Choice of Aadva® Implants

The choice of appropriate Implant Type, Diameter and Length must always follow the current state of science and clinical treatment protocols as well as the most actual recommendations of the respective Implantological Professional Societies.
Within the range of correct medical indications the following Aadva Implant types can be selected according to their characteristics:

Standard (cylindrical) Implants fit most treatment needs. They are recommended predominantly in harder bone qualities as their shape works less compressive than tapered implants. Shape and adjusted drill sequence lead to excellent primary stability and moderate insertion torques.

Tapered Implants are recommended in softer bone as due to the pronounced conical shape they provide a stronger compressive effect and thus guarantee a good primary stability even in soft bone. They should not be used in very hard bone as in that case the pronounced compression effect might be unwanted and result in increased torque during insertion.

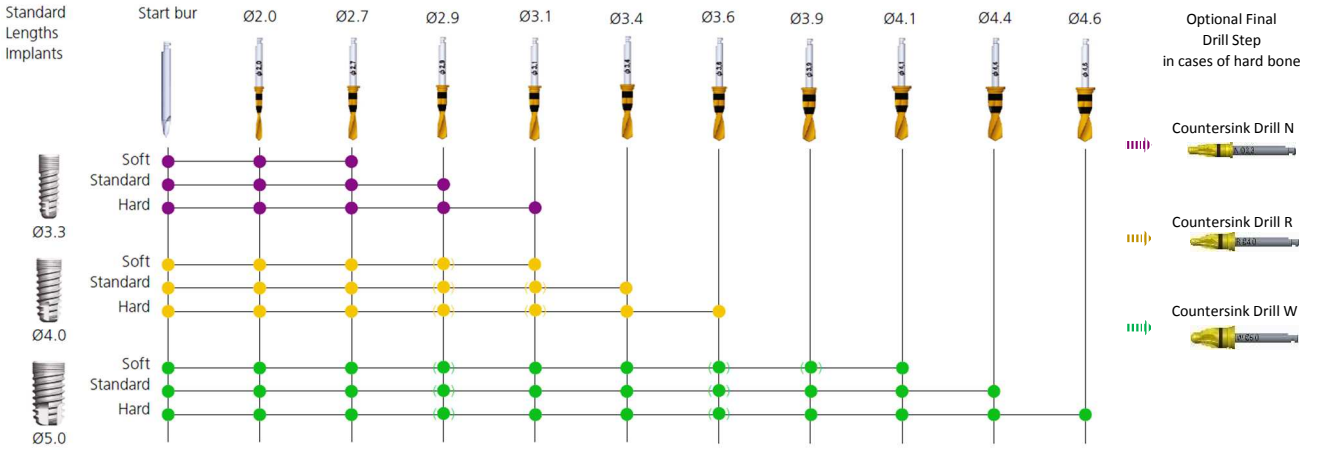
Short Implants are recommended in case of low bone height, where augmentative procedures are not desired and reduced prosthetic load is foreseen.

Equipment: Use a surgical motor meeting the following specifications:

- Speed range: 25 to 1000 rpm
- Torque control of 10 Ncm to 50 Ncm at low speeds

Drill Sequence Standard Implant

Legend: ● = mandatory use; (●) = optional use depending on treatment preferences and bone quality



Alternatively Countersink drills can already be used after 2 mm twist drill; in that case take care that cortical area of drill hole shall not accidentally get widened by following drills touching hole margins!
Important Note: Countersink Drills can be used optionally with Drill Stoppers. In that case use 'Tapered Implant Drill Stoppers 12mm'; they will limit countersink drilling depth to average cortical bone thickness.

Procedures for drilling into soft bone

■ Form a hole with a smaller diameter drill, if the bone is soft.

Procedures for drilling into hard bone

■ Use Countersink Drills, as indicated above, if cortical bone structure is hard.
■ Additionally form the hole with a larger diameter drill, if overall bone structure is hard.
■ If the surgical motor stops at 50 Ncm while placing the implant, operate the motor in reverse to remove the implant and use one size larger twist drill to form the hole and place the implant again.

⚠ Continuing to place implants at a torque exceeding 50 Ncm may not only cause the implant driver to break, but may also cause the implant to become deformed, possibly impacting the fitting of the abutment. Furthermore, it makes significantly increase the risk of bone tissue damage with negative impact on osseointegration.

Drill Sequence Tapered Implant

Diameter	Length	Drill Steps				Optional Final Drill Step
		1	2	3	4	(in cases of hard bone)
Narrow	8 mm	Start Bur	Twist Drill Ø2.0	Tapered Implant Drill Narrow 8 mm		Countersink Drill N
	10 mm, 12 mm, 14 mm			Tapered Implant Drill* Narrow, 10 - 14 mm		
Regular	8 mm			Tapered Implant Drill Regular, 8 mm		Countersink Drill R
	10 mm, 12 mm, 14 mm			Tapered Implant Drill* Regular, 10 - 14 mm		
Wide	8 mm			Twist Drill Ø2.7	Tapered Implant Drill Wide, 8 mm	Countersink Drill W
	10 mm, 12 mm				Tapered Implant Drill* Wide, 10 - 12 mm	

Alternatively Countersink drills can be used after 2 mm twist drill; in that case take care that cortical area of drill hole shall not accidentally get widened by following drills touching hole margins!
Important Note: Countersink Drills can be used optionally with Drill Stoppers. In that case use 'Tapered Implant Drill Stoppers 12mm'; they will limit countersink drilling depth to average cortical bone thicknes.

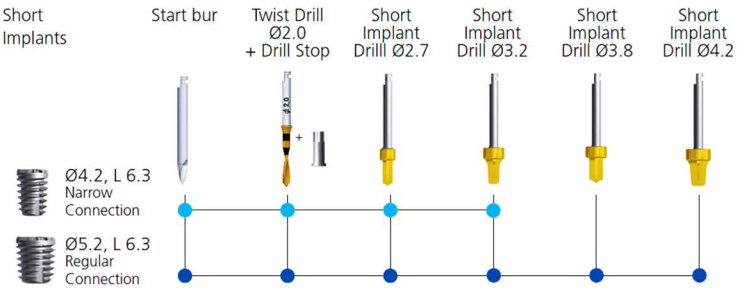
***Warning:** When drilling to the depth of 10 mm and 12 mm, Tapered Implant Drills must always be used with Tapered Implant Drill Stoppers 10mm or 12mm.

Procedures for drilling into hard bone when placing a Tapered Implant

■ In cases of hard cortical bone structure use Countersink Drills N, R or W, according to Implant Diameter, as described above. However, if overall bone structure is dense and hard, Tapered Implant in general is not recommended.

⚠ Continuing to place implants at a torque exceeding 50 Ncm may not only cause the implant driver to break, but may also cause the implant to become deformed, possibly impacting the fitting of the abutment. Furthermore it makes significantly increase the risk of bone tissue damage with negative impact on osseointegration.

Drill Sequence Short Implant



⚠ When planning the prosthetic restoration and loading the implant always take into consideration that a short implant cannot, even if perfectly osseointegrated, withstand the same forces as longer implants. Avoid overloading a short implant by inappropriate superconstruction. Make sure that always lateral support of a restoration on short implants must be appropriate. Never use with terminal single crown in the arch. Always follow the current state of science and clinical treatment guidelines as well as the most actual recommendations of the respective Implantological Professional Societies.