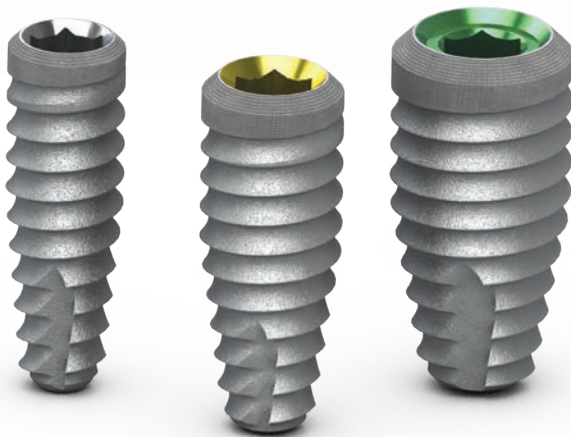


tapered internal
plus
implant system



designed for increased soft tissue volume

BIOHORIZONS[®]
SCIENCE • INNOVATION • SERVICE

99.2%
average
implant
success
rate¹

BioHorizons is dedicated to developing evidence-based and scientifically proven products. From the launch of the External implant system (Maestro) in 1997, to the Tapered Internal Plus implant system in 2012, dental professionals as well as patients have confidence in our comprehensive portfolio of dental implants and biologics products.

Our commitment to science, innovation and service has made us one of the fastest growing companies in the dental industry. BioHorizons has helped restore smiles in 85 markets throughout Asia, North America, South America, Africa, Australia and Europe.

global
leader for
biologic
based
solutions



SCIENCE

BioHorizons uses science and innovation to create unique products with proven surgical and esthetic results.

INNOVATION

Our advanced implant technologies, biologic products and computer guided surgery software have made BioHorizons a leading dental implant company.

products
sold
in 85
markets



SERVICE

BioHorizons understands the importance of providing excellent service. Our global network of professional representatives and our highly trained customer care support team are well-equipped to meet the needs of patients and clinicians.

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make the switch

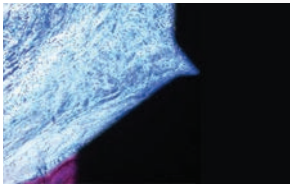
The Tapered Plus implant system offers all the great benefits of BioHorizons highly successful Tapered Internal system PLUS it features a Laser-Lok treated beveled-collar for bone and soft tissue attachment and platform switching designed for increased soft tissue volume.

platform switching

designed to increase soft tissue volume around the implant connection

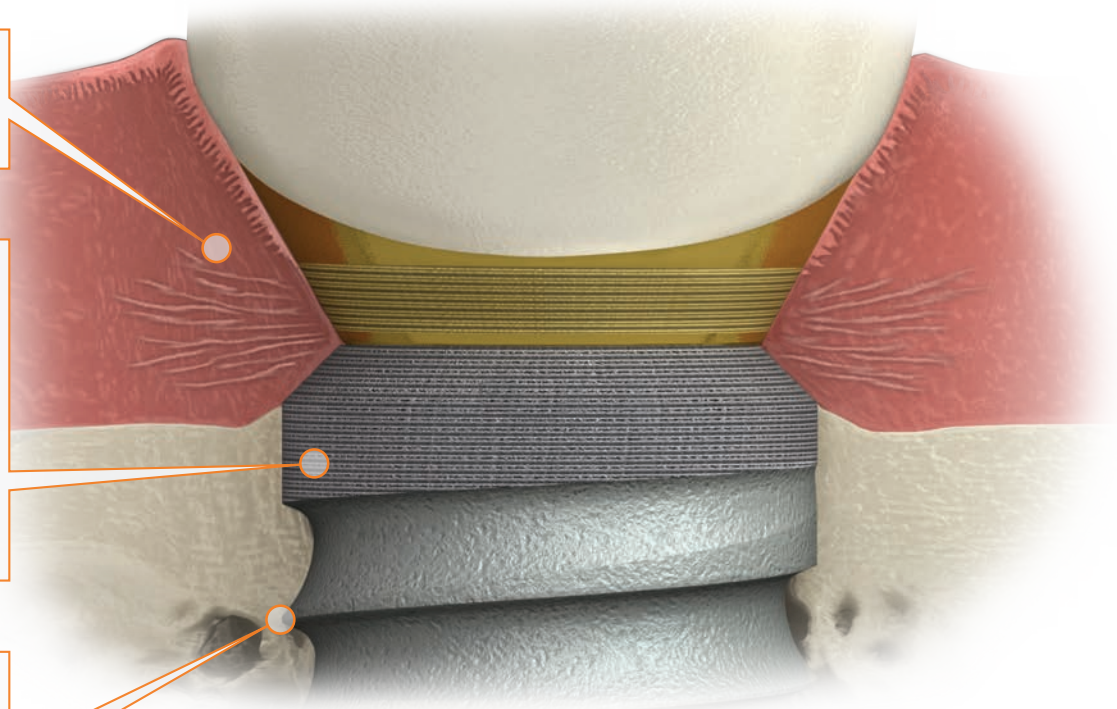
Laser-Lok® zone

creates a connective tissue seal and maintains crestal bone



optimized threadform

buttress thread engineered for superior stability over microthreaded implants



restorative ease

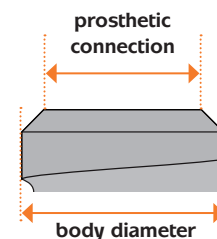
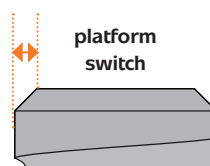
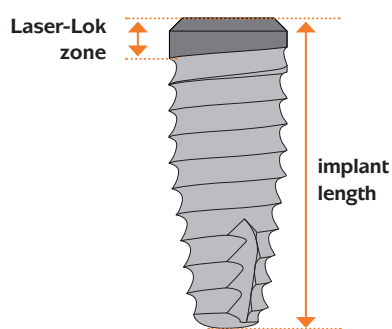
conical internal hex connection is color-coded for quick identification and component matching



** Clinical and histologic images are courtesy of Myron Nevins, DDS and Craig Misch, DDS.*

Dental Implants with Laser-Lok

	tapered 3.0		tapered plus		
prosthetic connection	 3.0mm		 3.0mm	 3.5mm	 4.5mm
body diameter	 3.0mm		 3.8mm	 4.6mm	 5.8mm
platform switch	—		0.4mm	0.5mm	0.6mm
Laser-Lok zone	2.1mm		1.8mm	1.8mm	1.8mm
7.5mm length	—		—	TLXP4607	TLXP5807
9.0mm length	—		TLXP3809	TLXP4609	TLXP5809
10.5mm length	TLX3010		TLXP3810	TLXP4610	TLXP5810
12.0mm length	TLX3012		TLXP3812	TLXP4612	TLXP5812
15.0mm length	TLX3015		TLXP3815	TLXP4615	TLXP5815



Mount-free for quick placement and maximum site visibility. Includes a surgical cover cap.
Titanium Alloy (Ti-6AL-4V).

Surgical Kit

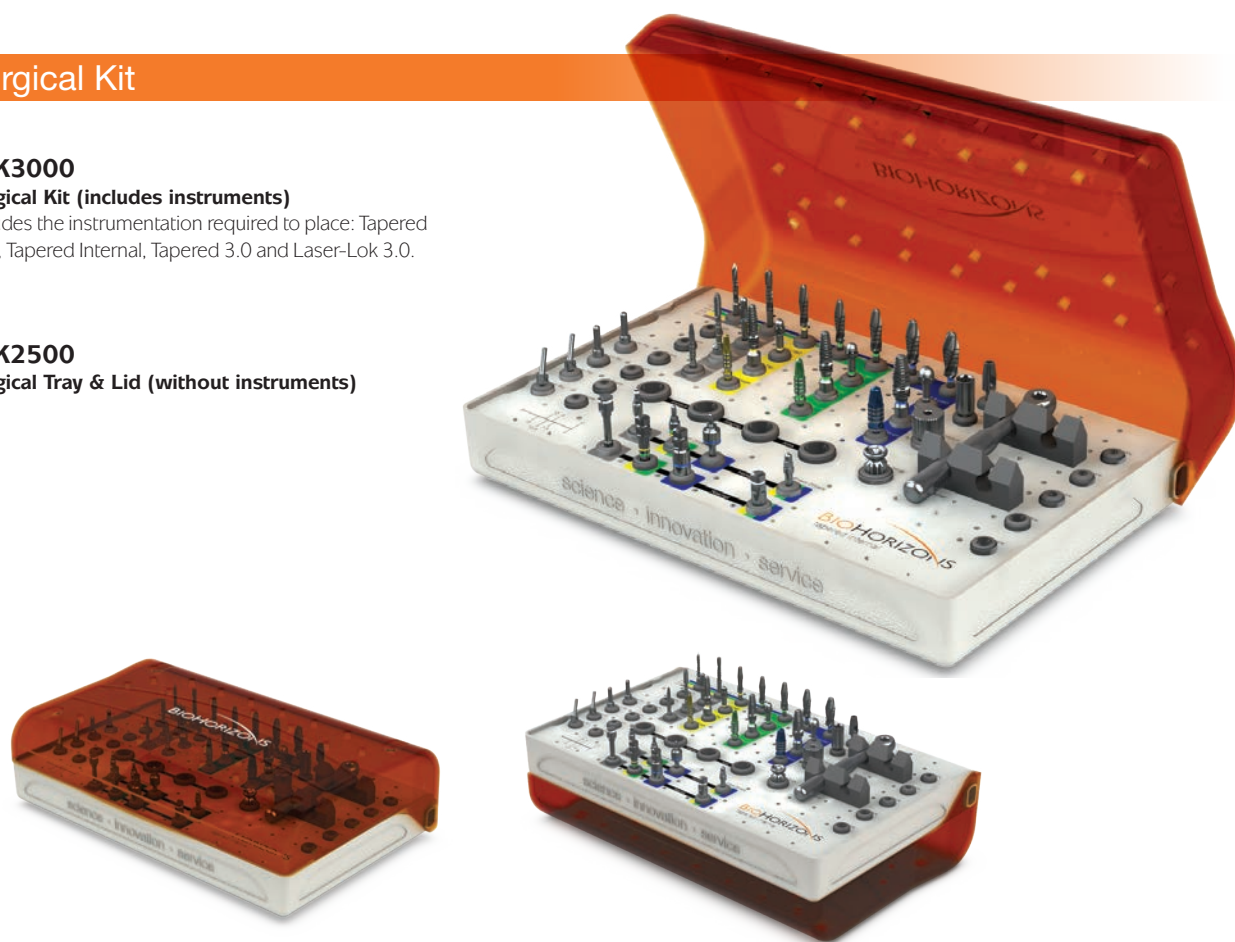
TSK3000

Surgical Kit (includes instruments)

Includes the instrumentation required to place: Tapered Plus, Tapered Internal, Tapered 3.0 and Laser-Lok 3.0.

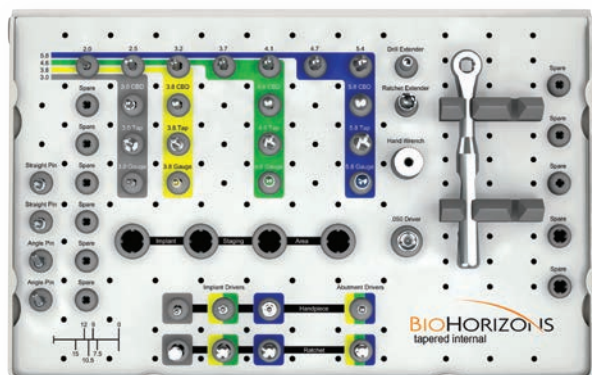
TSK2500

Surgical Tray & Lid (without instruments)



Features:

- use to place Tapered Plus, Tapered Internal, Tapered 3.0 and Laser-Lok 3.0
- 40% smaller and 40% lighter than other kits
- versatile, removable, hinged lid
- easy to disassemble and assemble during cleaning
- implant staging area for implant vials during surgery
- empty spare slots for other instrumentation such as stop drills or extended shank drills



The surgical kit features an intuitive color-coded layout that guides the surgeon through the instrument sequence. The drilling section is color-coded by implant diameter. The implant driver section is color-coded by prosthetic connection.

SURGICAL INSTRUMENTS

Individual Components



TSD2020
2.0mm Starter Drill (matte finish)

TSD2025
2.5mm Depth Drill (matte finish)

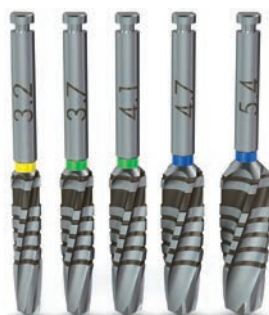


122-100
Drill Extender
(adds 16mm to length of drill)



144-100
Straight Parallel Pin

144-200
20° Angled Parallel Pin



TSD2032 3.2mm Width Increasing Drill (matte finish)

TSD2037 3.7mm Width Increasing Drill (matte finish)

TSD2041 4.1mm Width Increasing Drill (matte finish)

TSD2047 4.7mm Width Increasing Drill (matte finish)

TSD2054 5.4mm Width Increasing Drill (matte finish)



TP3CBD 3.0mm Crestal Bone Drill

TSC2038 3.8mm Crestal Bone Drill

TSC2046 4.6mm Crestal Bone Drill

TSC2058 5.8mm Crestal Bone Drill



122-900 3.0mm Bone Tap

TST2038 3.8mm Bone Tap

TST2046 4.6mm Bone Tap

TST2058 5.8mm Bone Tap



TDG2030 3.0mm Depth Gauge

TDG2038 3.8mm Depth Gauge

TDG2046 4.6mm Depth Gauge

TDG2058 5.8mm Depth Gauge

Important Note about drills

Drills, taps and depth gauges are color coded by implant body diameter:

- 3.0mm body - no color indicator
- 3.8mm body - yellow
- 4.6mm body - green
- 5.8mm body - blue

SURGICAL INSTRUMENTS

Individual Components



300-400
Hand Wrench, 4mm Square



300-206
4mm Square Drive Extender



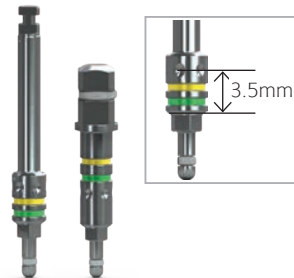
135-351
.050" (1.25mm) Hex Driver



130-000
Ratchet



TP3IDRR 3.0mm Implant-level Driver, Regular, Handpiece
TP3IDHR 3.0mm Implant-level Driver, Regular, 4mm Square



SYGIDH 3.5/4.5mm Implant-level Driver, Handpiece
SYGIDR 3.5/4.5mm Implant-level Driver, 4mm Square

Important Note about drivers

Drivers are color coded by prosthetic connection:

- 3.0mm platform - no color indicator
- 3.5mm platform - yellow
- 4.5mm platform - green

Note: Two abutment-level drivers and two 5.7mm implant level drivers are included in the TSK3000 kit for placing Tapered Internal implants, but are not used for placing Tapered Plus.

ANCILLARY INSTRUMENTS

2.5mm Tapered Depth Drills with stops



TSD202507	2.5mm Tapered Depth Drill, 7.5mm Stop
TSD202509	2.5mm Tapered Depth Drill, 9mm Stop
TSD202510	2.5mm Tapered Depth Drill, 10.5mm Stop
TSD202512	2.5mm Tapered Depth Drill, 12mm Stop
TSD202515	2.5mm Tapered Depth Drill, 15mm Stop

Stops are set to same length as each implant for crestal placement.
Laser-etched line set 1mm shorter for supracrestal placement.

Extended Shank Drills



TSD4020	2.0mm Ext. Shank Starter Drill
TSD4025	2.5mm Ext. Shank Depth Drill
TSD4032	3.2mm Ext. Shank Width Increasing Drill
TSD4037	3.7mm Ext. Shank Width Increasing Drill
TSD4041	4.1mm Ext. Shank Width Increasing Drill
TSD4047	4.7mm Ext. Shank Width Increasing Drill
TSD4054	5.4mm Ext. Shank Width Increasing Drill

Extended Shank Drills are 8mm longer than our standard drills.

Burs



122-110	2.0mm Lindemann Bone Cutter
----------------	------------------------------------

Side-cutting drill used to correct eccentric osteotomy preparations.

122-106	#6 Round Bur
----------------	---------------------

Bone Profiling Burs



TP3BP	3.0mm Bone Profiling Bur & Guide
PYBP	3.5mm Bone Profiling Bur & Guide
PGBP	4.5mm Bone Profiling Bur & Guide

Use at implant uncover to remove excess crestal bone for proper abutment seating.
Screw the guide into the implant and align the profiling bur for precise bone removal.
Match profiler & guide color to prosthetic connection.

ANCILLARY INSTRUMENTS

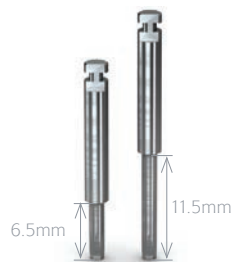
Tissue Punches



- 122-200** 3.0mm Tissue Punch (for a 3.3mm incision)
PYTP 3.5mm Tissue Punch (for a 3.9mm incision)
PGTP 4.5mm Tissue Punch (for a 4.7mm incision)
PBTP 5.7mm Tissue Punch (for a 6.1mm incision)

Use in flapless surgical procedures to remove a minimal amount of the soft tissue from the crest of the ridge prior to osteotomy preparation or during implant uncover.

Handpiece Hex Drivers



- 134-350** .050" (1.25mm) Handpiece Hex Driver
134-450 .050" (1.25mm) Handpiece Hex Driver, Long

For installation and removal of cover screws, healing abutments and abutment screws. The handpiece hex drivers are used with latch-type contra-angle handpieces. The Handpiece Hex Driver, Long (134-450) is 5mm longer than the standard version (134-350).

Adjustable Torque Wrenches



EL-C12374 Elos Adjustable Torque Wrench

Lightweight titanium design is easy to use as an adjustable torque wrench or a ratchet. Quickly disassembles for cleaning. No calibration required.



ATW ITL Precise Adjustable Torque Wrench

Place both implants and abutments with 9 distinct torque settings (15, 20, 25, 30, 35, 40, 45, 50 and 60 Ncm). A simple twist of the handle locks in precision-engineered torque values and guarantees accuracy and repeatability.

Surgical Driver



150-000 Surgical Driver

Use to drive implants into the osteotomy, particularly in the anterior region. Holds the 4mm Square implant-level drivers and the bone taps.

Implant Spacer / Depth Probe



144-300 Implant Spacer / Depth Probe

Use to provide intraoral measurements. Multi-functional tool for marking implant spacing on the ridge and probing osteotomy depth.

**instrument o-rings & c-rings wear out over time. If an instrument is no longer held securely by its associated driver, order a replacement ring through Customer Care.*

W&H MOTORS AND ACCESSORIES

W&H Motor Kits

Motor Kits include: console, handheld motor with cable, foot pedal, (3) disposable irrigation tubes, handpiece, bur testing gauge, service oil, and oil spray cap.



WH-310L Elcomed SA-310 Professional Kit with LED
Includes WS-75 LED handpiece (WH-10207530)

WH-310 Elcomed SA-310 Professional Kit
Includes WS-75 handpiece (WH-10207510)



WH-915L Implantmed SI-915 Starter Kit with LED
Includes WI-75 LED handpiece (WH-10207560)

WH-915 Implantmed SI-915 Starter Kit
Includes WI-75 handpiece (WH-10207550)

W&H Ancillary Items



WH-04363600 Disposable Irrigation Tubing, 2.2m (box of 6)
(Implantmed and Elcomed SA-310)



WH-04757100 Irrigation Spray Clip for External and Internal Irrigation (set of 3)



WH-10940011 MD-400 Service-Oil F1



WH-02139800 Bur Testing Gauge
Use to verify latch-end instruments (drills, taps, drivers) meet dimensional specifications prior to use.



WH-16934000 IA-400 Prosthodontic Screwdriver

WH-06338400 Irrigation Spike w/ Roller Clamp

WH-04013900 Pump Tube Complete (Implantmed and Elcomed SA-310)

WH-04014000 Spare Pump Tubes (Implantmed and Elcomed SA-310) (set of 3)

WH-00929300 Spray Tubes (box of 10)

WH-04019000 Tube Clamps (Implantmed) (set of 5)

W&H MOTORS AND ACCESSORIES

Contra-Angle Surgical Handpieces



WH-10205601	WS-56 E Surgical Handpiece 1:1 Contra-Angle, Fully Dismantleable
WH-10207510	WS-75 E/KM Surgical Handpiece 20:1 Contra-Angle, Fully Dismantleable
WH-10207530	WS-75 E/KM LED G Surgical Handpiece 20:1 Contra-Angle, Fully Dismantleable
WH-10207550	WI-75 E/KM Surgical Handpiece 20:1 Contra-Angle, Mono Block
WH-10207560	WI-75 E/KM LED G Surgical Handpiece 20:1 Contra-Angle, Mono Block
WH-10209201	WS-92 E/3 Surgical Handpiece 1:2.7 Contra-Angle, Speed-Increasing, Fully Dismantleable
WH-12227901	EB-79 ENDO NiTi Handpiece 2:1 Contra-Angle

Angled Surgical Handpieces



WH-10100900	S-9 Surgical Handpiece 1:1 Angled
WH-10101000	S-10 Surgical Handpiece 1:1 Angled, Slim
WH-10101200	S-12 Surgical Handpiece 1:2 Angled, Speed-Increasing, Slim

Straight Surgical Handpieces



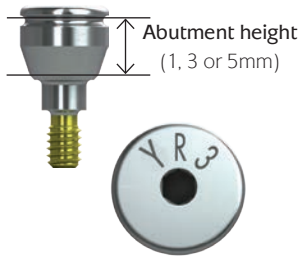
WH-00001100	S-11 Surgical Handpiece 1:1 Straight
WH-00001101	SL-11 Surgical Handpiece 1:1 Straight, Long
WH-00001120	SI-11 LED G Surgical Handpiece 1:1 Straight, Mono Block
WH-00001130	S-11 LED G Surgical Handpiece 1:1 Straight



BioHorizons proudly distributes W&H implant motors, handpieces and accessories. Additional W&H products and re-order items are available. For more information, contact your BioHorizons representative or visit the online catalog (www.biohorizons.com).

STANDARD HEALING ABUTMENTS & COVER CAPS

Healing Abutments



Hand-tighten with the .050" (1.25mm) Hex Driver. Titanium Alloy.

The 3.5 and 4.5mm healing abutments are laser marked for easy intraoral identification of the prosthetic platform, emergence and height; for example:

YR3 = Yellow (3.5mm) platform / Regular Emergence / 3mm High

3.0 healing abutments are not laser marked due to their small size.

prosthetic platform	abutment diameter	1 mm high	3mm high	5mm high
Narrow Emergence				
3.5mm Narrow Healing Abutment	3.8mm	PYNHA1	PYNHA3	PYNHA5
4.5mm Narrow Healing Abutment	4.7mm	PGNHA1	PGNHA3	PGNHA5
Regular Emergence				
3.0mm Regular Healing Abutment	3.5mm		TP3HA3	TP3HA5
3.5mm Regular Healing Abutment	4.5mm		PYRHA3	PYRHA5
4.5mm Regular Healing Abutment	5.5mm		PGRHA3	PGRHA5
Wide Emergence				
3.0mm Wide Healing Abutment	4.2mm		TP3WHA3	TP3WHA5
3.5mm Wide Healing Abutment	5.8mm		PYWHA3	PYWHA5
4.5mm Wide Healing Abutment	6.8mm		PGWHA3	PGWHA5

Cover Caps

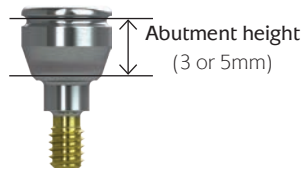


TP3CC	3.0mm Cover Cap
PYCC	3.5mm Cover Cap
PGCC	4.5mm Cover Cap

Use during submerged surgical healing. Hand-tighten with the .050" (1.25mm) Hex Driver. Titanium Alloy. *Included with implant but can also be ordered separately.*

LASER-LOK HEALING ABUTMENTS

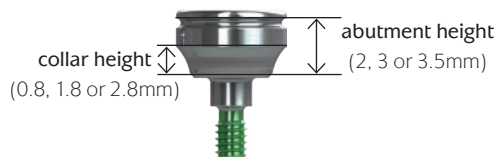
Laser-Lok Healing Abutments



Use Laser-Lok healing abutments when a Laser-Lok abutment restoration is planned to inhibit epithelial downgrowth, establish a soft tissue seal and protect the bone. After removing a Laser-Lok healing abutments to make an impression, use a new Laser-Lok abutment (healing or final) to establish the soft tissue connection again.

prosthetic platform	abutment diameter	3mm high	5mm high
Narrow Emergence			
3.5mm Narrow Healing Abutment, Laser-Lok	3.8mm	PYNHA3L	PYNHA5L
4.5mm Narrow Healing Abutment, Laser-Lok	4.7mm	PGNHA3L	PGNHA5L
Regular Emergence			
3.0mm Regular Healing Abutment, Laser-Lok	3.5mm	TP3HA3L	TP3HA5L
3.5mm Regular Healing Abutment, Laser-Lok	4.5mm	PYRHA3L	PYRHA5L
4.5mm Regular Healing Abutment, Laser-Lok	5.5mm	PGRHA3L	PGRHA5L
Wide Emergence			
3.0mm Wide Healing Abutment, Laser-Lok	4.2mm	TP3WHA3L	TP3WHA5L
3.5mm Wide Healing Abutment, Laser-Lok	5.8mm	PYWHA3L	PYWHA5L
4.5mm Wide Healing Abutment, Laser-Lok	6.8mm	PGWHA3L	PGWHA5L

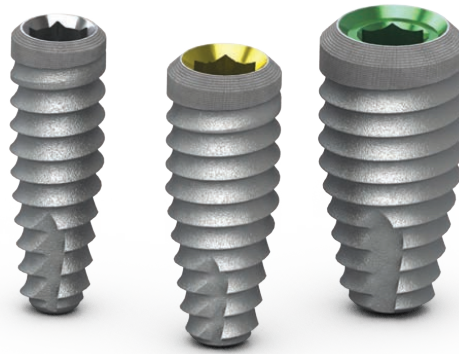
Simple Solutions with Laser-Lok Healing Abutments



Use Laser-Lok Simple Solutions healing abutments when a Simple Solutions abutment restoration is planned to inhibit epithelial downgrowth, establish a soft tissue seal and protect the bone. A Simple Solutions restoration avoids having to remove and replace the abutment to take an impression because the snapcap closed tray impression transfer connects to the final abutment. See L01017 or L02007 for more information.

Simple Solutions emergence	abutment diameter	2mm high (0.8mm collar)	3mm high (1.8mm collar)	3.5mm high (2.8mm collar)
3.5mm Simple Solutions Healing Abutment, Laser-Lok	5.0mm	PYHA08L	PYHA18L	PYHA28L
4.5mm Simple Solutions Healing Abutment, Laser-Lok	6.0mm	PGHA08L	PGHA18L	PGHA28L

INSTRUCTIONS FOR USE



This surgical manual serves as a reference for using the Tapered Internal Plus and Tapered Internal 3.0 implants and surgical instruments. It is intended solely to provide instructions on the use of BioHorizons products. It is not intended to describe the methods or procedures for diagnosis, treatment planning, or placement of implants, nor does it replace clinical training or a clinician's best judgment regarding the needs of each patient. BioHorizons strongly recommends appropriate training as a prerequisite for the placement of implants and associated treatment.

The procedures illustrated and described within this manual reflect idealized patient presentations with adequate bone and soft tissue to accommodate implant placement. No attempt has been made to cover the wide range of actual patient conditions that may adversely affect surgical and prosthetic outcomes. **Clinician judgment as related to any specific case must always supersede any recommendations made in this or any BioHorizons literature.**

Before beginning any implant surgical procedure with BioHorizons implants:



- Read and understand the Instructions for Use that accompany the products.
- Clean and sterilize the surgical tray and instruments per Instructions for Use.
- Become thoroughly familiar with all instruments and their uses.
- Study surgical kit layout and iconography.
- Design a surgical treatment plan to satisfy the prosthetic requirements of the case.



Small diameter implants and angled abutments are intended for the anterior region of the mouth and are not intended for the posterior region of the mouth due to possible failure of the implant.

Note: the instructions in this surgical manual are consistent with those for Tapered Internal unless specifically stated.

Indications

Tapered Internal Plus Implants are intended for use in the mandible or maxilla as an artificial root structure for single tooth replacement or for fixed bridgework and dental retention. The implants may be restored immediately:

- 1) with a temporary prosthesis that is not in functional occlusion or
- 2) when splinted together for multiple tooth replacement or when stabilized with an overdenture supported by multiple implants.

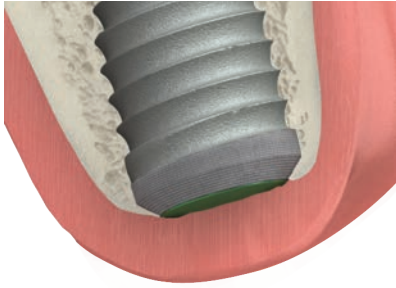
Tapered Internal 3.0 Implants may be used as an artificial root structure for single tooth replacement of mandibular central and lateral incisors and maxillary lateral incisors. The implants may be restored immediately:

- (1) with a temporary prosthesis that is not in functional occlusion,
- (2) when splinted together as an artificial root structure for multiple tooth replacement of mandibular incisors, or
- (3) for denture stabilization using multiple implants in the anterior mandible and maxilla.

The implants may be placed in immediate function when good primary stability has been achieved and with appropriate occlusal loading.

SURGICAL PROTOCOLS

Two-Stage Protocol



Implant with cover cap in a two-stage protocol.

In a two-stage surgery, the implant is placed below the soft tissue and protected from occlusal function and other forces during osseointegration. A low-profile cover cap is placed on the implant to protect it from the ingress of soft tissue.

Following osseointegration, a second procedure exposes the implant and a transmucosal healing abutment is placed to allow for soft tissue healing and development of a sulcus. Prosthetic restoration begins after soft tissue healing.

Single-Stage Protocol



Implant with removable healing abutment in a single-stage protocol.

Single-stage surgery may be accomplished by placing a healing abutment at the time of implant surgery. This eliminates the need for a second procedure. Although the implant is not in occlusal function, some forces can be transmitted to it through the exposed transmucosal element.

Prosthetic restoration begins following osseointegration of the implant and soft tissue healing.

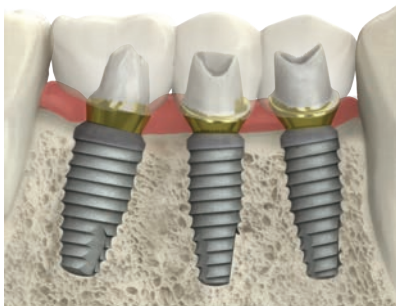
Non-functional Immediate Restoration



Implant restored with a non-functional provisional prosthesis.

Single-stage surgery with non-functional immediate provisionalization provides the patient a non-functioning provisional prosthesis early in the treatment plan. An abutment is placed on the implant at or shortly after surgery, and a provisional restoration is secured using temporary cement. The provisional can help contour the soft tissue profile during healing.

Immediate Function Restoration

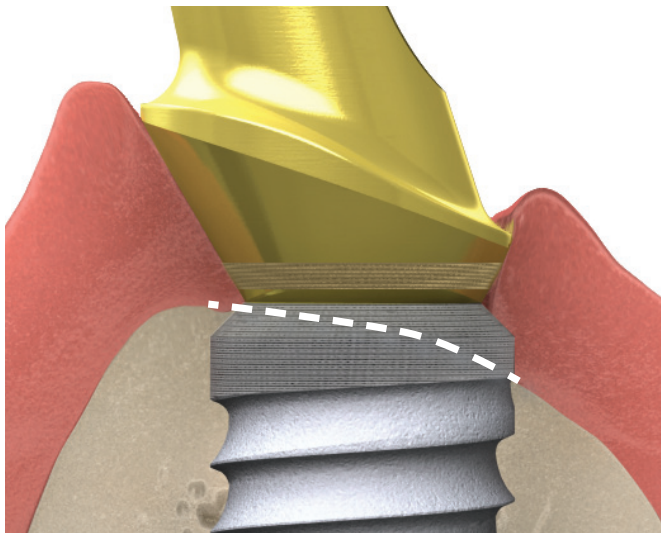


Implants with a splinted prosthesis in immediate function.

Single-stage surgery with immediate function is possible in good quality bone where multiple implants exhibiting excellent initial stability can be splinted together. Splinting implants together may offer a biomechanical advantage over individual, unsplinted prostheses.

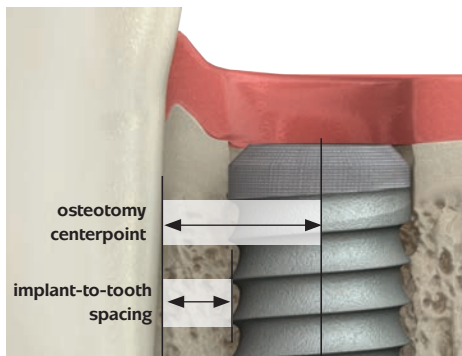
IMPLANT PLACEMENT LEVEL & SPACING

Placement in Uneven Ridges



When placing the implant in an uneven ridge, prepare the osteotomy and place the implant so the bone/soft-tissue junction is within the Laser-Lok transition zone. This will allow both soft tissue and bone to attach to the Laser-Lok collar. If the ridge discrepancy is more than the Laser-Lok transition zone, leveling the ridge can be considered.

Implant-to-Tooth Spacing



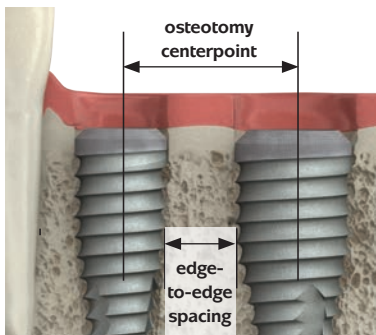
The osteotomy centerpoint required to maintain a specific implant-to-tooth spacing is calculated according to this formula:

$1/2$ (implant body diameter) + the desired spacing.



During implant placement, clinicians must apply their best judgment as to the appropriate spacing for individual patient conditions.

Implant-to-Implant Spacing



The osteotomy center-to-center measurement required to maintain a specific edge-to-edge spacing between two implants is calculated according to this formula:

$1/2$ (sum of 2 implant body diameters) + the desired spacing.

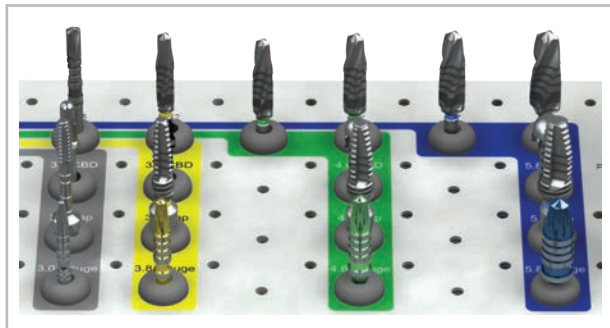


During implant placement, clinicians must apply their best judgment as to the appropriate spacing for individual patient conditions.

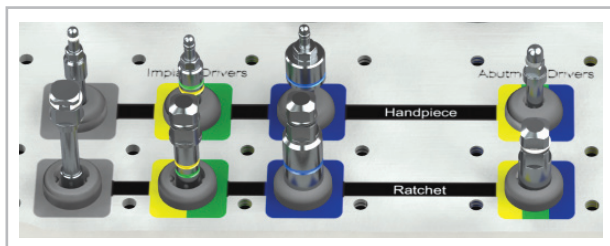
SURGICAL KIT & DRILL SEQUENCE

Surgical Kit Instructions

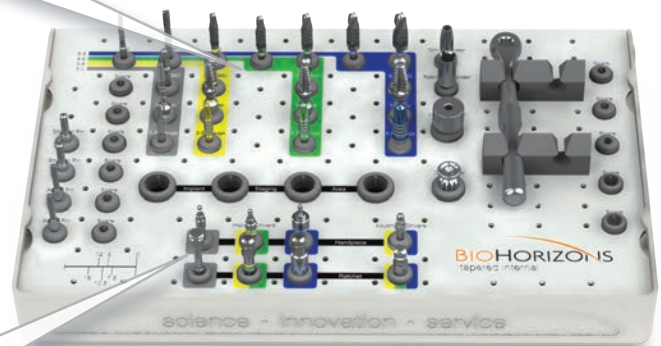
The surgical kit uses an intuitive layout to guide the surgeon through the instrument sequence. The sequence begins in the upper left hand corner and works left-to-right and then down.



The drilling section is color-coded by implant body diameter (gray=3.0mm, yellow=3.8mm, green=4.6mm and blue=5.8mm).

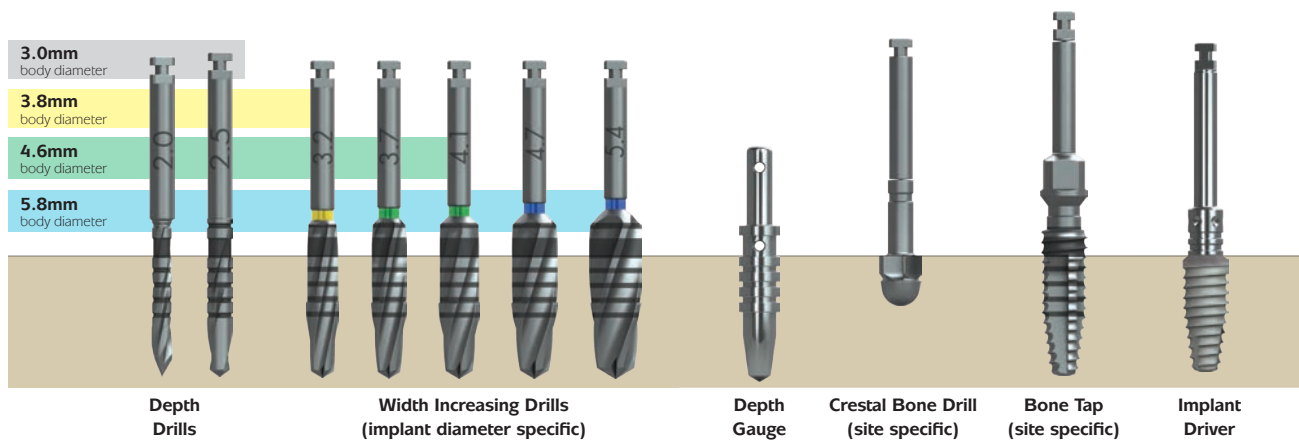


The implant driver section is color-coded by prosthetic platform (gray=3.0mm, yellow=3.5mm, green=4.5mm and blue=5.7mm).



Prior to use, clean and sterilize the surgical tray and instruments according to the Instructions for Use included with the kit. Study the surgical kit layout, color-coding and iconography. Surgical assistants should be thoroughly familiar with all instruments and their uses prior to initiating the surgical procedure.

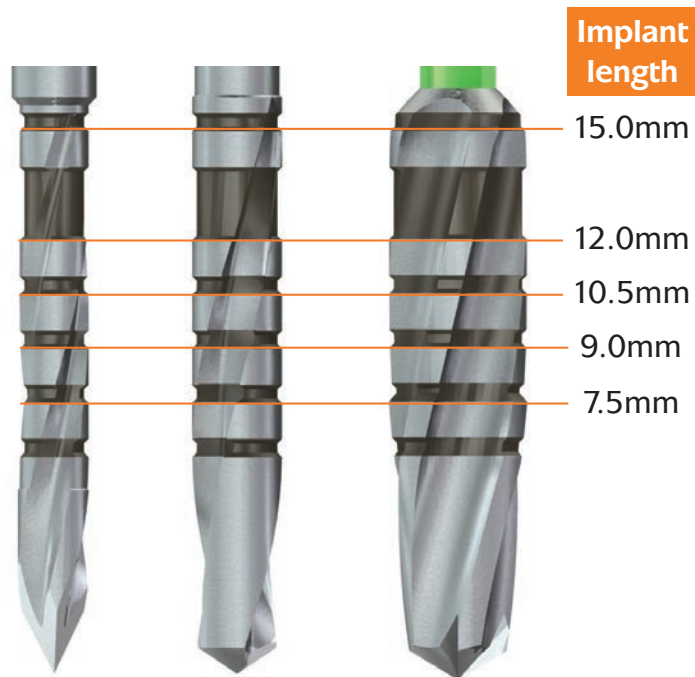
Drill Sequence



DRILL OVERVIEW

Drill Markings

All surgical drills included with this system are externally irrigated and designed to be used at drill speeds of 850-2500 rpm² with steady sterile irrigation. Reduced drill speed may be indicated in softer bone or as drill diameter increases.



Note: The depth marks are consistent throughout the starter drills, depth drills and width increasing drills

Important Considerations

- Peri-operative oral rinses with a 0.12% Chlorhexidine Digluconate solution have been shown to significantly lower the incidence of post-implantation infectious complications.³ A pre-operative 30-second rinse is recommended, followed by twice daily rinses for two weeks following surgery.
- Drilling must be done under a constant stream of sterile irrigation. A pumping motion should be employed to prevent over-heating the bone. Surgical drills and taps should be replaced when they are worn, dull, corroded or in any way compromised. BioHorizons recommends replacing drills after 12 to 20 osteotomies.⁴ A Drill-usage Tracking Chart is available at biohorizons.com to record this important information.
- There is a risk of injury to the mandibular nerve associated with surgical drilling in posterior mandibular regions. To minimize the risk of nerve injury, it is imperative that the clinician understands the drill depth markings as they relate to the implant length to produce the desired vertical placement of the implant.

OSTEOTOMY INITIALIZATION

2.0mm Starter Drill



2.0mm Starter Drill

Purpose: Initiate osteotomy.

- Chisel-tip design eliminates “skating” on osseous crest
- Prepares site for paralleling pins
- Matte finish for increased visibility under operator lights

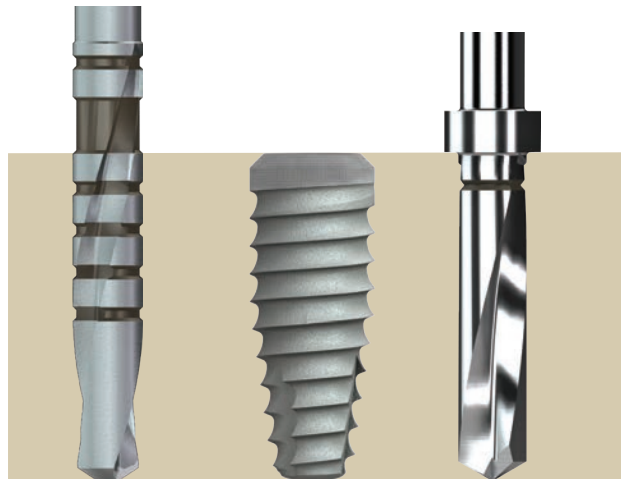
2.5mm Depth Drill



2.5mm Depth Drill

Purpose: Set osteotomy depth.

- Efficient cutting drill design collects bone for autografting
- Matte finish for increased visibility under operator lights
- Final drill for 3.0mm implant



The 2.0mm and 2.5mm depth drills are designed to increase and/or set the depth of the osteotomy.

2.5mm Depth Drills with Stops



Purpose: Set osteotomy depth when access or visibility is poor.

- Fixed circular ring acts as a definitive drill stop
- One drill length for each implant length
- 1 mm laser-etched line guides supracrestal implant placement
- BioHorizons Surgical Kit includes spare slots for depth drills with stops or extended shank drills
- Optional final drill for 3.0mm implant

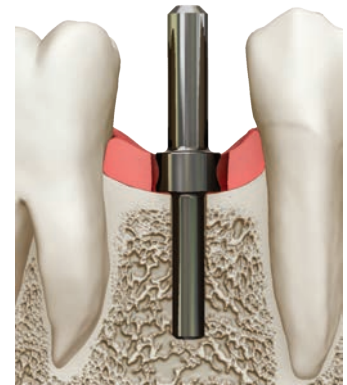
OSTEOTOMY MODIFICATION

Paralleling Pins



Purpose: Evaluate osteotomy position and angle.

- Provided straight or with a 20° angle
- Use after 2.0mm Starter Drill and 2.5mm Depth Drill
- 9mm shank for radiographic evaluation of proximity to adjacent anatomy
- Hub diameter is 4.0mm

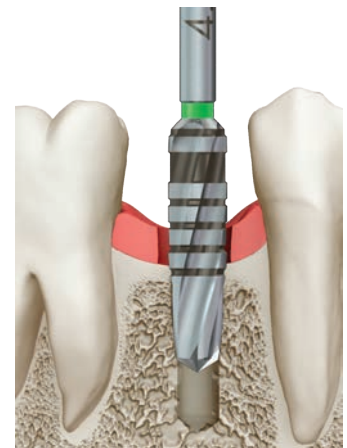


Width Increasing Drills



Purpose: Incrementally widen the osteotomy to reduce heat generation.

- Depth-marked for reference
- Efficient cutting drill design collects bone for autografting
- The drill tip has limited end cutting. However, the osteotomy depth can be increased with these drills as needed
- Matte finish for increased visibility under operator lights
- Color-coded by implant body diameter (gray=3.0mm, yellow=3.8mm, green=4.6mm and blue=5.8mm)

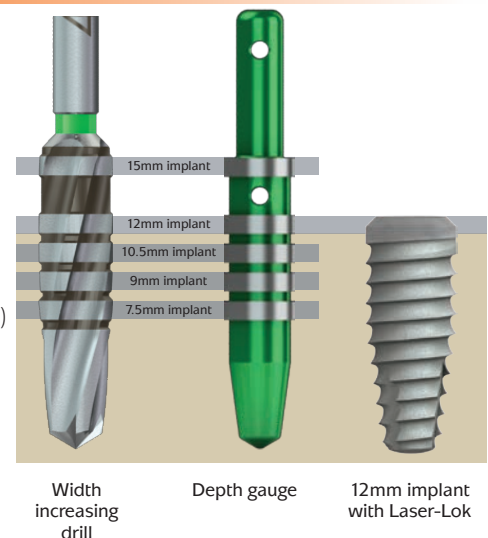


Depth Gauges



Purpose: Verify osteotomy depth.

- Depth marks for reference
- Use following the final width increasing drill for each implant
- Place the depth gauge into the osteotomy site, adjust osteotomy depth as necessary
- Can also be used after 2mm drill by inverting
- Color-coded by implant body diameter (gray=3.0mm, yellow=3.8mm, green=4.6mm and blue=5.8mm)



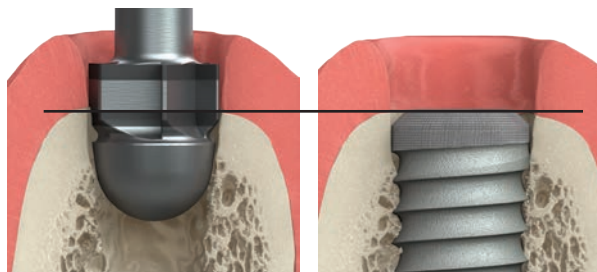
FINAL BONE PREPARATION & DRIVERS

Crestal Bone Drills



Purpose: Remove cortical bone at ridge crest for pressure-free seating of the implant collar.

- Use when dense cortical bone is present at crest
- Rounded non-end cutting hub centers drill in osteotomy
- Use following the final width increasing drill for each implant
- Drill to the first line for Tapered Plus. Drill to the second line for Tapered Internal



Seat drill to the first line.

Implant level with osseous crest.

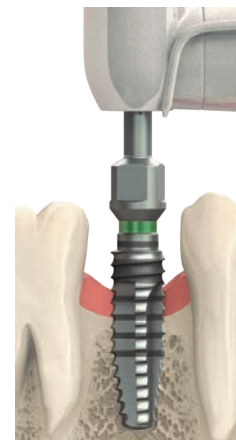
Bone Taps



Purpose: Prepare dense cortical bone for implant threads.

- Site specific
- 30 rpm or less⁵
- Final instrument prior to implant placement
- Can be driven with a handpiece, ratchet or hand wrench

Place into the osteotomy, apply firm apical pressure and rotate slowly in a clockwise direction. When the threads engage, allow the tap to feed without excessive pressure. To remove, rotate the bone tap in a counter-clockwise direction, allowing it to back out of the osteotomy. ***Do not pull on the bone tap to remove it from the site.***



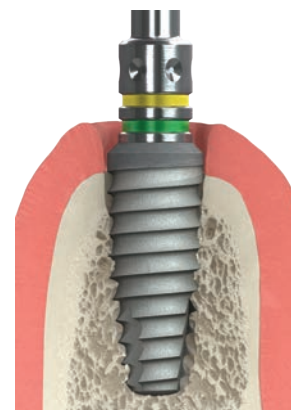
Implant Drivers



Purpose: Engage the implant's internal hex to drive mount-free implants into the osteotomy at 30 rpm or less.⁵

Drivers are color coded by prosthetic connection:

- gray = 3.0mm platform
- yellow/green = 3.5/4.5mm platform

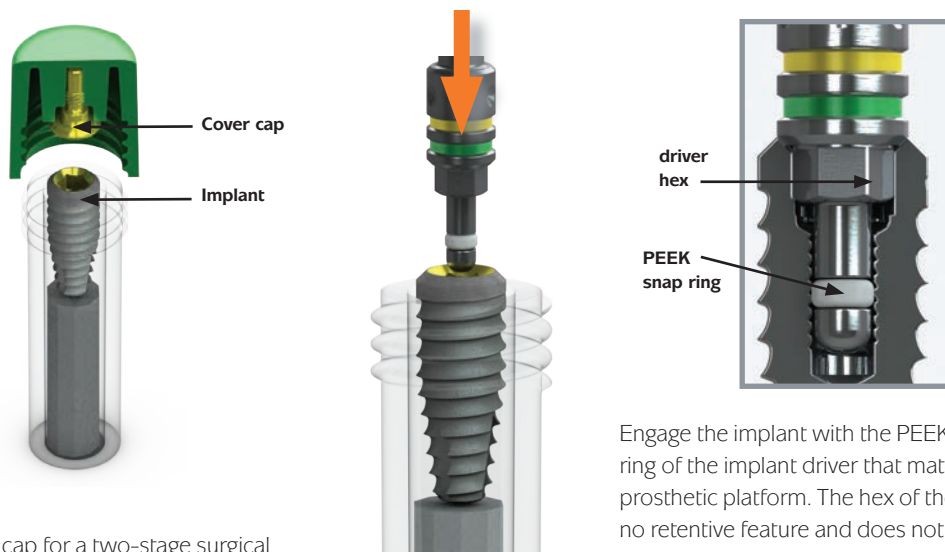


IMPLANT TRANSFER

Mount-free Transfer

Vial caps are color coded by body diameter (3.0=white, 3.8mm=yellow, 4.6mm=green, 5.8mm=blue).

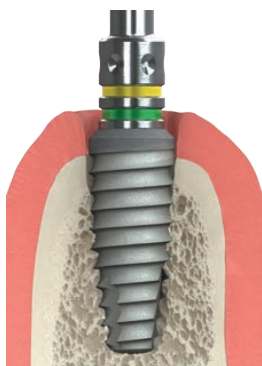
Cover caps and implant drivers are color coded by prosthetic platform (3.0mm=gray, 3.5mm=yellow, 4.5mm=green).



The cover cap for a two-stage surgical protocol is mounted in the vial cap.

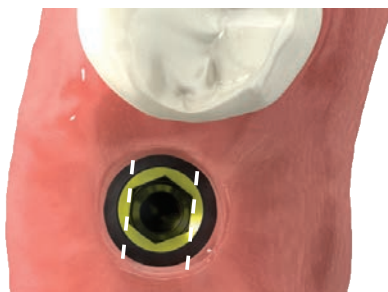
Engage the implant with the PEEK snap ring of the implant driver that matches the prosthetic platform. The hex of the driver has no retentive feature and does not need to be engaged. The driver hex will automatically engage in the osteotomy when the driver is slowly rotated under apical pressure.

Implant Placement

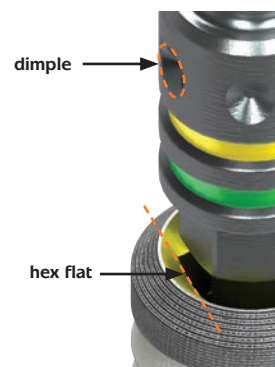


Place the apex of the implant into the osteotomy and begin rotating slowly. The driver hex will engage when the driver is slowly rotated under apical pressure. If too much resistance is felt during insertion, remove the implant and revise the osteotomy with the appropriate crestal bone drill or bone tap as deemed necessary to reduce insertion torque.

Internal Hex Orientation



When seating the implant, use the corresponding dimples on the driver to orient one internal hex flat perpendicular to the implant angulation plane. Doing so verifies that an angled abutment will correct the angulation.



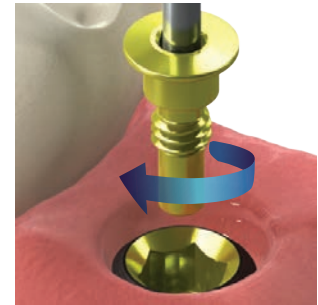
HEALING PROTOCOLS

Cover Caps for two-stage protocol



Purpose: Protects prosthetic platform in two-stage (submerged) surgical protocols.

- Irrigate implant to remove blood and other debris
- Use an antibacterial paste to decrease the risk of bacterial growth
- Thread clockwise into implant body
- Hand-tighten (10-15 Ncm) utilizing .050" (1.25mm) Hex Driver
- Color-coded by prosthetic platform



Healing Abutments for single-stage protocol



Purpose: Transmucosal element for developing soft tissue emergence with narrow, regular, wide emergence or Simple Solutions prosthetic components.

- Hand-tighten (10-15 Ncm) utilizing .050" (1.25mm) Hex Driver
- Color-coded by prosthetic platform
- The 3.5 and 4.5mm healing abutments are laser marked for easy intraoral identification; for example:
YR3 = Yellow (3.5mm) platform / Regular Emergence / 3mm High
- If a Laser-Lok temporary or final restoration is planned, a Laser-Lok healing abutment is required



Immediate Provisional Restorative Options



Temporary Abutments

Purpose: Titanium and PEEK temporaries are easily modified for fabrication of cement or screw-retained provisional restorations. A long direct coping screw (purchased separately) may be used to maintain the screw access hole during the fabrication of a screw-retained provisional prosthesis.



Simple Solutions with Laser-Lok

Purpose: When a Simple Solutions restoration is planned, the tooth-colored healing cap that comes packaged with the abutment may be used as a coping for an immediate provisional restoration. See L01017 or L02007 for more information.

APPENDIX

Post-operative Instructions

A period of unloaded healing time is often recommended to allow for integration between the bone and implant surface. This is dependent on individual patient healing rates and bone quality of the implant site. Each case must be independently evaluated.

The patient should be instructed to follow a post-surgical regimen including cold packs for 24 hours post-implantation. The patient's diet should consist of soft foods and possibly dietary supplements. Pharmacological therapy should be considered as the patient's condition dictates.

If a removable prosthesis is used during the initial healing phase, a soft liner material should be used to prevent pressure on the surgical site. Relieve the prosthesis over the implant site prior to the soft liner application. Periodically check the patient's soft tissue and bone healing using clinical and radiographic evaluations.

Ongoing hygiene for the implant patient is vital. Hygiene recall appointments at three month intervals are suggested. Instruments designed for implant abutment scaling, such as ImplanCare® instruments from Hu-Friedy® should be utilized. The stainless steel handles may be fitted with assorted tip designs for hygiene on natural teeth. The ImplanCare® scalers contain no glass or graphite fillers that can scratch titanium implant abutments.

Bone Profilers



Purpose: In cases where excess crestal bone has been created, use a bone profiler at implant uncover to contour the bone. This will provide the necessary clearance for proper abutment seating.

- 850-2,500 rpm drill speed with steady sterile irrigation²
- Profiler guide protects implant platform
- Color-coded by prosthetic platform
(gray=3.0mm, yellow=3.5mm, green=4.5mm)

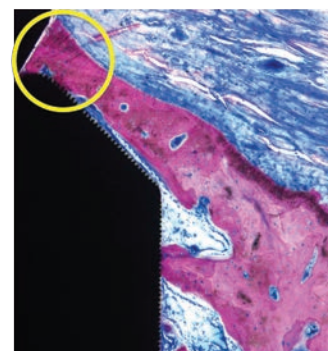
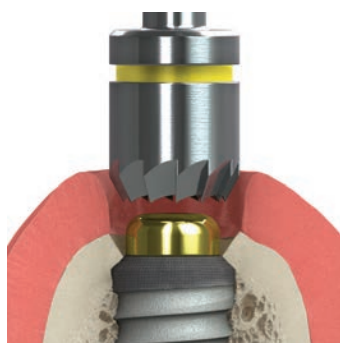


Image showing excess bone growth at 3 months (Myron Nevins, DDS.)



Do not use the profiler without the guide in place.

Using an .050" hex driver, remove the surgical cover cap from the implant and place the profiler guide that matches the color of the prosthetic platform. Use the profiler with copious amounts of sterile irrigation. Once the excess bone and soft tissue are removed, unscrew the guide and seat the appropriate prosthetic component.

ICON LEGEND & REFERENCES

Symbol Descriptions for Product Labeling

[REF] Reference/
article number

[LOT] Lot/batch number

Use before expiration
date (YYYY-MM)

Manufacture date
(YYYY-MM)

[STERILE|R] Sterile by
gamma irradiation

[NON-STERILE] Non-sterile

Rx Only Caution: Federal (USA)
law restricts these
devices to the sale,
distribution and use
by, or on the order of, a
dentist or physician.

Artwork label number

4.6 x 12
Tapered Internal Plus

BIOHORIZONS®
Birmingham, AL 35244 USA

[REF] TLXP4612

Laser-Lok
4.6 x 12mm, 3.5 Platform

[LOT] YYXXXXX

YYYY-MM
expires

YYYY-MM
manufacture date

[STERILE|R]
gamma irradiated

Rx Only
LTLXP4612 Rev A

BioHorizons Tapered Plus
[REF] TLXP4612 **[LOT]** YYXXXXX
4.6 x 12mm, 3.5 Platform

BioHorizons Tapered Plus
[REF] TLXP4612 **[LOT]** YYXXXXX
4.6 x 12mm, 3.5 Platform

Single use only

Refer to Instructions for Use

CE 0473 BioHorizons products
carry the CE mark and
fulfill the requirements
of the Medical Devices
Directive 93/42/EEC

EU Authorised Representative
Quality First International
Suites 317/318 Burford Business Centre
11 Burford Road, Stratford
London E15 2ST United Kingdom
Tel. +44-208-221-2361
Telefax +44-208-221-1912

body diameter	prosthetic platform
3.0mm (gray box label & white vial cap)	3.0mm (gray internal hex & cover cap)
3.8mm (yellow box label & vial cap)	3.0mm (gray internal hex & cover cap)
4.6mm (green box label & vial cap)	3.5mm (yellow internal hex & cover cap)
5.8mm (blue box label & vial cap)	4.5mm (green internal hex & cover cap)

References

1. Please see BioHorizons document #ML0130 for a complete review of BioHorizons implant research and each study's reported success rate.
2. Density of Bone: Effect on Surgical Approach and Healing. CE Misch. *Contemporary Implant Dentistry, Second Edition*. Mosby: St. Louis, 1999. 371-384.
3. The influence of 0.12 percent chlorhexidine digluconate rinses on the incidence of infectious complications and implant success. Lambert PM, Morris HF, Ochi S. *J Oral Maxillofac Surg* 1997;55(12 supplement 5):25-30.
4. Heat production by 3 implant drill systems after repeated drilling and sterilization. Chacon GE, Bower DL, Larsen PE, McGlumphy EA, Beck FM. *J Oral Maxillofac Surg*. 2006 Feb;64(2):265-9.
5. Root Form Surgery in the Edentulous Mandible: Stage I Implant Insertion. CE Misch. *Contemporary Implant Dentistry Second Edition*. Mosby: St. Louis, 1999. 347-369.

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Additional Warranties: BioHorizons warranties instruments, surgical drills, taps, torque wrenches and Virtual Implant Placement (VIP) treatment planning software.

(1) Surgical Drills and Taps: Surgical drills and taps include a warranty period of ninety (90) days from the date of initial invoice. Surgical instruments should be replaced when they become worn, dull, corroded or in any way compromised. Surgical drills should be replaced after 12 to 20 osteotomies.⁴

(2) Instruments: The BioHorizons manufactured instrument warranty extends for a period of one (1) year from the date of initial invoice. Instruments include drivers, sinus lift components, implant site dilators and BioHorizons tools used in the placement or restoration of BioHorizons implants.

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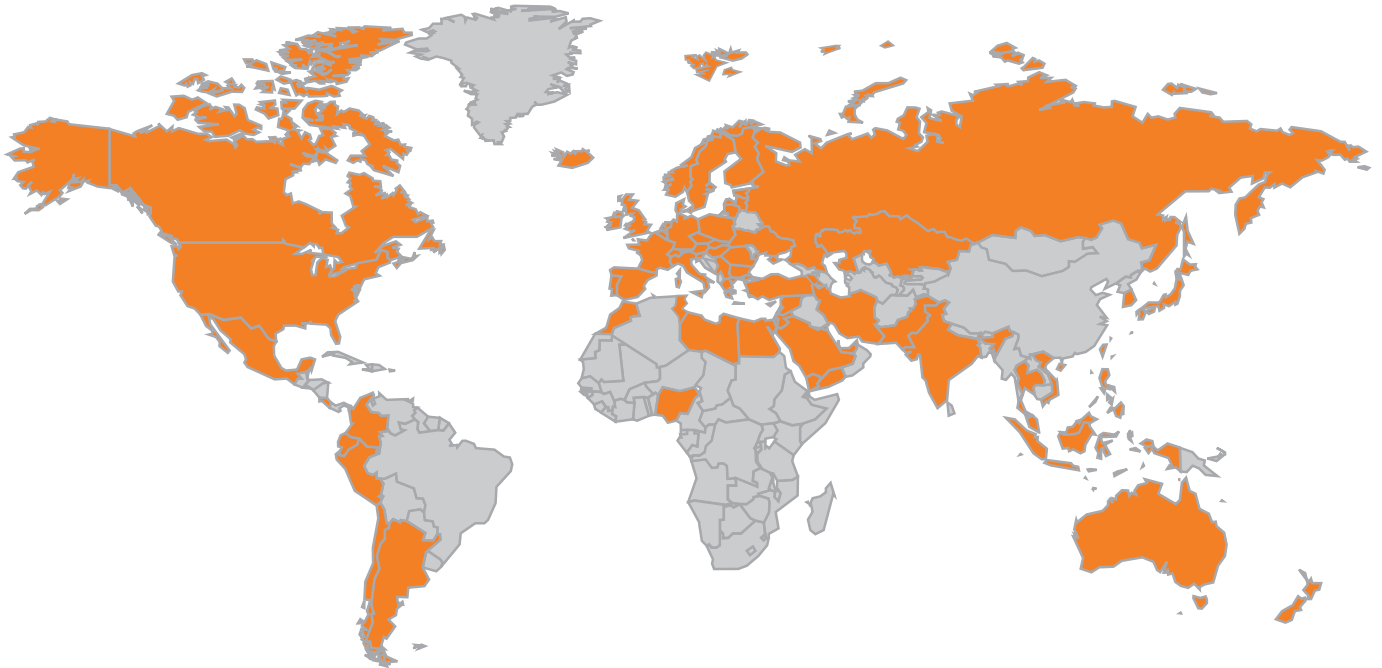
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