Prosthetic Manual PBox for cemented restorations

PREMIUM Shelta





PREMIUM - SHELTA



PBox for cemented restorations PBox for cemented restorations Single components



Prosthetic protocols Prosthetic protocols for cemented restorations



General indications General indications



4

4

5

21 21

PBox for cemented restorations

PBox for cemented restorations is a complete and practical set for the One-Abutment-One-Time technique. It includes one pre-made abutment and all the components for impression taking, casting the model and for the subsequent laboratory phases.

Each PBox for cemented restoration is composed by:

- One pre-made post, either long or short, with a straight or anatomical emergence along with the connection screw;
- One analog of the abutment plus one snap-on PEEK transfer for impression taking;
- One PEEK healing cap;
- Two PMMA sleeves for prosthesis modeling, one engaging and the other non engaging;
- One additional fixation screw for the final tightening in the mouth when traditional protocols with multiple disconnections are followed;

A short version (H 4.00 mm) of all components is also available.

A PBox is suitable for a single crown procedure. In case of multiple or full arch structures, for any single implant one separate PBox must be used, chosing the most suitable diameter, emergence and transgingival height for the specific clinical case.

Pre-made abutments contained in the PBox must be sterilized in an autoclave before clinical use, for futher information on sterilization see on page 21.

The only components that can be ordered separately are pre-made posts H. 8.00 mm and fixation screws, all the other components can only be purchased by ordering another PBox.



Single components

Pre-made posts

Pre-made posts are made of Gr. 5 titanium and are subjected to a process of controlled passivation that changes their colour to a characteristic golden pale yellow. This colour is the result of an oxidation process, without any kind of coating, thereby guaranteeing the use of a highly biocompatible surface. They are available with both straight or anatomical emergence profile, three different transgingival heights and also in short version H. 4.00 mm. They are designed for cemented restorations and allow the One-Abutment-One-Time technique. Each abutment is supplied with the fixation screw and one additional fixation screw for the final tightening in the mouth for when traditional protocols with multiple disconnections are followed.



Important warning

Prosthetic components ø 3.30 mm allow prosthetic Platform Switching with ø 3.80 mm Premium and Shelta implants. It is recommended to use these posts exclusively for single crowns in front sectors (excluding premolars), and only as a support for multiple restorations in distal sectors. ø 3.80 mm prosthetic components are compatible with ø 3.80 mm Premium implants, and ø 3.80 mm ø 4.25 mm and ø 5.00 mm Shelta implants. They do not allow prosthetic Platform Switching on ø 3.80 mm implants; they allow prosthetic Platform Switching on ø 4.25 mm and ø 5.00 mm Shelta implants.

Snap-on PEEK transfers

For the impression taking phase a PEEK Snap-on transfer that clicks on the abutment is supplied. This component is inserted on the abutment with a slight pressure of finger. They are also available in short version dedicated to impression taking on H. 4.00 mm posts.



Dedicated analogs

Form and position of pre-made abutment is reproduced in the laboratory model thanks to dedicated analogs in Gr. 5 titanium anodized following the color code, to help recognizing which prosthetic component diameter has been used. They are available both in 8 mm and 4 mm.



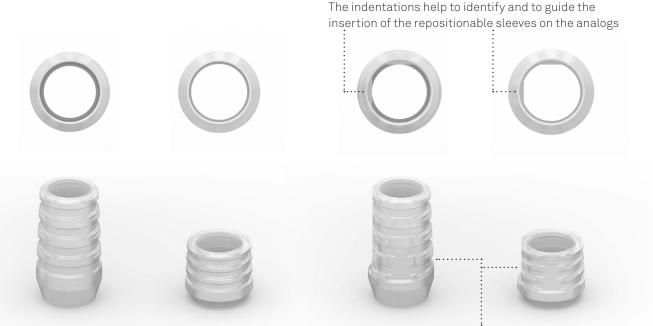
PEEK healing caps

A healing cap in PEEK is also supplied, that clicks on the abutment to cover it while waiting for the prosthesis. This component is inserted on the abutment with a slight pressure of finger.



Sleeves for prosthesis modeling

To model crowns or multiple structures PMMA engaging and non engaging sleeves are supplied. The non engaging can be identified by an external indexing face and internal indentation which is visible by watching the caps from the bottom and by trying each sleeve on the analog to check which one rotates and which one does not. Both sleeves are included inside one PBox.



This indexing face allows the identification of the engaging sleeve for the prosthesis modeling

Surgical screwdrivers

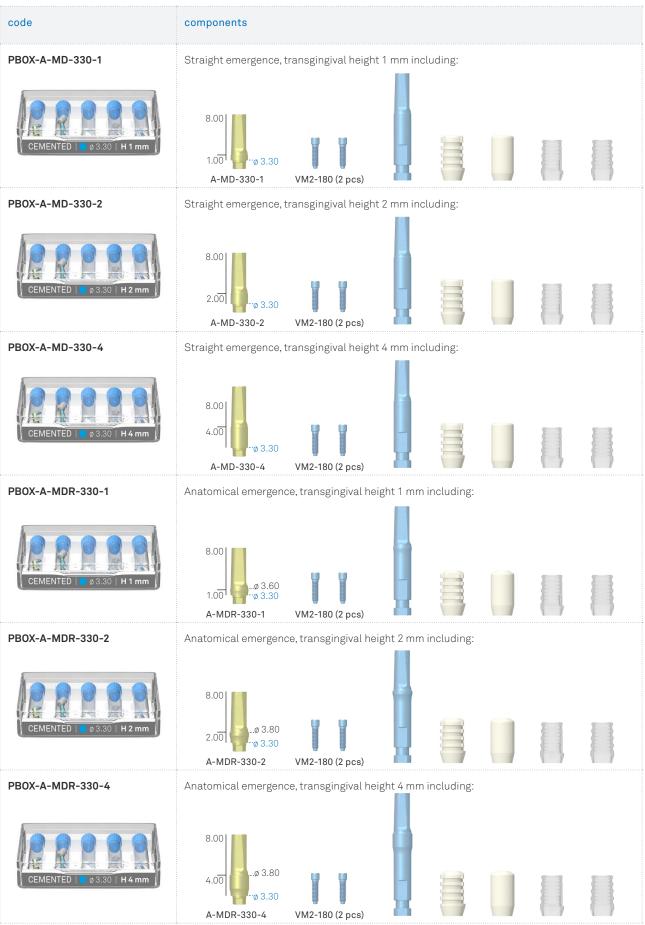
The screwdrivers with upper hexagonal connection have been designed to be used with the dynamometric ratchet with function of control of the torque. A driver with a shank for a contra-angle handpiece is also available. For the length of each driver check page 12.



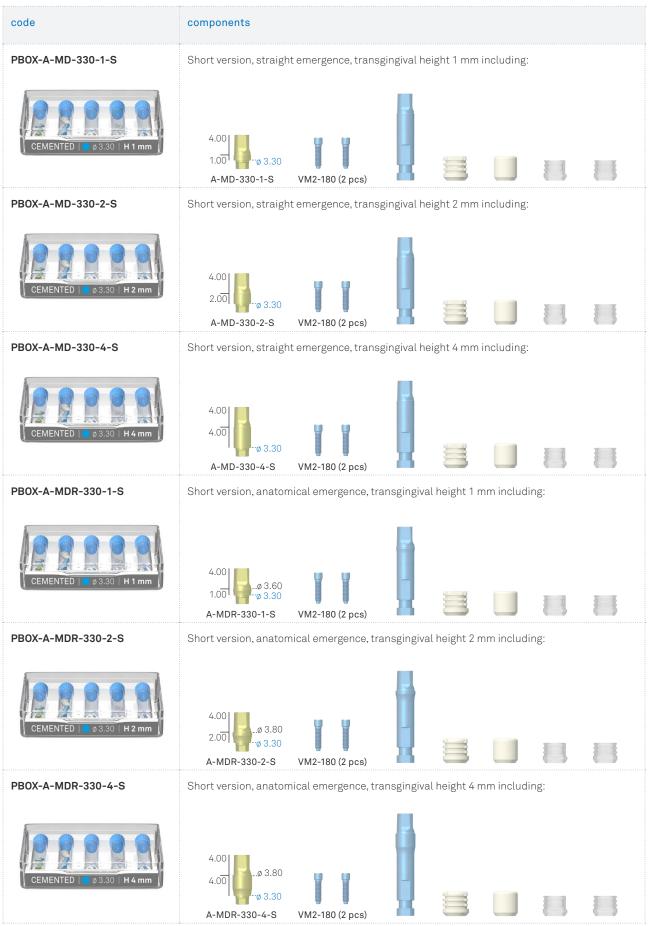
Important warning

These drivers are not supplied inside the Pbox but are included in the surgical kits of Premium and Shelta systems as well as in the Screw Kit prosthetic tooling box. Refer to the catalogues and surgical manuals of the single systems for full details.

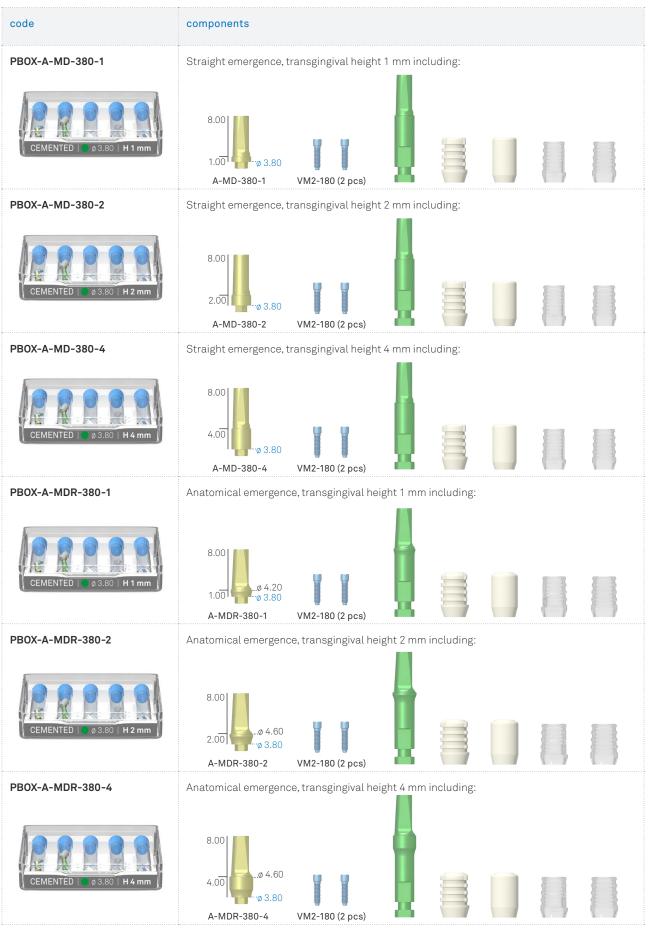
PBox for cemented restorations: post ø 3.30 mm for implant Premium ø 3.30 mm, ø 3.80 mm and Shelta ø 3.80 mm



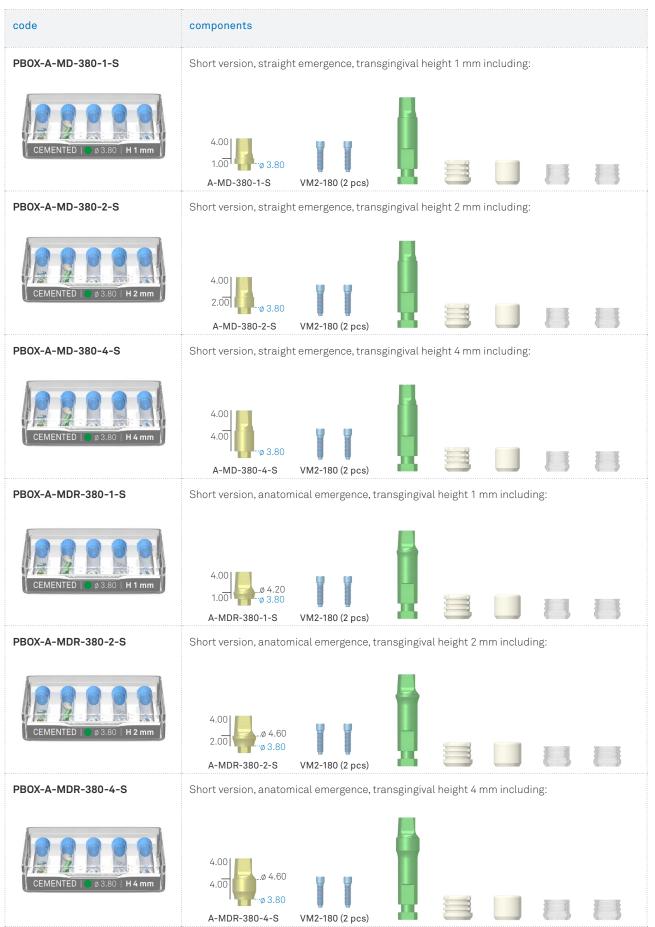
PBox for cemented restorations: post ø 3.30 mm for implant Premium ø 3.30 mm, ø 3.80 mm and Shelta ø 3.80 mm – short version



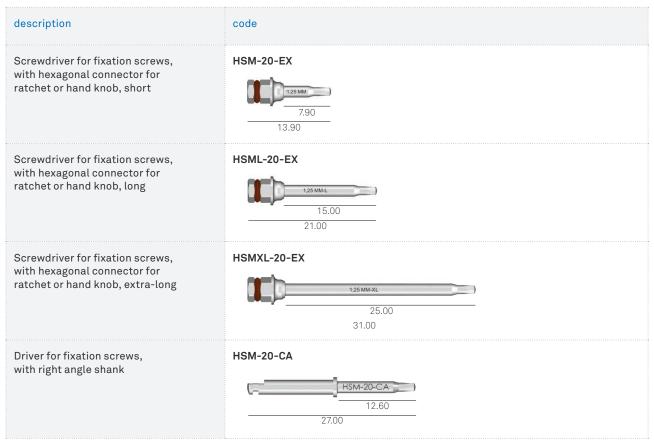
PBox for cemented restorations: post ø 3.80 mm for implant Premium ø 3.80 mm and Shelta ø 3.80 mm, ø 4.25 mm and ø 5.00 mm



PBox for cemented restorations: post ø 3.80 mm for implant Premium ø 3.80 mm and Shelta ø 3.80 mm, ø 4.25 mm and ø 5.00 mm – short version



Prosthesic screwdrivers



It is recommended the use of the prosthetic screwdrivers with the CRI5-KIT ratchet contained in all the surgical and prosthetic instruments set of the implant systems.

Important warning

All drivers for use with a ratchet have a red polymer O-ring inside the connection hexagon, to ensure adequate grip for instruments and therefore the correct position of components. This O-ring must be checked periodically and replaced when worn or no longer able to ensure the correct grip.

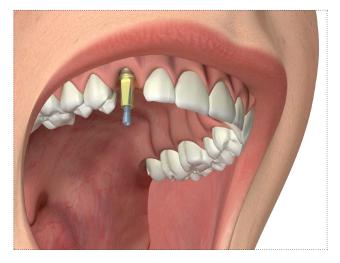
A kit of 5 spare O-rings is available, with order code **ORING180-088**.



Prosthetic protocols for cemented restorations

Prosthetic protocol for single cemented restorations

After the surgical placement, the abutment is tightened to the implant with the supplied screw using a screwdriver from the HSM series and a torque of 20-25 Ncm.



Push the Snap-on PEEK transfer supplied in the box onto the post, applying a slight pressure until it clicks. Choose a tray of suitable dimensions, so that the height of the post is contained inside the walls of the impression tray.



Inject a precision impression material around the cap.



Fill the impression tray with a more consistent impression material over the entire arch. Then position the tray *in situ* and wait for the hardening times as indicated by the instructions.



Remove the tray vertically. The cap will remain incorporated in the impression and the post will remain tightened to the implant.



While waiting for the definitive crown to be delivered, protect the abutment using the PEEK healing cap by applying a slight pressure until it clicks.

Important warning

Do not modify any of the components, if there is not enough vertical space use the short version of the components.



Reposition the analog of the post inside the cap.



Develop the model as usual.



On the analog place one PMMA repositionable sleeve for crown modeling.

Important warning

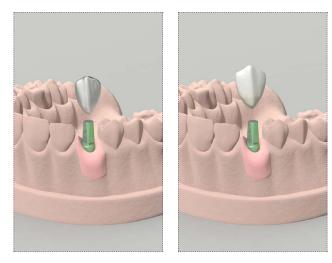
Always try on the analog the two PMMA caps to check which one is the engaging (for single crowns) or the non engaging (for multiple or full-arch structures) one.



Model the crown on the post in wax or castable resin, leaving sufficient space for the cement.



Cast the cap or produce it with digital CAD CAM techniques. Ceramize the final prosthesis as usual.

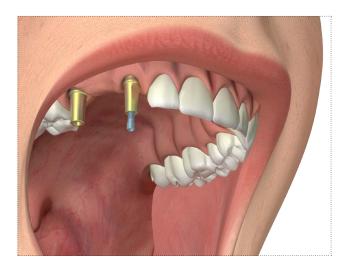


Cement the crown on the post, taking care to remove all the excess cement from the margin.

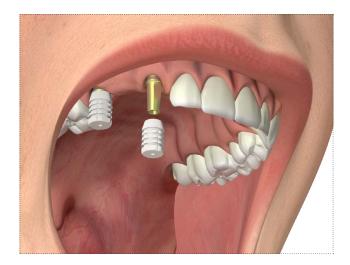


Prosthetic protocol for multiple cemented restorations

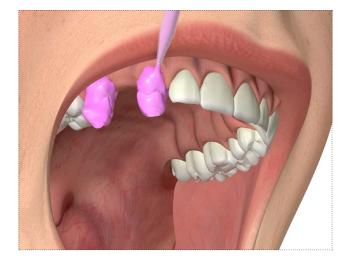
After the surgical placement, the abutments are tightened to the implants with the supplied screws using a screwdriver from the HSM series and a torque of 20-25 Ncm.



Push the Snap-on PEEK transfered supplied in the boxes on the posts, applying a slight pressure until it clicks. Choose a tray of suitable dimensions, so that the height of the post is contained inside the walls of the impression tray.



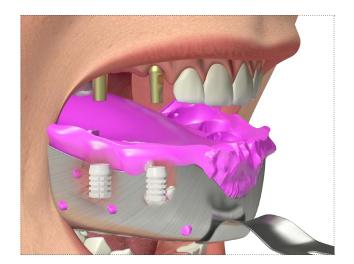
Inject a precision impression material around the caps.



Fill the impression tray with a more consistent impression material over the entire arch. Position the tray *in situ* and wait for the hardening times as indicated by the instructions.



Remove the tray vertically. The caps will remain incorporated in the impression and the posts will remain tightened to the implants.



While waiting for the definitive prosthesis to be delivered, protect the abutments using the PEEK healing caps by applying a slight pressure until it clicks.

Important warning

Do not modify any of the components, if there is not enough vertical space use the short version of the components.



Reposition the analogs of the post inside the caps.



Develop the model as usual.



On each analog insert a PMMA non engaging sleeve for bridge modeling.

Important warning

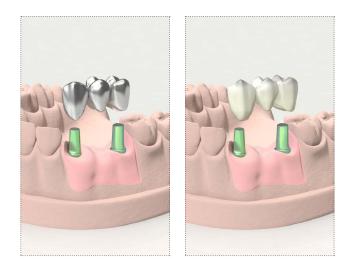
Always try on the analog the two PMMA caps to check which one is the engaging (for single crowns) or the non engaging (for multiple or full-arch structures) one.



Model the bridge on the posts in wax or resin, leaving sufficient space for the cement.



Cast the bridge or produce it with digital CAD CAM techniques. Ceramize the final prosthesis as usual.



Cement the bridge on the posts, taking care to remove all the excess cement from the margin.



Cleaning / sterilization / conservation of prosthetic components and instruments

Caution! All prosthetic components and instruments for dental implants are supplied as NON-STERILE. Before use, all devices must be cleaned, disinfected and sterilized using the following procedures validated by Sweden & Martina SpA. These procedures must be performed before intraoral use of the devices, meaning before every use in testing and trial operations and compulsorily before definitive prosthetic loading. The repetition of the processes described in this sections does not modify the characteristics of these devices.

Failure to follow these instructions may cause cross-infections.

a. Cleaning: Containers and transports to be used for washing: no special requirements. In case of automated cleaning, use an ultrasound bath with a suitable detergent solution (e.g. DURR ID212, DC1 or equivalent). Follow the manufacturer's instructions for detergent concentrations and washing times. Use demineralized water to prevent the formation of stains and marks. When draining washing water, check that all residues have been removed from devices, holes, etc. If necessary, repeat the operation or clean manually.

In case of manual cleaning, use a suitable neutral detergent (e.g. DURR ID212, DC1 or equivalent) and follow the manufacturer's instructions. Brush products with a soft-bristled brush under abundant running water. Using the brush, apply the detergent to all surfaces. Rinse with distilled water for at least four minutes. Ensure that the running water passes abundantly through any holes and other openings.

After rinsing, thoroughly dry the components and pack them in appropriate sterilization bags. Do not exceed 120°C when performing a drying cycle in a washing and disinfection appliance.

b. Sterilization: Each prosthetic components must be serilized in the sterilization bag in a vacuum autoclave, sterilizing as follows:

- Sterilization parameters
- Autoclave (Dynamic-Air-Removal Cycles) at a temperature of 132°C with a exposure time of 4 minutes and a minimum drying of 20 minutes. FDA-cleared sterilization accessories are to be used for the recommended sterilization parameters when wrapping the device in a pouch.

c. Storage: After sterilization, the product must be immediately used.





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We have met the good manufacturing standards (GMP) set forth by many countries worldwide, including the United States FDA.



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