implant analog.
· Check the height in relation to the opposing arc and the parallelism with adjacent teeth and/or abutments.
· Model the structure in wax or resin for casting onto the castable abutment.
· Shape the bar in wax or attach prefabricated plastic bars to the castable abutment model.
· Cast the modeled structure using a standard process.
· Reline and polish the structure if necessary.
· Model overdenture structure on the bar and its attachment.

CLINICAL PROCEDURE, STRUCTURE SAMPLE
· Remove the healing abutment from the implant.
· Attach the structure sample to the implant with the retention screw.
· Check the fit of the structure.
    o Adjustments of the abutment shoulder to the implant.

- o Passivity.
- o Relationship with the gingiva.
- o Occlusion.

· Remove the structure from the mouth and assemble it back into the working model.

· Replace the healing abutments.

LABORATORY PROCEDURE

STRUCTURE FINISHING

· Shape the overdenture or bar appropriately.

CLINICAL PROCEDURE

PLACEMENT OF PERMANENT PROSTHESIS.

· Remove the Healing abutments from the Implants.

· Attach the bar to the implants with the retention screws.

· Tighten the retention screw using the 1.25 mm driver tip and the torque wrench at a torque of 35 N.cm.

· Mount the overdenture on the bar in the mouth.

· Check the fit of the structure.

- o Adjustments of the abutment shoulder to the implant.
- o Passivity.
- o Relationship with the gingiva.
- o Occlusion.

Instruct the patient in the procedure for inserting and removing overdentures, as well as in maintaining oral hygiene.