GALAXY

Conical implant connections

Ziacom®

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Important information

Please read carefully before using Ziacom® products

General information

This document contains basic information on the use of original Ziacom® dental implant systems, hereafter referred to as "Ziacom® dental implants" or simply "Ziacom® products". This document has been created as a quick guide for clinicians responsible for treatment, hereafter the "user", and therefore, is neither an alternative nor a substitute for specialised training or professional clinical experience.

Ziacom® products must be used according to a suitable treatment plan and in strict compliance with the manufacturer's surgical and prosthetic protocols. Carefully read the product-specific surgical and prosthetic protocols and the instructions for use and maintenance before using any Ziacom® product. You can find this information on our website, www.ziacom.com, or request it from your nearest authorised Ziacom® distributor.

Liability, safety and warranty

The instructions for the use and handling of Ziacom® products are based on internationally published literature, current clinical standards and our clinical experience so they should be understood as general guidance. The handling and use of Ziacom® products is the sole responsibility of the user as it is outside the control of Ziacom Medical SL. Ziacom Medical SL, its subsidiaries and/or its authorised distributors disclaim all responsibility, whether explicit or implicit, total or partial, for possible damage or injury caused by poor handling of the product or any other situation not considered in their protocols and manuals for the correct use of their products.

The user must ensure that the Ziacom® product is appropriate for the intended procedure and end purpose. Neither these instructions for use nor the work or handling protocols for the products release the user from this obligation. Ziacom® products must be used, handled and applied by clinicians with the appropriate training and qualifications required according to current legislation in each country.

The total or partial use, handling and/or application of Ziacom® products at any stage of their implementation by personnel who are unqualified or lack the necessary training will automatically void any type of warranty and may cause severe damage to the patient's health.

Ziacom® products are part of their own system, with their own design characteristics and work protocols, including dental implants, abutments or prosthetic components and surgical or prosthetic instruments. The use of Ziacom® products in combination with elements or components from other manufacturers could result in treatment failure, damage to tissues or bone structures, inadequate aesthetic outcomes and severe damage to the patient's health. Therefore, only original Ziacom® products should be used.

The clinician in charge of the treatment is solely responsible for ensuring the use of original Ziacom® products and that they are used according to the corresponding instructions for use and handling protocols throughout the implant procedure. The use of any other non-original Ziacom® components, instruments or products, whether alone or in combination with any original Ziacom® products, will immediately void the warranty of the original Ziacom® products.

See the Ziacom Medical SL Warranty Programme (available on the website or by contacting Ziacom Medical SL, its subsidiaries or authorised distributors).

Warning. Not all Ziacom® products are available in all counties. Check availability in your country.

Together for **health**

Table of contents

The Company

Together for **health**

Ziacom® has been working for more than 20 years to improve the **oral health** and well-being of patients around the world by **designing and manufacturing innovative,** high-quality dental implant, prosthetic component, surgical instrument and biomaterial solutions.

The company was founded in 2004 with **100% Spanish capital** and began its activity as a manufacturer of dental implants and attachments for several European companies before later launching its own **brand of implant systems** in 2006.

In 2015. Ziacom® introduced its **diversification strategy** with the development of **new business lines** and new product lines and the launch of a **new portfolio**, which helped the company achieve a **15% share of the Spanish market** in 2016 with the sale of more than 230.000 implants.

In 2022. the company began an **ambitious growth plan** with new goals of **international expansion**, broadening and **diversification** of its portfolio **of products and services** and a change in corporate identity.

Ziacom® quality

Commitment to **quality and innovation** has been part of the values and the essence of Ziacom® since the beginning.

That is why we use state-of-the-art technology in **every stage of our products' production cycle**, from **design and manufacture** to **quality assurance, cleaning and packaging**. All of our products are also manufactured using only **high-quality raw materials** after applying **strict controls to select** our main suppliers.

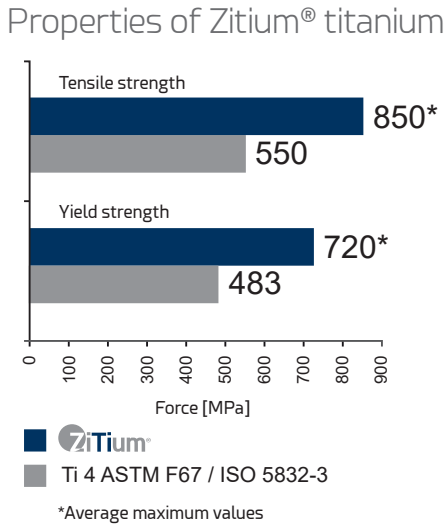
Ziacom Medical S.L. is a **licensed manufacturer of medical devices** and an **AEMPS (Spanish Agency of Medicines and Medical Devices)** 6425-PS marketing authorisation holder. Our **quality management system is certified** in accordance with the requirements of ISO standards 9001:2015 and 13485:2018. and is also GMP 21 CFR 820 compliant.

Thanks to our ceaseless endeavours to offer our clients unsurpassable quality, all our implants have a **lifetime guarantee**.

See the General Conditions for Accessing the Warranty for Ziacom® products.

Zitium® titanium

Ziacom® **Galaxy** implants are made from extra-high-strength grade 4 **Zitium®** titanium, which bestows them with **substantially improved elastic limit and mechanical properties**.



*Average maximum values

With **Zitium®** our implants meet the requirements of standards ASTM F67 and ISO 5832-3. and are certified in accordance with EU Regulation 2017/745. attaining the corresponding CE marking from notified body 0051.

FDA Approved*

*See approved models

Ziacom® dental implants are all sterilised using beta-ray radiation at 25 kGy, apart from the DSQ orthodontic implants, which are supplied **non-sterile**.

IMPORTANT
All the products (except dental implants) listed in this Ziacom® catalogue are supplied non-sterile and must be sterilised before use.

Non sterile

Investment in innovation and training

In order to always offer the very best solutions for the **well-being of every patient**, and thanks to the experience and dedication of our **highly-qualified professionals** and **innovative Technological Centre**, our R&D&I team works incessantly in the field of **research and innovation** to **improve** our products and develop **new solutions** to meet the demands and needs of both patients and dentists.

We also invest in **research** and **ongoing training** as a way of providing **scientific support to the sector** and we firmly believe in training **young professionals** to best ensure **advances in the dentistry field**.

We therefore work closely with **training centres, universities and scientific bodies** to create a practical and specialised teaching environment to promote and strengthen their knowledge, abilities and professional growth.

In order to enhance our investment in the training and **development of dental professionals**, we have **specific areas at our facilities for hands-on training** and **practicals**, **state-of-the-art** training equipment and also a **physical and virtual showroom** where professionals can see all our dental solutions first hand.

Ziacom® across the globe

We are committed to making oral health available to patients all over the world and have a solid **internal growth and expansion plan** to increase the company's **international presence** in those **areas where our products are already well-established** and to **expand into new areas**.

In order to achieve this, we offer our **international associates** a **trusting and collaborative** partnership by adapting to their **local needs** and providing solutions that are specific to each market.

As part of our commitment to meet the specific **quality, regulatory and legal requirements of each country**, for both the registration and distribution of our products, we have **specific certifications** from each of the countries in which we trade.

Regional headquarters

Ziacom Medical SL

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Calle Búhos, 2 - 28320 Pinto
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info@ziacom.com

Subsidiaries

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info.pt@ziacom.com

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Miami - USA
333 S.E. 2nd Avenue, Suite 2000
Miami, FL 33131 - USA
Phone: +1(786) 224 - 0089
info.usa@ziacom.com

Please see the up-to-date list of Ziacom® distributors at **www.ziacom.com** or email us at **export@ziacom.com**


GALAXY

GALAXY

Conical implant connections

GALAXY implant

Characteristics

CONNECTION

- 11° conical connection with double internal hex.
- Single platform for all diameters.
- Platform switch.

CORTICAL ZONE

- Microrings.
- Inverted cone cortical macro-design.

CONICAL BODY

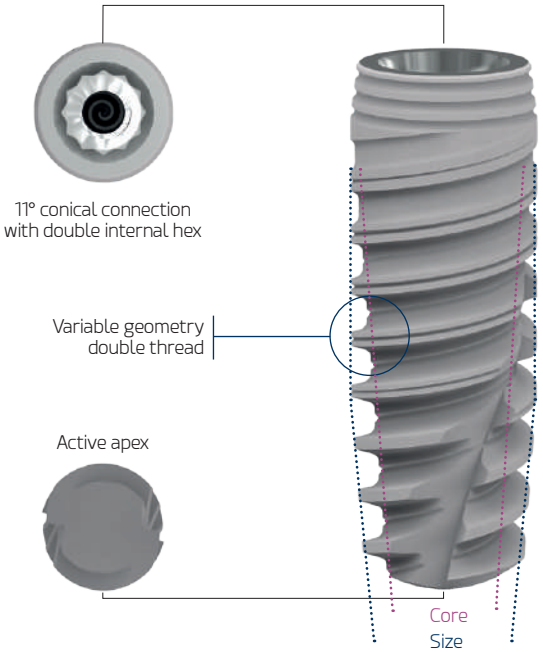
- Double threaded.
- Variable geometry:
  - » Coronal - thick trapezoidal thread.
  - » Middle - thinner trapezoidal thread.
  - » Apex - V-shaped thread.

APEX

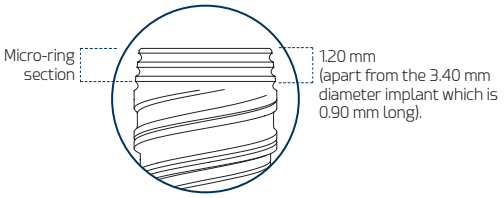
- Oblique apical windows.
- Self-tapping active apex.
- Atraumatic rounded apex.

INDICATIONS

- Bones of very poor quality.
- Immediate loading.
- Post-exodontic immediate placement.
- Aesthetic anterior segment.



Dimensions of the implant collar



Advantages

- Better sealing against leakage, which means less bacterial load.
- Better distribution of forces directed towards the implant and not towards the connection.
- If the recommended torques are exceeded, the screw suffers the fracture, and not the implant.
- Increased crestal bone preservation.
- Lower incidence of peri-implantitis.
- Better survival rate of tapered connection implants.
- The conical connection prevents micro-movement and micro-leakage at the implant–abutment interface.
- The single platform provides a significant simplification of prosthetic procedures.
- The reverse taper neck mitigates cortical stress during surgery.
- The thread design confers a very high primary stability even in poor quality bone.
- The active apex facilitates insertion axis correction in post-extraction alveoli.

Diameters and lengths

		LENGTH (L)							
Ø DIAMETER	Ø PLATFORM	6	7	8.5	10	11.5	13	14.5	16
RP 3.40	2.85								
RP 3.70									
RP 4.00									
RP 4.30									
RP 4.80									

Dimensions in mm.

Surface treatments

Titansure surface

Implants inserted following surface treatment are known to benefit from improved osseointegration by increasing the bone-to-implant contact area. This is partly due to the implant's chemical composition and topographical characteristics.

With its **Titansure surface treatment**, Ziacom® achieves contaminant-free surface topography and optimal average macro- and microporosity values, which are key specifications for achieving prompt and proper osseointegration and, in turn, extremely reliable and predictable implants.

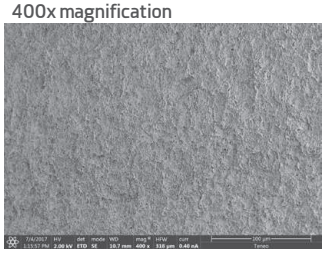
ANALYSIS OF THE TITANSURE SURFACE TREATMENT

Titansure is an SLA surface treatment created through a subtraction process involving sandblasting with white aluminium oxide and double acid-etching with hydrofluoric acid and a sulphuric/phosphoric acid mix.

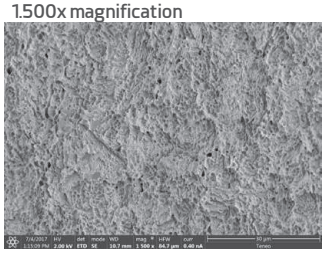
Surface morphology analysis

With the aid of a scanning electron microscope (FEI TENEO, Thermo Fisher Scientific Inc., Waltham, MA, USA), we can see the rough, porous surface creating numerous cavities with thin, sharp edges.

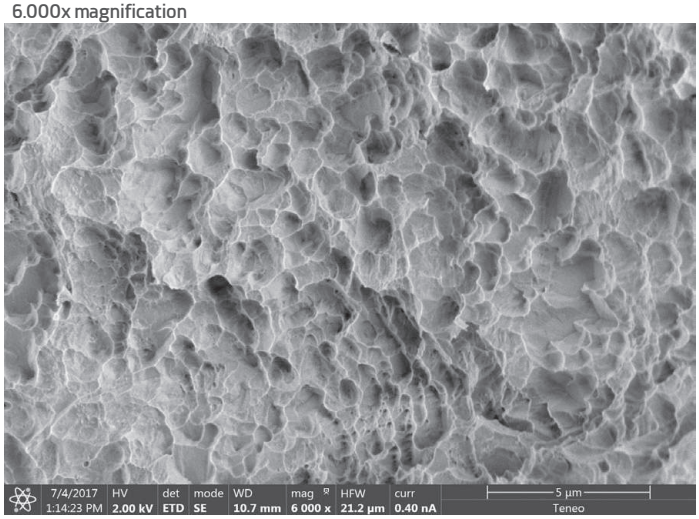
400x magnification



1.500x magnification

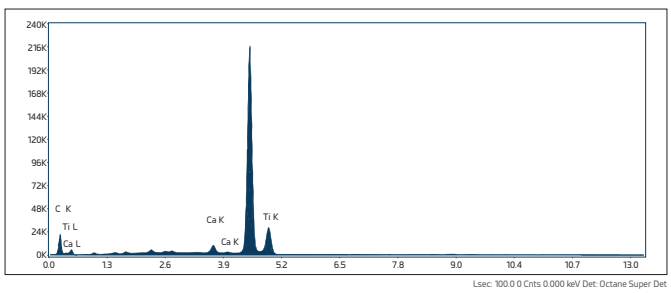


6.000x magnification



Surface elemental analysis

We used an energy-dispersive X-ray spectrometer (Octane Super, Edax-Ametek, Mahwah, NJ, USA) to analyse the chemical composition at the surface.



Compositional analysis of implant surface

ELEMENT	WEIGHT (%)
C K	9.32 (10.23)
Al K	-
Ti K	89.53 (11.77)

No aluminium was detected

Results are expressed as the mean and standard deviation of the mass percentage (WEIGHT (%)).

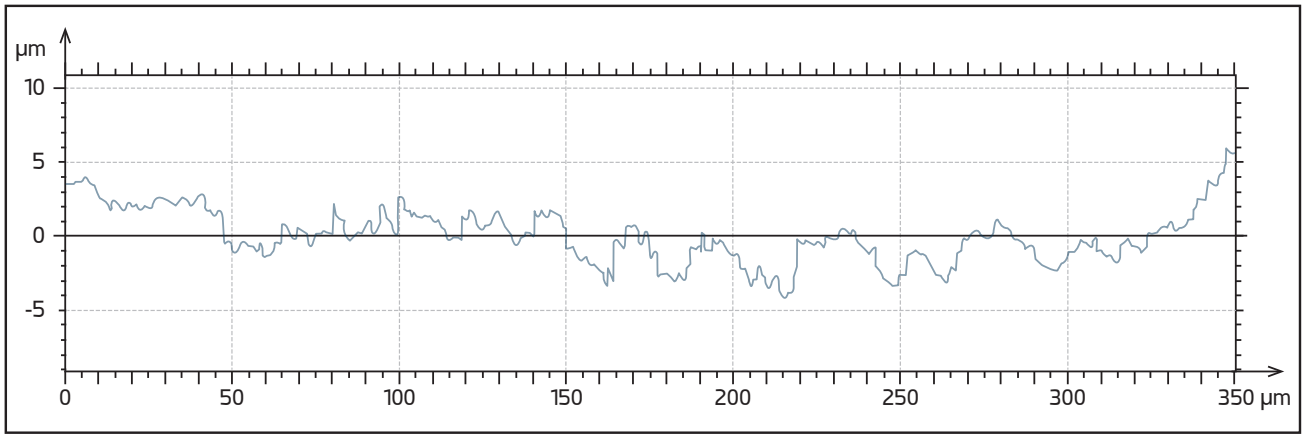
Surface roughness analysis

The roughness study was conducted with a Sensofar S NEOX interferometric-confocal microscope (Sensofar Medical, Terrasa, Spain) and SensoMAP Premium 7.4 software. The quantitative roughness profile parameters applied were: average roughness (Ra), root-mean-square roughness (Rq), maximum profile peak height roughness (Rp) and maximum profile valley depth roughness (Rv).

Ra (µm) (SD)	Rq (µm) (SD)	Rp (µm) (SD)	Rv (µm) (SD)
0.82 (0.10)	0.97 (0.08)	1.84 (0.04)	2.21 (0.01)

The 3D surface roughness (Sa), 3D root mean square height (Sq), maximum 3D peak height (Sp) and maximum 3D pit depth of the selected area (Sv) were also recorded.

Sa (µm) (SD)	Sq (µm) (SD)	Sp (µm) (SD)	Sv (µm) (SD)
0.76 (0.01)	0.97 (0.01)	4.20 (0.12)	4.62 (0.20)



The data were extracted from:

Rizo-Gorrita, M.; Fernandez-Asian, I.; Garcia-de-Frenza, A.; Vazquez-Pachon, C.; Serrera-Figallo, M.; Torres-Lagares, D.; Gutierrez-Perez, J. Influence of Three Dental Implant Surfaces on Cell Viability and Bone Behavior. An In Vitro and a Histometric Study in a Rabbit Model. Appl. Sci. 2020, 10(14), 4790

■ OPTIMAL OSSEOINTEGRATION

The **Titansure** surface has a three-dimensional surface structure with high peaks and broad troughs, which is known to be highly effective at promoting the coagulation cascade and the release of growth factors through platelet activation [Kim, H.; Choi, S.H.; Ryu, J.J.; Koh, S.Y.; Park, J.H.; Lee, I.S. The biocompatibility of SLA-treated titanium implants. Biomed. Mater. 2008. 3. 025011.].

This type of surface may have an osteogenic effect thanks to its different topographical features at a micrometer and nanometer level, which has a very similar morphology to the osteoclastic bone resorption cavities [Le Guehennec, L.; Goyenvalle, E.; Lopez-Heredia, M.A.; Weiss, P.; Amouriq, Y.; Layrolle, P. Histomorphometric analysis of the osseointegration of four different implant surfaces in the femoral epiphyses of rabbits. Clin. Oral Implants Res. 2008. 19. 1103–1110].

For more information on the surface treatment, please see the literature available at **www.ziacom.es/biblioteca**

Surface treatments

Titansure Active surface treatment

Ziacom® presents the **Titansure Active** surface treatment with bone bioactive liquid (BBL) as the latest innovation for the presentation of our dental implants. The **Titansure Active** surface treatment is a combination of Titansure with BBL (Bone Bioactive Liquid) technology, a patent acquired by Ziacom® and developed by the Biointelligent Technology Systems S.L research group led by Professor Maher Al-Atari Abou-Asi.

"BBL (Bone Bioactive Liquid) technology consists of a saline solution containing calcium chloride (CaCl2) and magnesium chloride (MgCl2-6H20) with a net negative charge and creates the ideal conditions for post-implant cell adhesion in the region with bone damage. What is more, surface treatment with BBL provides a significant increase in the density of hydroxyl groups on the surface of implants, thus improving their hydration considerably compared with other surfaces. This hydrophilic implant surface is precisely what enables active ion interaction with blood plasma and bone-forming cells long before the first mature osteogenic cells can attach to the surface. Finally, this yields improved intercellular communication and a greater final bone-to-implant contact area in a significantly shorter time, thereby markedly reducing the postoperative inflammatory process."

Dr. Prof. Maher Al Atari

SURFACE STUDIES OF BBL-TREATED IMPLANTS

In vitro research

Dental pulp pluripotent-like stem cell (DPPSC) and dental pulp mesenchymal stem cell (DPMSC) cultures were prepared on titanium discs sandblasted with aluminium oxide and acid etched in an osteoblast differentiation medium.

The samples were divided into two treatment groups:

- **Group A.** Titanium discs - Traditional, untreated surface.
- **Group B.** Titanium discs - BBL-treated surface.

The surfaces were examined using energy-dispersive X-ray microanalysis (EDXMA) to determine the composition of surface elements.

Comparison of different elements in the two groups		
	Untreated surface	Treated surface **Titansure Active**
Carbon	32.22 ± 5.89	32.89 ± 1.76
Oxygen	14.34 ± 1.23	13.97 ± 1.45
Phosphorus	3.96 ± 2.8	3.89 ± 1.87
Calcium	5.86 ± 3.8	9.53 ± 4.04
Titanium	39.76 ± 1.65	41.34 ± 1.89
Ca/P	1.678	2.347

In vivo research

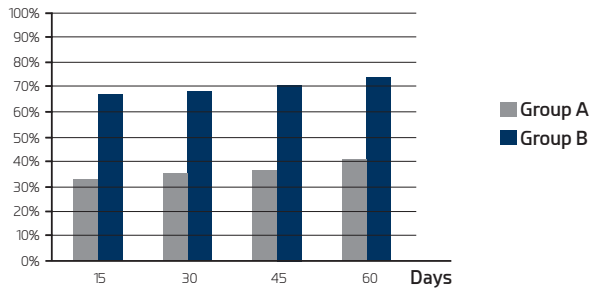
A study was conducted in the tibiae of 10 adult New Zealand rabbits after inserting four implants per rabbit (two in each tibia).

The subjects were assigned to two treatment groups with implants:

- **Group A.** Implants with a traditional, untreated surface.
- **Group B.** Implants with a traditional, BBL-treated surface.

In general, group B had higher BIC (bone-to-implant contact) values than group A.

Histomorphometric analysis - Bone-to-implant contact (BIC)		
Time of measurement	Group A Untreated surface (control) mean + SD	Group B Treated surface **Titansure Active** mean + SD
15 days	33.7 ± 2.3%	68.92 ± 0.3%
30 days	35.8 ± 1.8%	69.35 ± 2.2%
45 days	37.9 ± 1.2%	70.34 ± 1.1%
60 days	41.2 ± 0.8%	73.89 ± 1.9%



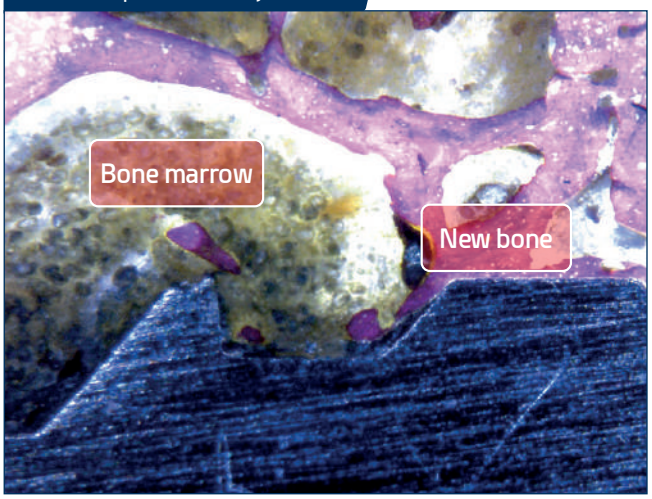
Conclusions

Within the scope of this study, the histomorphometric analysis demonstrated that the group B implants achieved quicker and more effective osseointegration than control group A. Nevertheless, an assessment of bone growth in the medullary portion of the subjects' tibiae revealed the new surface's potential for osteoinduction.

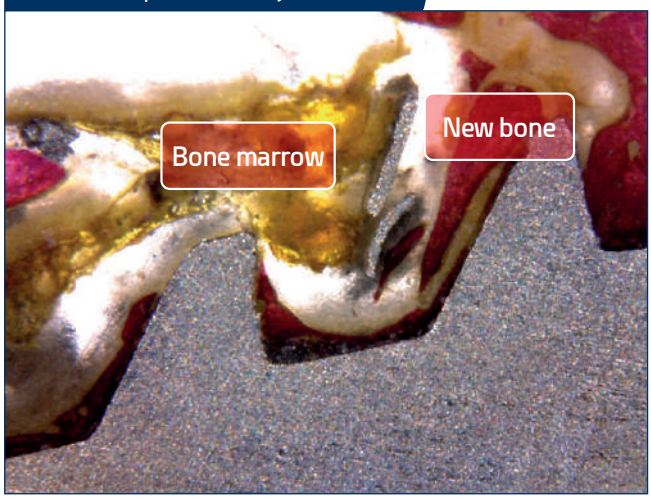
As explained by Dr. Sérgio Alexandre Gehrke, the histologist in charge of the study: "Within the study's limits, data from the histomorphometric analysis of the implants with a treated surface (78.92 + 0.3%) highlighted a much quicker and more effective osseointegration compared to the control group (53.8 + 2.3% of BIC). Assessment of bone growth in the medullary portion of the rabbit tibiae showed the new test surface's potential for osteoinduction."

EVOLUTION OF OSSEOINTEGRATION

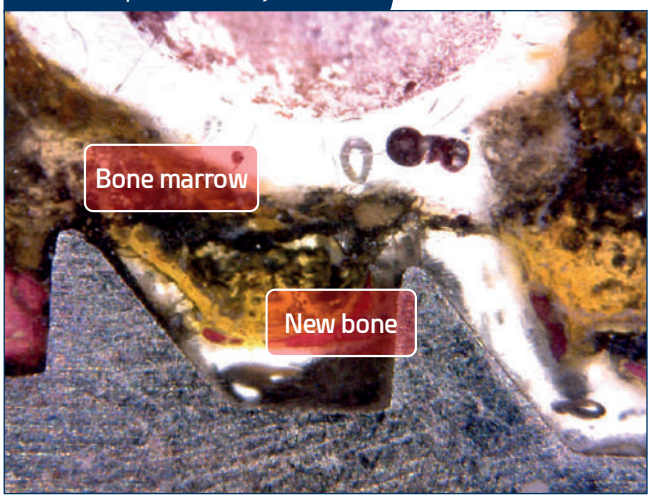
Untreated implant after 15 days



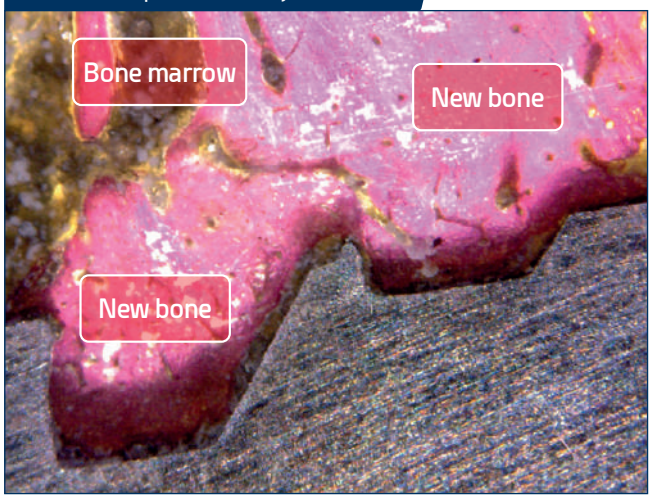
BBL-treated implant after 15 days



Untreated implant after 60 days



BBL-treated implant after 60 days



NOTE
The images are of Ziacom® implants manufactured specifically for use in the study of BBL-treated implants.

Product presentation

Packaging tailored to the type of surface

Ziacom® offers two different types of product packaging depending on the type of implant surface:

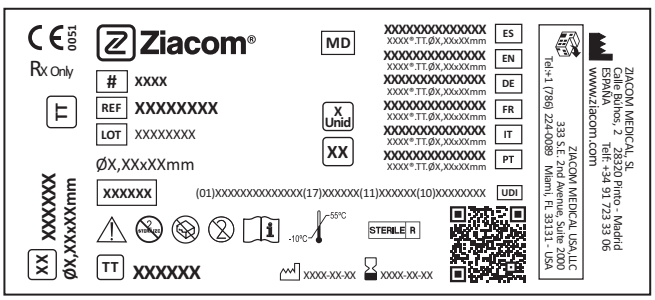
Blister packaging
Available for implants with **Titansure** surface. The blisters are heat-sealed and include identification labels for product traceability. There is a flap for easy opening in the surgery while preventing accidental opening.

Bottle packaging
Available for implants with **Titansure Active** surface. The sealed bottle contains bone bioactive liquid (BBL) to ensure the perfect preservation of the implant's properties. The bottles include identification labels for product traceability.

IMPORTANT
Do not open the sterile container until just before inserting the implant.

Outer identification label

Ziacom® implants are supplied in a sealed cardboard box that includes a product identification label with a description of their main characteristics.



Description of the symbology used

CE XXX	CE marking (MDR) and notified body number.		Do not use if package is damaged.
MD	Medical device symbol.		Single-use product.
#	Model code.		Consult instructions for use.
REF	Product name.		Product use-by date.
LOT	Product batch number.		Date of manufacture.
UDI	Unique device identifier.		Manufacturer.
STERILE R	Sterilised by radiation.	TT	Titansure surface treatment.
	Temperature limit.	TTA	Titansure Active surface treatment.
	Caution, consult attached documentation.	Rx Only	Prescription only.
	Do not resterilise.		Product distributor.

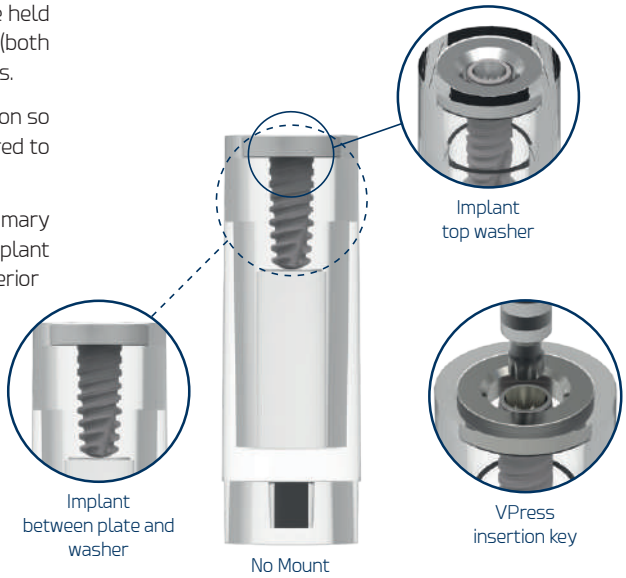
For full details on the product presentation and instructions for use (IFU), go to **www.ziacom.es/ifus** or scan the QR code on the box.

Ziacom® No Mount

GALAXY implants are supplied in Ziacom® No-Mount vials; the implants are held vertically inside a plastic vial between a plate below and a washer above (both made from titanium), thus preventing any movements or unwanted contacts.

This packaging means that the pressure is applied directly to the connection so the implant can be safely and easily withdrawn from the vial and transferred to the surgical site.

Therefore, Ziacom® No-Mount implants eliminate the risk of reducing the primary stability caused by over-instrumentation, avoid the need to handle the implant when removing it from the mount, and simplify implant insertion in posterior areas with limited access.

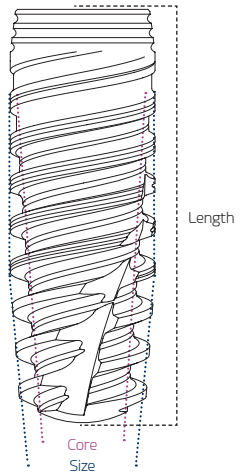


Galaxy references

IMPLANT

GALAXY

Ø Size (mm)	Ø Core (mm)	Length (mm)	Ref. Titansure	Ref. Titansure Active
3.40	2.00/3.15	8.5	GLY3485	GLY3485A
		10.0	GLY3410	GLY3410A
		11.5	GLY3411	GLY3411A
		13.0	GLY3413	GLY3413A
		14.5	GLY3414	GLY3414A
		16.0	GLY3416	GLY3416A
3.70	2.20/3.70	8.5	GLY3785	GLY3785A
		10.0	GLY3710	GLY3710A
		11.5	GLY3711	GLY3711A
		13.0	GLY3713	GLY3713A
		14.5	GLY3714	GLY3714A
		16.0	GLY3716	GLY3716A
4.00	2.40/3.90	6.0	GLY4006	GLY4006A
		7.0	GLY4007	GLY4007A
		8.5	GLY4085	GLY4085A
		10.0	GLY4010	GLY4010A
		11.5	GLY4011	GLY4011A
		13.0	GLY4013	GLY4013A
		14.5	GLY4014	GLY4014A
		16.0	GLY4016	GLY4016A
4.30	2.60/4.05	6.0	GLY4306	GLY4306A
		7.0	GLY4307	GLY4307A
		8.5	GLY4385	GLY4385A
		10.0	GLY4310	GLY4310A
		11.5	GLY4311	GLY4311A
		13.0	GLY4313	GLY4313A
		14.5	GLY4314	GLY4314A
		16.0	GLY4316	GLY4316A
4.80	2.90/4.40	6.0	GLY4806	GLY4806A
		7.0	GLY4807	GLY4807A
		8.5	GLY4885	GLY4885A
		10.0	GLY4810	GLY4810A
		11.5	GLY4811	GLY4811A
		13.0	GLY4813	GLY4813A



Cover screw*

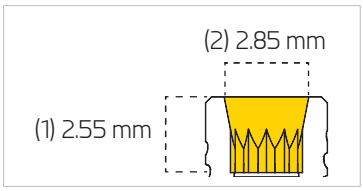
Platf.	Length (L)	Reference
	4.70	GLYRT

Anodised

ROT · 1,25mm · M1,60 · Grade 5 ELI Titanium

* Screw included with each implant.

Platform



Single platform for all implants: (1) Height of inner cone (2) Diameter of the working platform

Metric

M1,60

Unique metric of 1.60

Recommendations for use

All implant treatments must respect the natural biomechanical stability of the oral cavity and allow the natural emergence of the dental crown through the soft tissue. The implantologist must assess the quantity and quality of bone currently in the implant area and consider the need for prior or simultaneous bone regeneration, as appropriate.

Ziacom® has a wide range of implants available to cover every restoration possibility. The inverted trapeziums on the dental chart represent the implant diameters and platforms recommended for each tooth position.

These recommendations are valid for the replacement of teeth with single restorations, bridges, hybrid work or overdentures.

Remember to maintain minimum distances between adjacent implants and between implants and teeth in order to preserve interdental papilla, bone vascularisation and natural emergence profiles.

Selection of the appropriate implant for each case is the sole responsibility of the implantologist. Ziacom® advises all clinicians to take into account the precautions based on scientific evidence, which can be found in the product catalogues and on our website.

CLARIFICATIONS ON DRILLING MEASUREMENTS AND TECHNIQUES

- **IMPLANT SIZE:** identifies the diameter and length of the implant.
- **IMPLANT BODY:** diameter of the implant core.
- **DRILL SIZE:** drill bit diameter.
- **DRILLING TECHNIQUE:** We have developed various drilling protocols as a blueprint for dealing with different situations that arise when performing implant surgery.

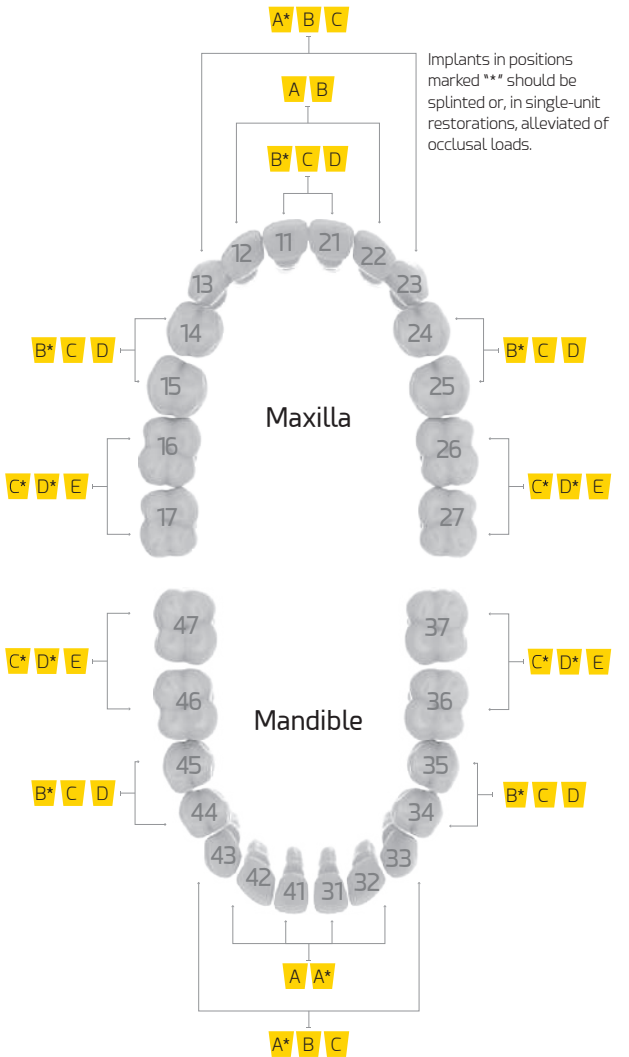
For more information on implant size selection, see the literature available at **www.ziacom.com/biblioteca**

Dental chart

GALAXY

Implant diameter

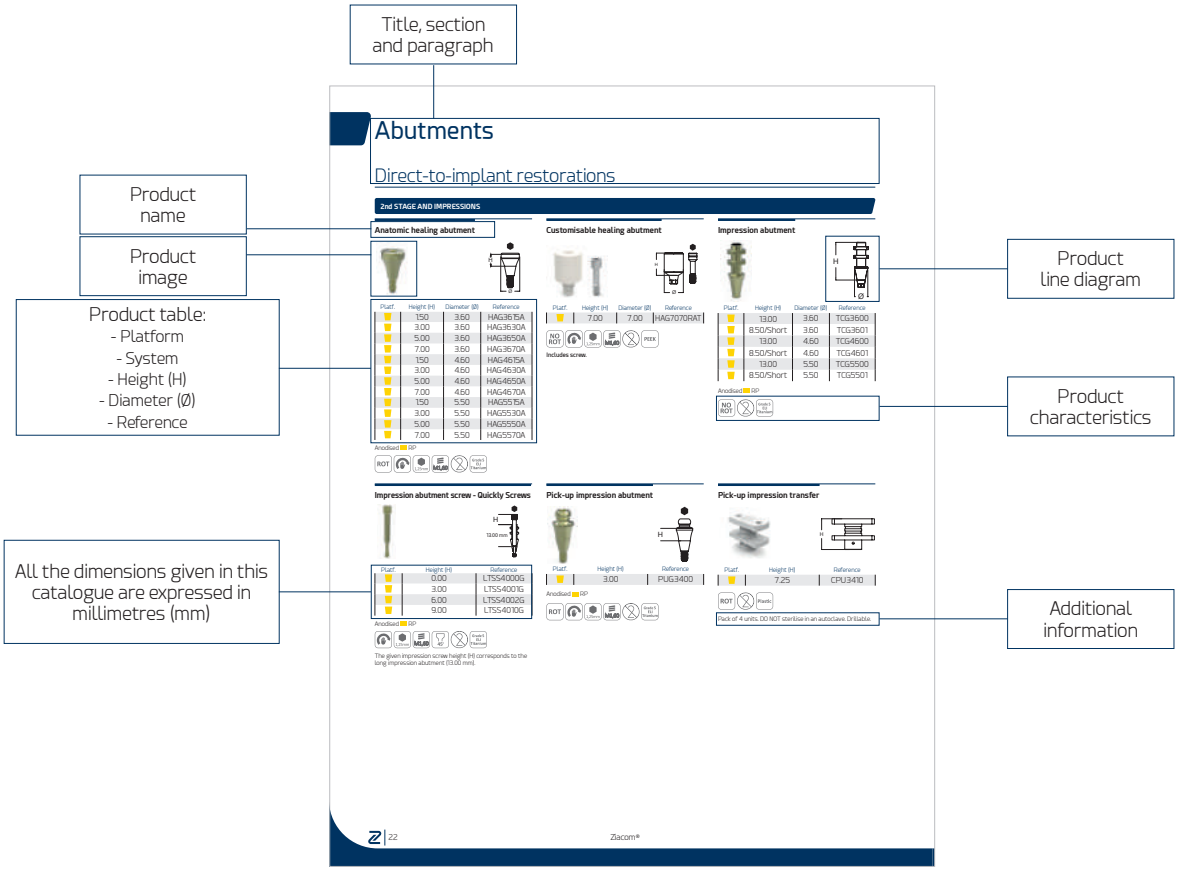
A RP	B RP	C RP	D RP	E RP
Ø3.40 mm	Ø3.70 mm	Ø4.00 mm	Ø4.30 mm	Ø4.80 mm



IMPORTANT
Short, 6.00 mm and 7.00 mm implants are ONLY recommended for use in combination with normal length splinted implants (≥ 10.00 mm).

How to use this catalogue

Product sheet



Symbology

Symbol	Meaning
ROT	Rotatory element
NO ROT	Non-rotatory element
	Use with manual torque (see table on p. 42)
XX Ncm	Maximum operating torque
Ncm 10 20 30 40 50 60 70	Ratchet torque range
Galaxy	Galaxy connection
1,25mm	Screw connection
Kirator	Kirator connection
N Nature	Nature connection
Basic	Basic connection
XDrive	XDrive connection

Symbol	Meaning
	Tx30 connection
MX,XX	Size in millimetres
45°	45° screw support
90°	90° screw support
	Use in rotation with a CA
XX Rpm	Maximum rotation speed
XX USES	Maximum number of uses
	Single-use product
Grade 5 ELI Titanium	Made from grade 5 ELI (extra-low interstitial) titanium
Grade 2 Titanium	Made from grade 2 titanium
Stainless Steel	Made from stainless steel

Symbol	Meaning
Steel	Made from steel
Co-Cr +castable	Made from cobalt-chromium + castable plastic
Cobalt Chromium	Made from cobalt-chromium
PEEK	Made from PEEK
Full castable	Made from castable plastic
Plastic	Made from plastic
XX°	Recommended sterilisation temperature
Non sterile	Unsterilised product
	Use with abundant irrigation
XX°	Maximum angle

Abutments

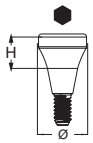
Direct-to-implant reconstructions

Abutments

Direct-to-implant restorations

2nd STAGE AND IMPRESSIONS

Anatomic healing abutment

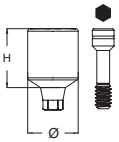


Platf.	Height (H)	Diameter (Ø)	Reference
	1.50	3.60	HAG3615A
	3.00	3.60	HAG3630A
	5.00	3.60	HAG3650A
	7.00	3.60	HAG3670A
	1.50	4.60	HAG4615A
	3.00	4.60	HAG4630A
	5.00	4.60	HAG4650A
	7.00	4.60	HAG4670A
	1.50	5.50	HAG5515A
	3.00	5.50	HAG5530A
	5.00	5.50	HAG5550A
	7.00	5.50	HAG5570A

Anodised RP

ROT · 1,25mm · M1,60 · Grade 5 ELI Titanium

Customisable healing abutment

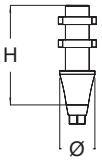


Platf.	Height (H)	Diameter (Ø)	Reference
	7.00	7.00	HAG7070RAT

NO ROT · 1,25mm · M1,60 · PEEK

Includes screw.

Impression abutment

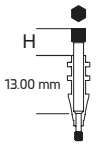


Platf.	Height (H)	Diameter (Ø)	Reference
	13.00	3.60	TCG3600
	8.50/Short	3.60	TCG3601
	13.00	4.60	TCG4600
	8.50/Short	4.60	TCG4601
	13.00	5.50	TCG5500
	8.50/Short	5.50	TCG5501

Anodised RP

NO ROT · Grade 5 ELI Titanium

Impression abutment screw - Quickly Screws



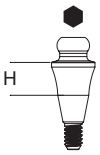
Platf.	Height (H)	Reference
	0.00	LTSS4000G
	3.00	LTSS4001G
	6.00	LTSS4002G
	9.00	LTSS4010G

Anodised RP

1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

The given impression screw height (H) corresponds to the long impression abutment (13.00 mm).

Pick-up impression abutment

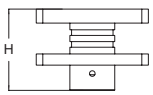


Platf.	Height (H)	Reference
	3.00	PUG3400

Anodised RP

ROT · 1,25mm · M1,60 · Grade 5 ELI Titanium

Pick-up impression transfer

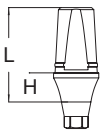


Platf.	Height (H)	Reference
	7.25	CPU3410

ROT · Plastic

Pack of 4 units. DO NOT sterilise in an autoclave. Drillable.

Z2Plus Snap-On impression abutment



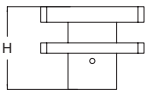
Platf.	Height (H)	Length (L)	Reference
	3.00	9.50	Z2RPG10

Anodised RP

NO ROT · Grade 5 ELI Titanium

IMPORTANT
Use the laboratory screw to tighten this impression abutment.

Z2Plus Snap-On impression transfer

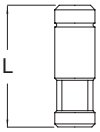


Platf.	Height (H)	Reference
	8.00	ZPU3400

NO ROT · Plastic

Pack of 4 units. DO NOT sterilise in an autoclave. Drillable.

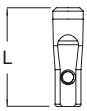
Implant analogue



Platf.	Length (L)	Reference
	12.00	IAG3400

NO ROT · Stainless Steel

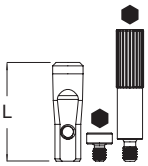
3D implant analogue - Individual



Platf.	Length (L)	Reference
	13.00	IAG3408D

NO ROT · Stainless Steel

3D implant analogue - Pack



Platf.	Length (L)	Reference
	13.00	IAG3408DC*

NO ROT · 1,25mm · M1,80 · M2,00 · Stainless Steel

*Includes base screw Ref. DSIADI and lateral screw Ref. DSIADT for analogue connection.

Screws - 3D Analogue

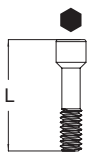
Type	Length (L)	Reference
Base screw (1)*	-	DSIADI
Lateral screw (2)*	15.00	DSIADT

NO ROT · 1,25mm · M1,80 · M2,00 · Stainless Steel

*Pack of 4 units.

FIXING ELEMENTS

Kiran clinical screw

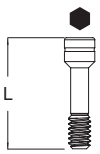


Platf.	Length (L)	Reference
	8.20	DSG4010

30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

Special Kiran screw with surface treatment.

Laboratory screw

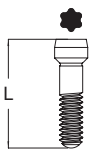


Platf.	Length (L)	Reference
	8.00	LBG4000

1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

NOT suitable for use as the final clinical screw.

Kiran Tx30 clinical screw



For ZiaCam Tx30 abutments and Ti-Base

Platf.	Length (L)	Reference
	7.55	DSG4010TX

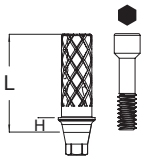
30 Ncm · M1,60 · 45° · Grade 5 ELI Titanium

Special Kiran Tx30 screw with surface treatment.
Use only with Tx30 screwdrivers.

Abutments

PROVISIONAL

Provisional abutment



Rotatory

Platf.	Height (H)	Length (L)	Reference
■	1.50	10.50	RUGT3615
■	3.00	12.00	RUGT3630

Anodised ■ RP

ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

Non-rotatory

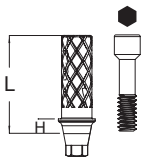
Platf.	Height (H)	Length (L)	Reference
■	1.50	10.50	NUGT3615
■	3.00	12.00	NUGT3630

Anodised ■ RP

NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

Provisional abutment

Aesthetic and immediate loading abutments



Rotatory

Platf.	Height (H)	Length (L)	Reference
■	1.50	10.50	RUGP3615
■	3.00	12.00	RUGP3630

ROT · 30 Ncm · 1,25mm · M1,60 · 45° · PEEK

Non-rotatory

Platf.	Height (H)	Length (L)	Reference
■	1.50	10.50	NUGP3615
■	3.00	12.00	NUGP3630

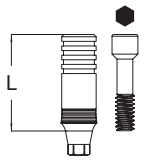
NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · PEEK

All provisional abutments come with an anodised screw.

SCREWED

■ MACHINED BASE UCLA

Machined base abutment
+ Castable abutment



Rotatory

Platf.	Length (L)	Reference
■	10.60	BRUG36

ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Co-Cr +castable

Non-rotatory

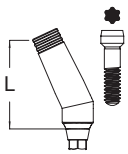
Platf.	Length (L)	Reference
■	10.60	BNUG36

NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Co-Cr +castable

All machined base UCLA abutments come with a special Kiran screw with surface treatment Ref. DSG4010.

■ Tx30 VARIABLE ROTATION ABUTMENT

Tx30 mechanised base abutment
+ 2 castable abutments (15° and 20°)



Rotatory

Platf.	15° Length (L)	20° Length (L)	Reference
■	11.40	11.20	BRUG36TX

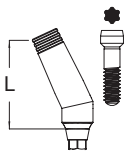
ROT · 30 Ncm · M1,60 · 45° · Co-Cr +castable · 15° · 20°

Non-rotatory

Platf.	15° Length (L)	20° Length (L)	Reference
■	11.40	11.20	BNUG36TX

NO ROT · 30 Ncm · M1,60 · 45° · Co-Cr +castable · 15° · 20°

Tx30 mechanised base abutment
+ 2 castable abutments (20° and 25°)



Rotatory

Platf.	20° Length (L)	25° Length (L)	Reference
■	11.20	11.00	BRUG36TX1

ROT · 30 Ncm · M1,60 · 45° · Co-Cr +castable · 20° · 25°

Non-rotatory

Platf.	20° Length (L)	25° Length (L)	Reference
■	11.20	11.00	BNUG36TX1

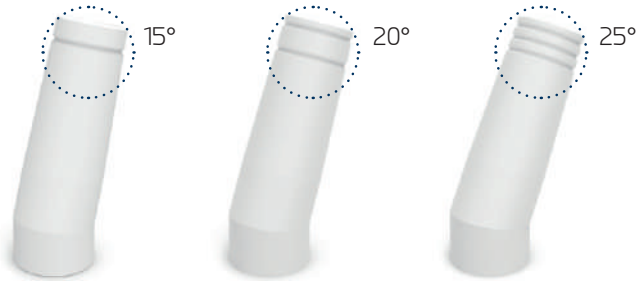
NO ROT · 30 Ncm · M1,60 · 45° · Co-Cr +castable · 20° · 25°

All Tx30 Variable Rotation abutments come with a special Kiran Tx30 screw with surface treatment Ref. DSG4010TX.

TX30 VARIABLE ROTATION ABUTMENT

The Tx30 variable rotation abutment comprises a Cr-Co machined base that accepts 15°, 20° or 25° angled castable abutments and a Kiran clinical screw with a special Tx30 connection.

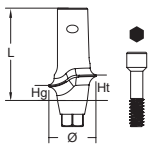
The Cr-Co base ensures a perfect fit and seal with the implant connection and the different angles of the castable abutments can be used to choose the best position for the correct emergence of the restoration screw access channel.



Identifying grooves for the castable angles

CEMENTED

Anatomic straight abutment

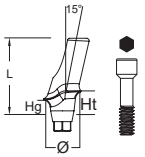


Platf.	Height (Hg/Ht)	Length (L)	Diameter Ø)	Reference
	1.50/2.50	9.00	3.60	STG3615
	3.00/4.00	10.50	3.60	STG3630
	1.50/2.50	9.00	4.60	STG4615
	3.00/4.00	10.50	4.60	STG4630
	1.50/2.00	8.50	5.50	STG5515
	3.00/3.50	10.00	5.50	STG5530

Anodised RP

NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

Anatomic 15° angled abutment

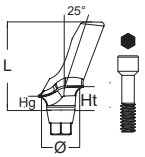


Platf.	Height (Hg/Ht)	Length (L)	Diameter Ø)	Reference
	1.50/2.50	9.00	3.60	A1G3615
	3.00/4.00	10.50	3.60	A2G3615
	1.50/2.50	9.00	4.60	A1G4615
	3.00/4.00	10.50	4.60	A2G4615

Anodised RP

NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

Anatomic 25° angled abutment



Platf.	Height (Hg/Ht)	Length (L)	Diameter Ø)	Reference
	1.50/2.50	9.00	3.60	A1G3625
	3.00/4.00	10.50	3.60	A2G3625
	1.50/2.50	9.00	4.60	A1G4625
	3.00/4.00	10.50	4.60	A2G4625

Anodised RP

NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

All cemented abutments come with a special Kiran screw with surface treatment Ref. DSG4010.

Abutments

Direct-to-implant restorations

OVERDENTURE

Kirator

Kirator abutment with applicator

Kirator abutment

Platf.	Height (H)	Reference
	1.00	LOG4010
	2.00	LOG4020
	3.00	LOG4030
	4.00	LOG4040
	5.00	LOG4050
	6.00	LOG4060

Golden surface treatment.

Insertion key Ref. LOSD01/LOSD02.

ROT · 30 Ncm · Kirator · M1,60 · Grade 5 ELI Titanium

Includes the Kirator abutment with sterilisable polyoxymethylene applicator (Tecaform AH-POM-C).

Related abutments

Kirator impression transfer

System	Height (H)	Reference
Kirator	6.50	TCRK3400

ROT · Plastic

Pack of 4 units. DO NOT sterilise in an autoclave. Drillable.

Kirator analogue

System	Length (L)	Reference
Kirator	13.00	IATORK01

ROT · Stainless Steel

Kirator processing kit

System	Reference
Kirator processing kit	TP8520

Kirator processing kit consisting of: Titanium housing with black relined cap, spacer and purple, transparent and pink plastic caps.

Sterilise the metal coping in an autoclave. Plastic caps and the disc should be cold sterilised. See Instructions for Cleaning and Sterilising on the Ziacom® website.

System	Retention (kg)	Reference
Kirator	Light/1.20 kg	TPK100
	Standard/1.80 kg	TPK200
	Strong/2.70 kg	TPK300

Pack of 4 plastic Kirator retainer caps.

ROT · Grade 5 ELI Titanium · Plastic

NOT autoclavable – use cold steriliser. Maximum divergence of 22° between implants.

Kirator divergence processing kit

System	Reference
Kirator processing kit	TP8520D

Kirator divergence processing kit comprising: Titanium housing with black relined cap, spacer and purple, clear and pink plastic caps.

Sterilise the metal coping in an autoclave. Plastic caps and the disc should be cold sterilised. See Instructions for Cleaning and Sterilising on the Ziacom® website.

System	Retention (kg)	Reference
Kirator	Light/1.20 kg	TPK110
	Standard/1.80 kg	TPK220
	Strong/2.70 kg	TPK330

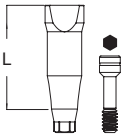
Pack of 4 plastic Kirator retainers caps - Divergent.

ROT · Grade 5 ELI Titanium · Plastic

NOT autoclavable – use cold steriliser. Maximum divergence of 44° between implants.

Example sequence

ZiaCam scanbody to implant



Platf.	Length (L)	Reference
	12.00	FNSYG48T

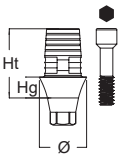
NO ROT · 1,25mm · M1,60 · Grade 5 ELI Titanium

Indicated for clinical and laboratory use.

All ZiaCam scanbody-to-implant abutments include a screw Ref. LBG4000.

See the literature available at **www.ziacom.com/biblioteca** for more information on the use of zirconium restoration interfaces or the use of abutments in the "Prosthetic procedure" manual.

ZiaCam Ti-Base



Rotatory

Platf.	Height (Hg/Ht)	Diameter (Ø)	Reference
	1.00/5.50	3.80	FRUG305
	2.00/6.50	3.80	FRUG315
	3.00/7.50	3.80	FRUG330
	1.00/5.50	4.40	FRUG405
	2.00/6.50	4.40	FRUG415
	3.00/7.50	4.40	FRUG430

ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

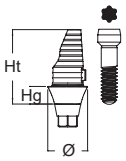
Non-rotatory

Platf.	Height (Hg/Ht)	Diameter (Ø)	Reference
	1.00/5.50	3.80	FNUG305
	2.00/6.50	3.80	FNUG315
	3.00/7.50	3.80	FNUG330
	1.00/5.50	4.40	FNUG405
	2.00/6.50	4.40	FNUG415
	3.00/7.50	4.40	FNUG430

NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

All ZiaCam Ti-Base abutments come with a special Kiran screw with surface treatment Ref. DSG4010.

ZiaCam Tx30 Ti-Base



Rotatory

Platf.	Height (Hg/Ht)	Diameter (Ø)	Reference
	1.00/6.50	3.80	FRUG305TX
	2.00/7.50	3.80	FRUG315TX
	3.00/8.50	3.80	FRUG330TX (1)
	1.00/6.50	4.40	FRUG405TX
	2.00/7.50	4.40	FRUG415TX
	3.00/8.50	4.40	FRUG430TX (1)

ROT · 30 Ncm · M1,60 · 45° · Grade 5 ELI Titanium · 30° · 20° (1)

Non-rotatory

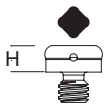
Platf.	Height (Hg/Ht)	Diameter (Ø)	Reference
	1.00/6.50	3.80	FNUG305TX
	2.00/7.50	3.80	FNUG315TX
	3.00/8.50	3.80	FNUG330TX (1)
	1.00/6.50	4.40	FNUG405TX
	2.00/7.50	4.40	FNUG415TX
	3.00/8.50	4.40	FNUG430TX (1)

NO ROT · 30 Ncm · M1,60 · 45° · Grade 5 ELI Titanium · 30° · 20° (1)

All ZiaCam Ti-Base Tx30 abutments come with a special Kiran Tx30 screw with surface treatment Ref. DSG4010TX.

(1) Gingival heights of 3.00 mm have a maximum angle of 20° (all other heights have a maximum of 30°).

Kirator abutment. Toolbar



Platf.	Height (H)	Reference
Universal	1.80	LOTB100

Golden surface treatment.

ROT · Grade 5 ELI Titanium


GALAXY

Abutments

Restorations using transepithelials

Abutments

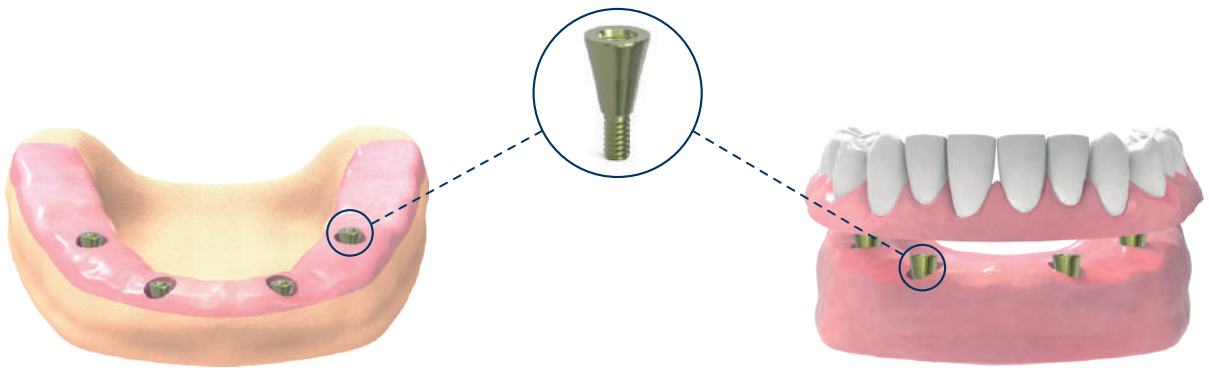
Restorations using transepithelials

Transepithelial abutments

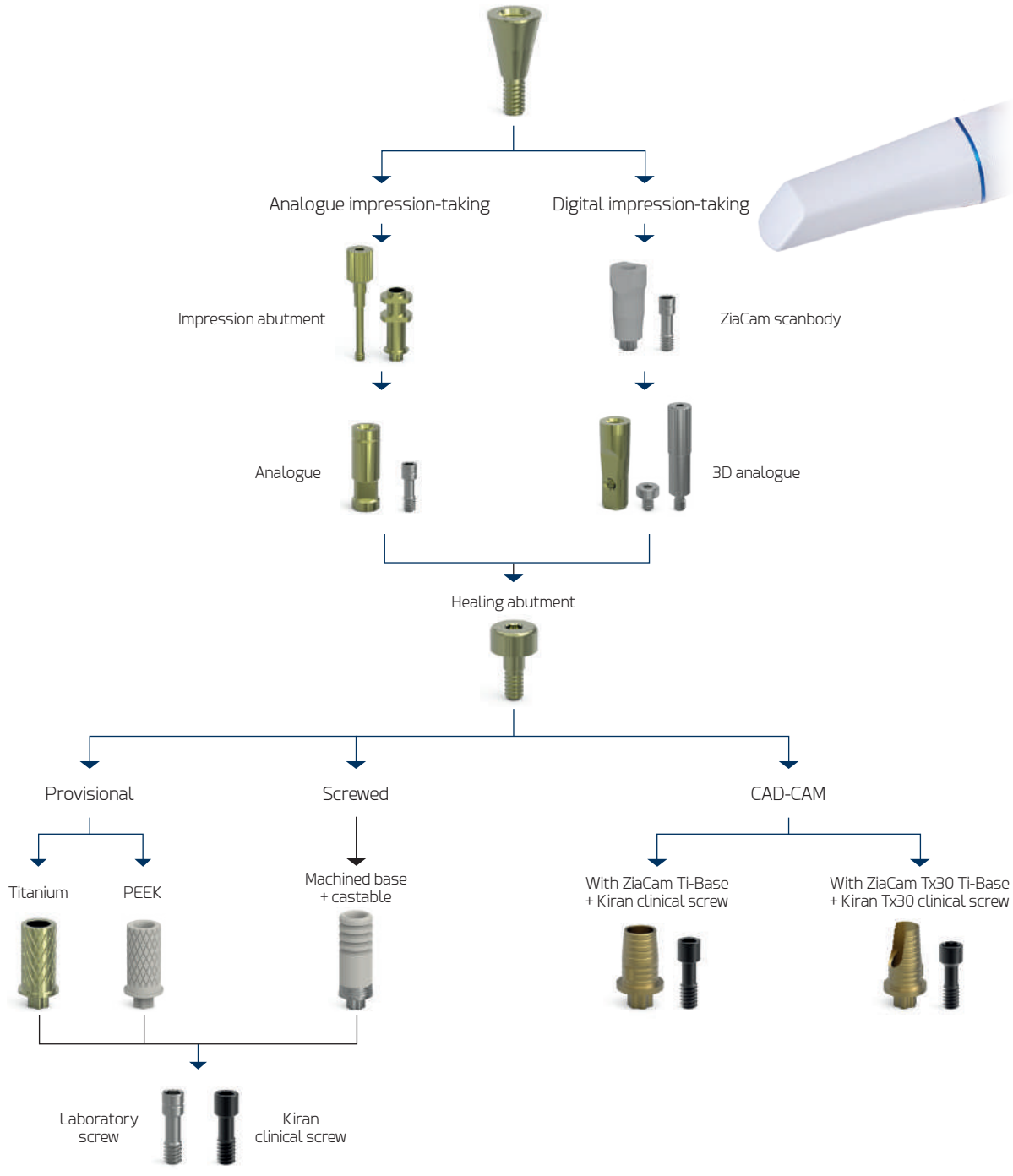
- Allows the peri-implant tissue to form from the initial 8 weeks.
- One abutment-one time, allows gingival adhesion to its surface as repeated detachments are not necessary.
- Avoids bone and soft tissue loss as there is no mechanical rupture of the peri-implant interface.
- The prosthetic working area is above the gingival level, making the soft tissue adhesive behaviour more predictable, maintaining a good seal.
- Less formation of micro-gaps at the implant-prosthesis junction.
- Increased crestal bone preservation.
- Prosthetic try-ins and definitive placement without anaesthesia.
- If the recommended torques are exceeded, the screw suffers the fracture at transepithelial level and not inside the implant.

Abutment heights

- Greater abutment height means more marginal bone is preserved in cemented prostheses.
- Higher abutments (≥2mm) provide better soft tissue adaptation.
- Short abutments (< 2 mm) can compromise the soft tissues, resulting in more crestal bone loss.
- Marginal bone loss will differ depending on the clinical decision on the abutment height. Generally, prosthetic abutments ≥2mm will lead to better preservation of crestal bone.



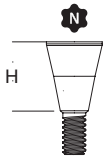
Nature | Example of usage sequence



For more information on the use of abutments, see the "Prosthetic procedure manual" available at **www.ziacom.com/biblioteca**

Abutments

Nature abutment



Platf.	Colour	Height (H)	Diameter (Ø)	Reference
		2.00	3.40	NTGR3420
		2.50	3.40	NTGR3425
		3.50	3.40	NTGR3435
		4.50	3.40	NTGR3445
		5.50	3.40	NTGR3455
		2.00	3.90	NTGR3920
		2.50	3.90	NTGR3925
		3.50	3.90	NTGR3935
		4.50	3.90	NTGR3945
		5.50	3.90	NTGR3955
		2.00	4.40	NTGR4420
		2.50	4.40	NTGR4425
		3.50	4.40	NTGR4435
		4.50	4.40	NTGR4445
		5.50	4.40	NTGR4455

Insertion key Ref. MANA100/MANA110

Anodised Ø3.40 / Ø3.90 / Ø4.40

ROT | 30 Ncm | Nature | M1,60 | Grade 5 ELI Titanium

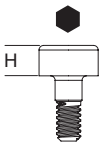
Nature abutment with applicator

The Nature abutment is designed to adapt to the gingival emergence profile with the desired diameter, regardless of the diameter of the implant placed. The Nature abutment is anodised in 2 sections, for the gingival area in yellow and the threaded area in different colours, which tell us the final opening diameter of the emergence profile selected. These are pink for Ø3.40, yellow for Ø3.90 and blue for Ø4.40.

Ø3.40 Anodised | Ø3.90 Anodised | Ø4.40 Anodised

Includes the Nature abutment with sterilisable polyethylene terephthalate (PET) applicator

Nature healing abutment

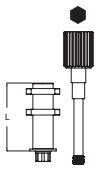


Colour	Height (H)	Diameter (Ø)	Reference
	0.00	3.40	ZNHA340
	1.00	3.40	ZNHA341
	2.00	3.40	ZNHA342
	3.00	3.40	ZNHA343
	4.00	3.40	ZNHA344
	0.00	3.90	ZNHA390
	1.00	3.90	ZNHA391
	2.00	3.90	ZNHA392
	3.00	3.90	ZNHA393
	4.00	3.90	ZNHA394
	0.00	4.40	ZNHA440
	1.00	4.40	ZNHA441
	2.00	4.40	ZNHA442
	3.00	4.40	ZNHA443
	4.00	4.40	ZNHA444

Anodised Ø3.40 / Ø3.90 / Ø4.40

ROT | 1,25mm | M1,60 | Grade 5 ELI Titanium

Nature impression abutment



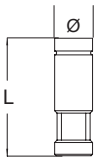
Colour	Length (L)	Diameter (Ø)	Reference
	10.00	3.40	ZNN340
	10.00	3.90	ZNN390
	10.00	4.40	ZNN440

Anodised Ø3.40 / Ø3.90 / Ø4.40

NO ROT | 1,25mm | M1,60 | Grade 5 ELI Titanium

All Nature impression abutments come with a screw.

Nature analogue

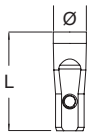


Colour	Length (L)	Diameter (Ø)	Reference
	12.00	3.40	ZNIA34
	12.00	3.90	ZNIA39
	12.00	4.40	ZNIA44

Anodised Ø3.40 / Ø3.90 / Ø4.40

NO ROT | Grade 5 ELI Titanium

3D Nature analogue - Individual

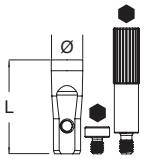


Colour	Length (L)	Diameter (Ø)	Reference
	13.00	3.40	ZNIA343D
	13.00	3.90	ZNIA393D
	13.00	4.40	ZNIA443D

Anodised Ø3.40 / Ø3.90 / Ø4.40

NO ROT · Grade 5 ELI Titanium

Nature 3D analogue - Pack



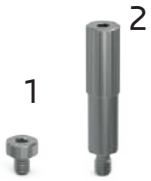
Colour	Length (L)	Diameter (Ø)	Reference
	13.00	3.40	ZNIA343DC
	13.00	3.90	ZNIA393DC
	13.00	4.40	ZNIA443DC

Anodised Ø3.40 / Ø3.90 / Ø4.40

NO ROT · 1,25mm · M1,80 · M2,00 · Grade 5 ELI Titanium · Stainless Steel

*Includes base screw Ref. DSIADI and lateral screw Ref. DSIADT for analogue connection.

Screws - 3D analogue



Type	Length (L)	Reference
Base screw (1)*	-	DSIADI
Lateral screw (2)*	15.00	DSIADT

NO ROT · 1,25mm · M1,80 · M2,00 · Stainless Steel

*Pack of 4 units.

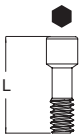
Nature laboratory screw

System	Length (L)	Reference
Nature	6.00	ZNDS3410L

1,25mm · M1,60 · Grade 5 ELI Titanium

NOT suitable for use as the final clinical screw.

Kiran Nature clinical screw

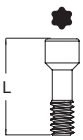


System	Length (L)	Reference
Nature	6.40	ZNDS3410

30 Ncm · 1,25mm · M1,60 · Grade 5 ELI Titanium

Special Kiran screw with surface treatment.

Kiran Tx30 Nature clinical screw

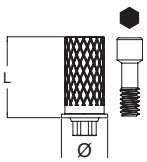


System	Length (L)	Reference
Nature	6.00	ZNDS3410TX

30 Ncm · M1,60 · Grade 5 ELI Titanium

Special Kiran Tx30 screw with surface treatment.

Nature provisional abutment



Rotatory

Colour	Length (L)	Diameter (Ø)	Reference
	9.50	3.40	ZNRT34
	9.50	3.90	ZNRT39
	9.50	4.40	ZNRT44

Anodised Ø3.40 / Ø3.90 / Ø4.40

ROT · 30 Ncm · 1,25mm · M1,60 · Grade 5 ELI Titanium

Non-rotatory

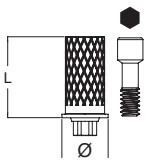
Colour	Length (L)	Diameter (Ø)	Reference
	9.50	3.40	ZNNT34
	9.50	3.90	ZNNT39
	9.50	4.40	ZNNT44

Anodised Ø3.40 / Ø3.90 / Ø4.40

NO ROT · 30 Ncm · 1,25mm · M1,60 · Grade 5 ELI Titanium

Includes screw.

Nature provisional abutment



Rotatory

System	Length (L)	Diameter (Ø)	Reference
Nature	9.50	3.40	ZNRP34
	9.50	3.90	ZNRP39
	9.50	4.40	ZNRP44

ROT · 30 Ncm · 1,25mm · M1,60 · PEEK

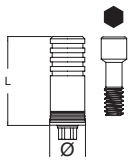
Non-rotatory

System	Length (L)	Diameter (Ø)	Reference
Nature	9.50	3.40	ZNNP34
	9.50	3.90	ZNNP39
	9.50	4.40	ZNNP44

NO ROT · 30 Ncm · 1,25mm · M1,60 · PEEK

Includes screw.

Machined base abutment Nature + Castable abutment



Rotatory

System	Length (L)	Diameter (Ø)	Reference
Nature	9.60	3.40	ZNBRU34
	9.60	3.90	ZNBRU39
	9.60	4.40	ZNBRU44

ROT · 30 Ncm · 1,25mm · M1,60 · Co-Cr +castable

Non-rotatory

System	Length (L)	Diameter (Ø)	Reference
Nature	9.60	3.40	ZNBNU34
	9.60	3.90	ZNBNU39
	9.60	4.40	ZNBNU44

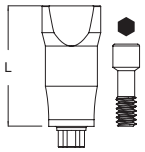
NO ROT · 30 Ncm · 1,25mm · M1,60 · Co-Cr +castable

Includes screw Ref. ZNDS3410) for all Nature + Castable machined base abutments.

Abutments

DIGITAL CAD-CAM

ZiaCam scanbody to Nature abutment



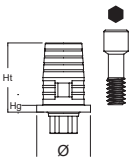
System	Length (L)	Reference
Nature	9.00	FNSYA34ZN

NO ROT · 1,25mm · M1,60 · Grade 5 ELI Titanium

Indicated for clinical and laboratory use.

All ZiaCam scanbodies to Nature abutments include a screw Ref. ZNDS3410L.

ZiaCam Ti-Base scanbody to Nature abutment



Rotatory

System	Height (Hg/Ht)	Diameter (Ø)	Reference
Nature	0.50/5.00	3.40/3.80	ZNFRU381
	0.50/5.00	3.90	ZNFRU391
	0.50/5.00	4.40	ZNFRU441

ROT · 30 Ncm · 1,25mm · M1,60 · Grade 5 ELI Titanium

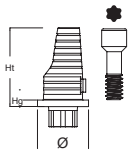
Non-rotatory

System	Height (Hg/Ht)	Diameter (Ø)	Reference
Nature	0.50/5.00	3.40/3.80	ZNFNU381
	0.50/5.00	3.90	ZNFNU391
	0.50/5.00	4.40	ZNFNU441

NO ROT · 30 Ncm · 1,25mm · M1,60 · Grade 5 ELI Titanium

All ZiaCam Ti-Base to Nature abutments come with a special Kiran screw with surface treatment Ref. ZNDS3410.

ZiaCam Ti-Base Tx30 to Nature abutment



Rotatory

System	Height (Hg/Ht)	Diameter (Ø)	Reference
Nature	0.50/6.00	3.40/3.80	ZNFRU381TX
	0.50/6.00	3.90	ZNFRU391TX
	0.50/6.00	4.40	ZNFRU441TX

ROT · 30 Ncm · M1,60 · Grade 5 ELI Titanium · 30°

Non-rotatory

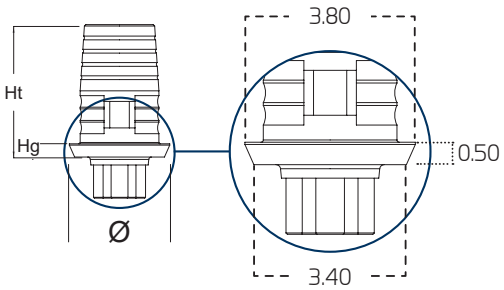
System	Height (Hg/Ht)	Diameter (Ø)	Reference
Nature	0.50/6.00	3.40/3.80	ZNFNU381TX
	0.50/6.00	3.90	ZNFNU391TX
	0.50/6.00	4.40	ZNFNU441TX

NO ROT · 30 Ncm · M1,60 · Grade 5 ELI Titanium · 30°

All ZiaCam Ti-Base Tx30 to Nature abutments come with a special Kiran Tx30 screw with surface treatment Ref. ZNDS3410TX.

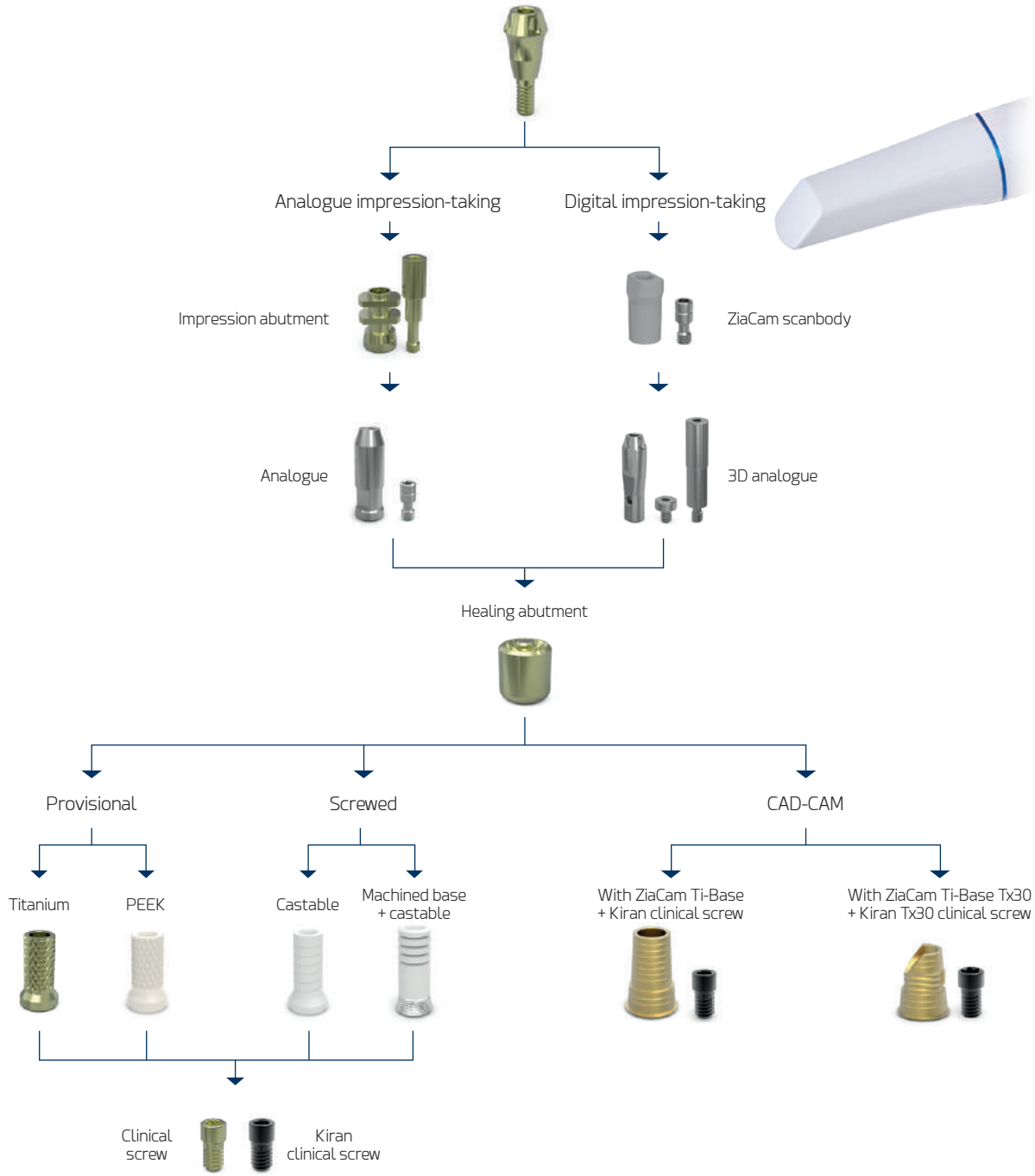
ZIACAM TI-BASE TO NATURE ABUTMENT

Bear in mind that Ti-Base Nature abutments, references **ZNFRU381**. **ZNFNU381**. **ZNFRU381TX** and **ZNFNU381TX**, have been designed with a platform that goes from 3.40 mm extending coronally to 3.80 mm, considered to meet the minimum thickness recommended for the material that will be used in manufacturing the restoration on the Ti-Base.



Restorations using transepithelials

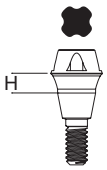
Basic | Example of usage sequence



For more information on the use of abutments, see the "Prosthetic procedure manual" available at **www.ziacom.com/biblioteca**

Abutments

Basic abutment



Platf.	Height (H)	Reference
	1.50	BASICG415
	2.50	BASICG425
	3.50	BASICG435
	4.50	BASICG445
	5.50	BASICG455

Insertion key Ref. MABA100/MABA110.

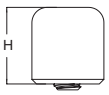
Anodised

ROT | 30 Ncm | Basic | M1,60 | Grade 5 ELI Titanium

Includes the Basic abutment with sterilisable polyoxymethylene applicator (Tecaform AH-POM-C). 18° cone angle. 36° angle between abutments.

Basic abutment with applicator

Basic healing abutment

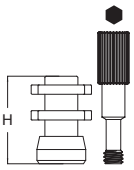


System	Height (H)	Reference
Basic	5.00	BAHAEX34

Anodised

ROT | 1,25mm | M1,80 | Grade 5 ELI Titanium

Basic impression abutment



Rotatory

System	Height (H)	Reference
Basic	8.00	BATC134

Anodised

ROT | 1,25mm | M1,80 | Grade 5 ELI Titanium

Non-rotatory

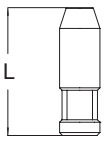
System	Height (H)	Reference
Basic	8.00	BATN134

Anodised

NO ROT | 1,25mm | M1,80 | Grade 5 ELI Titanium

All Basic impression abutments come with a screw.

Basic analogue



Rotatory

System	Length (L)	Reference
Basic	13.00	BAIAEX34

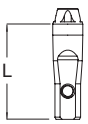
ROT | Stainless Steel

Non-rotatory

System	Length (L)	Reference
Basic	13.00	BAIANEX34

NO ROT | Stainless Steel

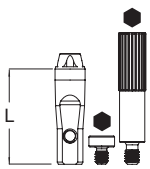
Basic 3D analogue - Individual



System	Length (L)	Reference
Basic	13.00	BAIA348D

NO ROT | Stainless Steel

Basic 3D analogue - Pack

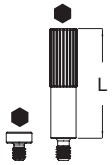


System	Length (L)	Reference
Basic	13.00	BAIA348DC*

NO ROT | 1,25mm | M1,80 | M2,00 | Stainless Steel

*Includes base screw Ref. DSIADI and lateral screw Ref. DSIADT for analogue connection.

Screws - 3D analogue



Type	Length (L)	Reference
Base screw (1)*	-	DSIADI
Lateral screw (2)*	15.00	DSIADT

NO ROT | 1,25mm | M1,80 | M2,00 | Stainless Steel

*Pack of 4 units.

Basic clinical screw


System	Length (L)	Reference
Basic	4.30	BDSEI3400

Anodised

25 Ncm · 1,25mm · M1,80 · 45° · Grade 5 ELI Titanium

Kiran Basic clinical screw


System	Length (L)	Reference
Basic	4.30	BDSEI3410

25 Ncm · 1,25mm · M1,80 · 45° · Grade 5 ELI Titanium

Special Kiran screw with surface treatment.

Basic laboratory screw


System	Length (L)	Reference
Basic	5.50	BDSEI3401

1,25mm · M1,80 · 45° · Grade 5 ELI Titanium

NOT suitable for use as the final clinical screw.

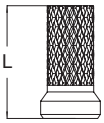
Kiran Tx30 Basic clinical screw


System	Length (L)	Reference
Basic	4.10	BDSEI34TX

25 Ncm · M1,80 · 45° · Grade 5 ELI Titanium

Special Kiran Tx30 screw with surface treatment.

Basic provisional abutment

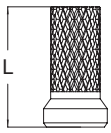



System	Length (L)	Reference
Basic	8.50	BARUT10

Anodised

ROT · Grade 5 ELI Titanium

Basic provisional abutment

Rotatory

System	Length (L)	Reference
Basic	8.50	BARUP34

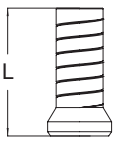
ROT · PEEK

Non-rotatory

System	Length (L)	Reference
Basic	8.50	BANUP34

NO ROT · PEEK

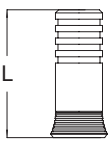
Basic UCLA

System	Length (L)	Reference
Basic	9.00	BARUEX34

ROT · Full castable

Machined base abutment Basic + Castable abutment

Rotatory

System	Length (L)	Reference
Basic	11.00	BBRU34

ROT · Co-Cr +castable

Non-rotatory

System	Length (L)	Reference
Basic	11.00	BBNU34

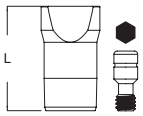
NO ROT · Co-Cr +castable

Basic

Abutments

DIGITAL CAD-CAM

ZiaCam scanbody to Basic abutment



Rotatory

System	Length (L)	Reference
Basic	8.70	FNSYB18T

ROT · 1,25mm · M1,80 · 45° · Grade 5 ELI Titanium

Indicated for clinical and laboratory use.

Non-rotatory

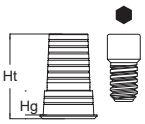
System	Length (L)	Reference
Basic	8.70	FNSYB18NT

NO ROT · 1,25mm · M1,80 · 45° · Grade 5 ELI Titanium

Indicated for clinical and laboratory use.

All ZiaCam scanbodies to Basic abutments include a screw Ref. BDSEI3401.

ZiaCam Ti-Base to Basic



Rotatory

System	Height (Hg/Ht)	Reference
Basic	0.30/6.70	BFRU341

ROT · 25 Ncm · 1,25mm · M1,80 · 45° · Grade 5 ELI Titanium

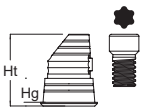
Non-rotatory

System	Height (Hg/Ht)	Reference
Basic	0.30/6.70	BFNU341

NO ROT · 25 Ncm · 1,25mm · M1,80 · 45° · Grade 5 ELI Titanium

All Ti-Base ZiaCam to Basic abutments come with a special Kiran screw with surface treatment Ref. BDSEI3410.

ZiaCam Ti-Base Tx30 to Basic



Rotatory

System	Height (Hg/Ht)	Reference
Basic	0.30/5.70	BFRU341TX

ROT · 25 Ncm · M1,80 · 45° · Grade 5 ELI Titanium · 30°

Non-rotatory

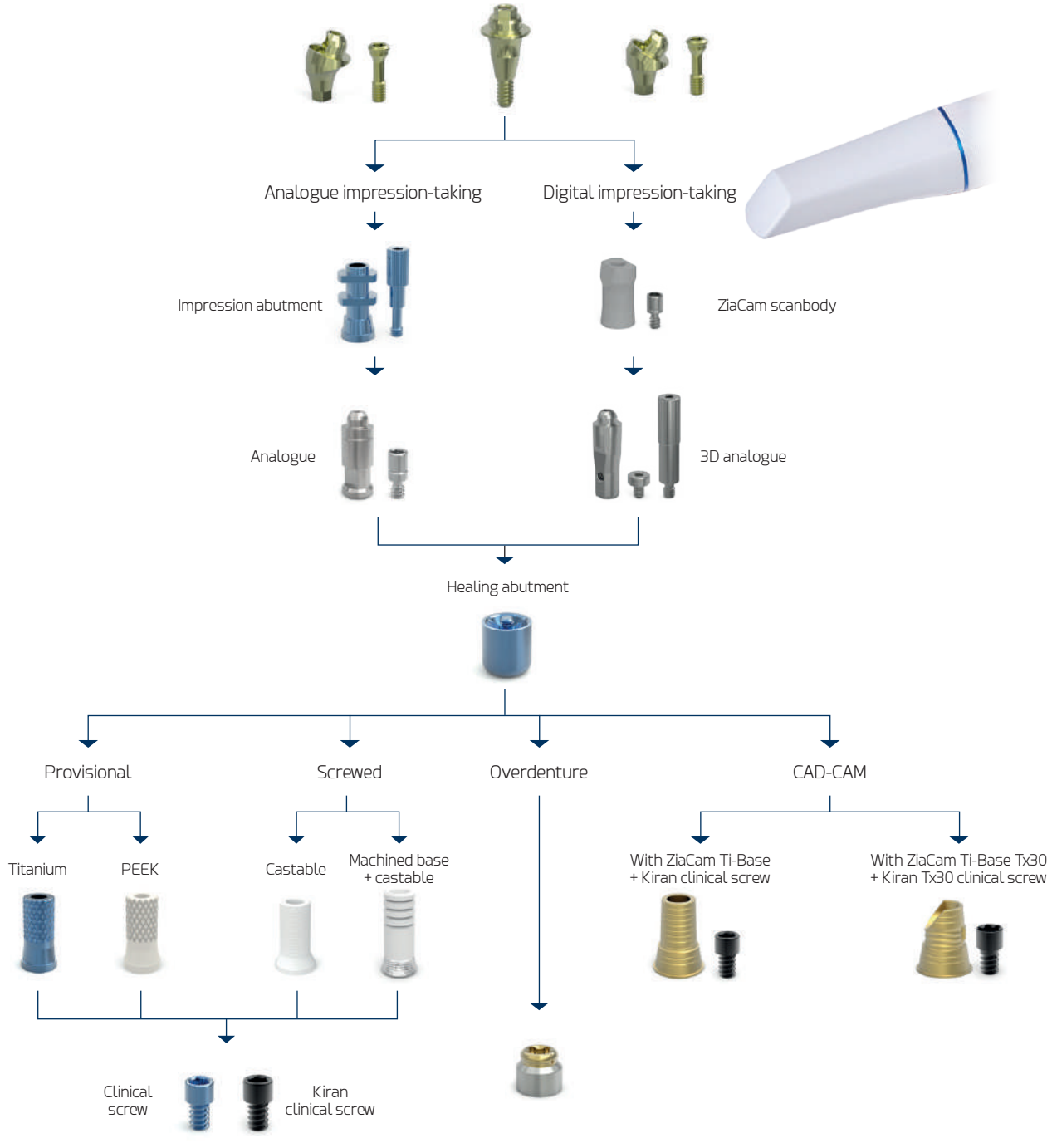
System	Height (Hg/Ht)	Reference
Basic	0.30/5.70	BFNU341TX

NO ROT · 25 Ncm · M1,80 · 45° · Grade 5 ELI Titanium · 30°

All ZiaCam Ti-Base Tx30 to Basic abutments come with a special Kiran Tx30 screw with surface treatment Ref. BDSEI34TX.

Restorations using transepithelials

XDrive | Example of usage sequence



For more information on the use of abutments, see the "Prosthetic procedure manual" available at **www.ziacom.com/biblioteca**

Abutments

XDrive straight abutment

Platf.	Height (H)	Reference
	1.50	XST10G15
	2.50	XST10G25
	3.50	XST10G35
	4.50	XST10G45
	5.50	XST10G55

Insertion key Ref. MABA200/MABA210.

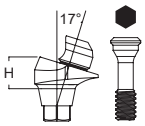
Anodised

ROT · 30 Ncm · XDrive · M1,60 · Grade 5 ELI Titanium

Includes XDrive abutment with sterilisable polyoxymethylene applicator (Tecaform AH-POM-C). 21° cone angle. 42° angle between abutments.

XDrive abutment with applicator

XDrive 17° angled abutment

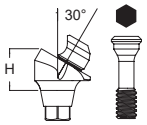


Platf.	Height (H)	Reference
	2.50	XA210G17
	3.50	XA310G17
	4.50	XA410G17
	5.50	XA510G17

Anodised

NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

XDrive 30° angled abutment



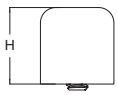
Platf.	Height (H)	Reference
	3.50	XA310G30
	4.50	XA410G30
	5.50	XA510G30

Anodised

NO ROT · 30 Ncm · 1,25mm · M1,60 · 45° · Grade 5 ELI Titanium

All XDrive angled abutments come with a titanium positioner and screw.

XDrive healing abutment

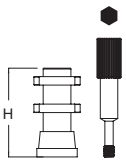


System	Height (H)	Reference
XDrive	5.00	XH103400

Anodised

ROT · 1,25mm · M1,40 · Grade 5 ELI Titanium

XDrive impression abutment



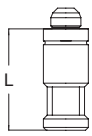
System	Height (H)	Reference
XDrive	10.50	XT103411

Anodised

ROT · 1,25mm · M1,40 · Grade 5 ELI Titanium

Includes screw.

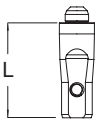
XDrive analogue



System	Length (L)	Reference
XDrive	13.00	XIA103400

ROT · Stainless Steel

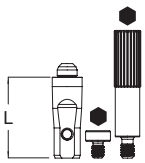
XDrive 3D analogue - Individual



System	Length (L)	Reference
XDrive	13.00	XIA3408D

NO ROT · Stainless Steel

XDrive 3D analogue - Pack

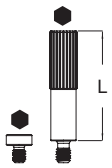


System	Length (L)	Reference
XDrive	13.00	XIA3408DC*

NO ROT · 1,25mm · M1,80 · M2,00 · Stainless Steel

*Includes base screw Ref. DSIADI and lateral screw Ref. DSIADT for analogue connection.

Screws - 3D analogue

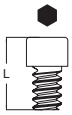


Type	Length (L)	Reference
Base screw (1)*	-	DSIADI
Lateral screw (2)*	15.00	DSIADT

NO ROT · 1,25mm · M1,80 · M2,00 · Stainless Steel

*Pack of 4 units.

XDrive clinical screw

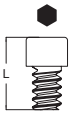


System	Length (L)	Reference
XDrive	3.50	XDS103410

Anodised

20 Ncm | 1,25mm | M1,40 | 90° | Grade 5 ELI Titanium

Kiran XDrive clinical screw

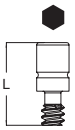


System	Length (L)	Reference
XDrive	3.50	XDS103411

20 Ncm | 1,25mm | M1,40 | 90° | Grade 5 ELI Titanium

Special Kiran screw with surface treatment.

XDrive laboratory screw



System	Length (L)	Reference
XDrive	5.10	XLB103410

1,25mm | M1,40 | 90° | Grade 5 ELI Titanium

NOT suitable for use as the final clinical screw.

Kiran Tx30 XDrive clinical screw

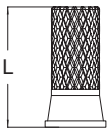
For ZiaCam Ti-Base or metal structures

System	Length (L)	Reference
XDrive	3.50	XDS3411TX

20 Ncm | M1,40 | 90° | Grade 5 ELI Titanium

Kiran Tx30 special screw with surface treatment.

XDrive provisional abutment

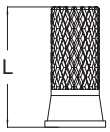


System	Length (L)	Reference
XDrive	9.50	XST3410

Anodised

ROT | Grade 5 ELI Titanium

XDrive provisional abutment

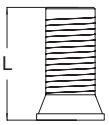


System	Length (L)	Reference
XDrive	9.50	XSP3410

ROT | PEEK

XDrive

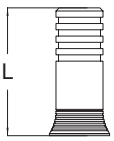
XDrive UCLA



System	Length (L)	Reference
XDrive	8.00	XRU103400

ROT | Full castable

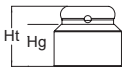
Machined base abutment XDrive + Castable abutment



System	Length (L)	Reference
XDrive	11.00	XBRU34

ROT | Co-Cr +castable

Kirator XDrive abutment



System	Height (Hg/Ht)	Reference
XDrive	3.00/4.30	XL03400

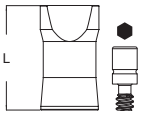
Kirator abutment with gold surface treatment.

ROT | 20 Ncm | Kirator | M1,40 | Grade 5 ELI Titanium

Abutments

DIGITAL CAD-CAM

ZiaCam scanbody to XDrive abutment



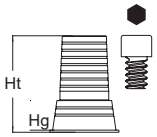
System	Length (L)	Reference
XDrive	8.70	FNSYX18T

ROT · 1,25mm · M1,40 · 90° · Grade 5 ELI Titanium

Indicated for clinical and laboratory use.

All ZiaCam scanbodies to XDrive abutments include a screw Ref. XLB103410.

ZiaCam XDrive Ti-Base

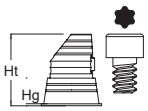


System	Height (Hg/Ht)	Reference
XDrive	0.15/6.70	XFRU341

ROT · 20 Ncm · 1,25mm · M1,40 · 90° · Grade 5 ELI Titanium

Includes special Kiran screw with surface treatment Ref. XDS103411.

ZiaCam Ti-Base Tx30 XDrive



System	Height (Hg/Ht)	Reference
XDrive	0.15/5.70	XFRU341TX

ROT · 20 Ncm · M1,40 · 90° · Grade 5 ELI Titanium · 30°

Includes special Kiran Tx30 screw with surface treatment Ref. XDS3411TX.

Table of abutment torques

Element/Abutment	Instrument/Tool	Torque
Cover screws/Healing abutments	Hex screwdriver 1.25 mm	Manual
Impression abutment screws	Hex screwdriver 1.25 mm	Manual
Laboratory screws	Hex screwdriver 1.25 mm	Manual
Direct-to-implant clinical screws	Hex screwdriver 1.25 mm	30 Ncm
Kiran direct-to-implant clinical screws	Hex screwdriver 1.25 mm	30 Ncm
Nature abutments	Insertion keys: MANA100/MANA110/MANA120	30 Ncm
Clinical screws on Nature	Hex screwdriver 1.25 mm	30 Ncm
Kiran clinical screws on Nature	Hex screwdriver 1.25 mm	30 Ncm
Basic abutments	Insertion keys: MABA100/MABA110/MABA120	30 Ncm
XDrive abutments	Insertion keys: MABA200/MABA210/MABA220	30 Ncm
Clinical screws on Basic	Hex screwdriver 1.25 mm	25 Ncm
Kiran clinical screws on Basic	Hex screwdriver 1.25 mm	25 Ncm
Clinical screws on XDrive	Hex screwdriver 1.25 mm	20 Ncm
Kiran clinical screws on XDrive	Hex screwdriver 1.25 mm	20 Ncm
ZiaCam scanbody + screw	Hex screwdriver 1.25 mm	Manual
Kirator abutments	Insertion keys: LOSD01/LOSD02	30 Ncm
Tx30 abutment/screw (variable rotation)	Tx30 Torx screwdriver	30 Ncm

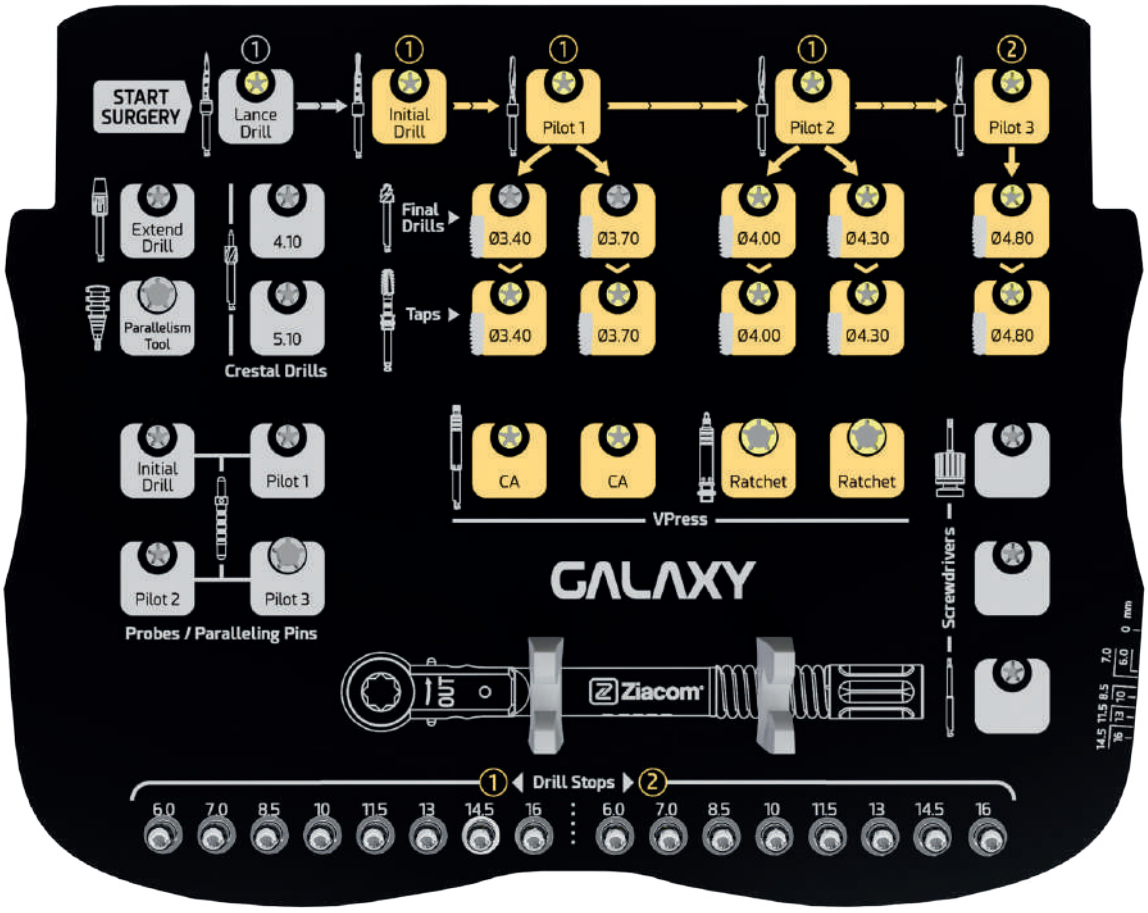
WARNING
Exceeding the recommended tightening torque for screws and abutments compromises the prosthetic restoration and could damage the implant structure.

For immediate loading: DO NOT tighten manually, attach with the final torque. When using a screwdriver or adaptor for a contra-angle handpiece (CA), do not exceed a maximum speed of 25 rpm.

Surgical instruments

Surgical instruments

Surgical boxes



■ Contents of Galaxy boxes available

Platf.	Contents	Reference
	Empty	BOX930
	Complete	BOX902GLY

134°

Material: Radel.

Ensure boxes do not touch the walls of the autoclave to avoid damage.

Surgical kit contents

REF	Description	BOX902GLY
SID001M	Lance drill. Ø2.00 mm. Millimeter.	●
OTD100C	Initial Pilot Drill Millimeter.	●
OTD101C	Pilot Drill P1. Millimeter.	●
OTD102C	Pilot Drill P2. Millimeter.	●
OTD103C	Pilot Drill P3. Millimeter.	●
OTD200C	Final surgical drill. F1	●
OTD300C	Final surgical drill. F2	●
OTD400C	Final surgical drill. F3	●
OTD500C	Final surgical drill. F4	●
OTD600C	Final surgical drill. F5	●
CLD34	Crestal surgical drill. Ø4.10 mm.	●
CLD50	Crestal surgical drill. Ø5.10 mm.	●
PMT1G	Paralleling Pin. RP.	●
GTPD160	Calibrated drill stop. 1. H6 mm.	●
GTPD170	Calibrated drill stop. 1. H7 mm.	●
GTPD185	Calibrated drill stop. 1. H8.50 mm.	●
GTPD110	Calibrated drill stop. 1. H10 mm.	●
GTPD115	Calibrated drill stop. 1. H11.50 mm.	●
GTPD113	Calibrated drill stop. 1. H13 mm.	●
GTPD114	Calibrated drill stop. 1. H14.5 mm.	●
GTPD116	Calibrated drill stop. 1. H16 mm.	●
GTPD260	Calibrated drill stop. 2. H6 mm.	●
GTPD270	Calibrated drill stop. 2. H7 mm.	●
GTPD285	Calibrated drill stop. 2. H8.50 mm.	●
GTPD210	Calibrated drill stop. 2. H10 mm.	●
GTPD215	Calibrated drill stop. 2. H11.50 mm.	●
GTPD213	Calibrated drill stop. 2. H13 mm.	●
GTPD214	Calibrated drill stop. 2. H14.5 mm.	●
GTPD216	Calibrated drill stop. 2. H16 mm.	●
GTAP34MC	Surgical tap. Ø3.40 mm Millimeter.	●
GTAP37MC	Surgical tap. Ø3.70 mm Millimeter.	●
GTAP40MC	Surgical tap. Ø4.00 mm. Millimeter.	●
GTAP43MC	Surgical tap. Ø4.0 mm. Millimeter.	●
GTAP48MC	Surgical tap. Ø4.80 mm Millimeter.	●
MUR100G3	Probe/Paralleling pin Initial. Millimeter.	●
MUR200G3	Probe/Paralleling pin P1. Millimeter.	●
MUR300G3	Probe/Paralleling pin P2 Millimeter.	●
MUR400G3	Probe/Paralleling pin P3. Millimeter.	●
SMRGV	VPress insertion key. RP. Short. Millimeter.	●
LMRGV	VPress insertion key. RP. Long. Millimeter.	●
SMRGV1	VPress insertion key. RP. Short. Millimeter.	●
LMRGV1	VPress insertion key. RP. Long. Millimeter.	●
DEXT10	Drill extender	●
MESD	Screwdriver tip. 1.25 mm. Long.	●
LMSD	Surgical screwdriver. 1.25 mm. Long.	●
SMSD	Surgical screwdriver. 1.25 mm. Short.	●
TORK50	Regulable torque wrench	●

Surgical instruments

SURGICAL DRILLS

Lance drill

Platf.	Diameter (Ø)	Length (L)	Reference
■	2.00	16.30	SID001M

60 USES · Stainless Steel

Initial pilot drill

Platf.	Diameter (Ø)	Length (L)	Reference
■	1.80/2.50	17.50	OTD100C

Millimeter: 6/7/8.5/10/11.5/13/14.5/16

60 USES · Stainless Steel

Pilot drill

Platf.	Type	Diameter (Ø)	Length (L)	Reference
■	Pilot 1	2.90/3.20	17.50	OTD101C
	Pilot 2	3.35/3.70	17.50	OTD102C
	Pilot 3	3.90/4.37	17.50	OTD103C

Millimeter: 6/7/8.5/10/11.5/13/14.5/16

60 USES · Stainless Steel

Final drill

Platf.	Type	Diameter (Ø)	Length (L)	Reference
■	Final 1	3.50	6.50	OTD200C
■	Final 2	3.80	6.50	OTD300C
■	Final 3	4.00	6.50	OTD400C
■	Final 4	4.30	6.50	OTD500C
■	Final 5	4.80	6.50	OTD600C

60 USES · Stainless Steel

Crestal surgical drill

Platf.	Diameter (Ø)	Reference
Universal	4.10	CLD34
	5.10	CLD50

60 USES · Stainless Steel

PIN

Paralleling pin

Platf.	Diameter (Ø)	Length (L)	Reference
■	4.50	11.00	PMT1G

Anodised ■

Grade 5 ELI Titanium

STOPS

Calibrated drill stop

Platf.	Type	Length (L) Implant	Reference
■	1	6.00	GTPD160
		7.00	GTPD170
		8.50	GTPD185
		10.00	GTPD110
		11.50	GTPD115
		13.00	GTPD113
		14.50	GTPD114
		16.00	GTPD116
■	2	6.00	GTPD260
		7.00	GTPD270
		8.50	GTPD285
		10.00	GTPD210
		11.50	GTPD215
		13.00	GTPD213
		14.50	GTPD214
		16.00	GTPD216
Pack *		--	KSTPG120

* Complete pack of 16 calibrated stops.

Grade 5 ELI Titanium

TAPS

Surgical tap. CA/Manual.

Platf.	Diameter (Ø)	Reference
■	3.40	GTAP34MC
	3.70	GTAP37MC
	4.00	GTAP40MC
	4.30	GTAP43MC
	4.80	GTAP48MC

Millimeter: 6/7/8.5/10/11.5/13/14.5

Stainless Steel

Instrument with DLC surface treatment.

PROBES

Probe/Paralleling pin

Platf.	Type	Diameters (Ø1-Ø2)	Length (L)	Reference
	Initial	1.80/2.50	27.00	MUR100G3
	Pilot 1	2.70/3.00	27.00	MUR200G3
	Pilot 2	3.05/3.55	27.00	MUR300G3
	Pilot 3	3.65/4.35	27.00	MUR400G3

Millimeter: 6/7/8.5/10/11.5/13/14.5/16

Grade 5 ELI Titanium

KEYS

VPress insertion key. Ratchet

Platf.	Length (L)	Reference
	12.50/Short	SMRGV
	19.50/Long	LMRGV

● Double hexagonal / ■ Square 4x4 mm

Millimeter: 1/2/3/4/5/6

Stainless Steel

Instrument with DLC surface treatment.

VPress insertion key. CA

Platf.	Length (L)	Reference
	22.20/Short	SMRGV1
	32.20/Long	LMRGV1

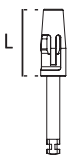
● Double hex

Millimeter: 1/2/3/4/5/6

Stainless Steel

Instrument with DLC surface treatment.

Drill extender



Platf.	Length (L)	Reference
Universal	12.00	DEXT10

Stainless Steel

SCREWDRIVERS

Screwdriver tip. CA

Platf.	Length (L)	Reference
Universal	20.00/Short	MESD01 *
	25.00/Long	MESD

⬢ Hexagonal 1.25 mm

1,25mm Stainless Steel

*Ref. MESD01 is NOT included in the surgical box.

Surgical screwdriver. Manual

Platf.	Length (L)	Reference
Universal	2.80/Mini	XSMSD *
	9.50/Short	SMSD
	14.50/Long	LMSD
	27.00/Extralong	XLMSD *

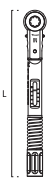
⬢ Hexagonal 1.25 mm

1,25mm Stainless Steel

*Ref. XSMSD/XLMSD are NOT included in the surgical box.

RATCHET

Regulable torque wrench



Platf.	Length (L)	Reference
Universal	86.80	TORK50

■ Square 4x4 mm

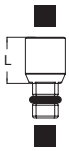
Nm 10 20 30 40 50 60 70 Stainless Steel

Surgical instruments

Complementary instruments

ADAPTERS

Ratchet extension



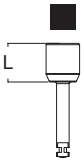
Platf.	Length (L)	Reference
Universal	7.20	LAEX

Square 4x4 mm

Stainless Steel

NOT included in the surgical box.

Ratchet to CA adaptor



Platf.	Length (L)	Reference
Universal	7.20	MAEX

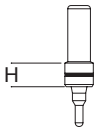
Square 4x4 mm

Stainless Steel

NOT included in the surgical box.

LABORATORY TEST KIT

Laboratory test kit



Platf.	Height (H)	Reference
	4.00	GLAB40

ROT

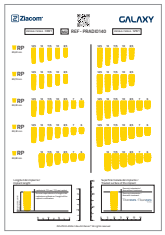
Grade 5 ELI Titanium

This product does not supersede the need for careful planning of each clinical case.

NOT included in the surgical box.

RADIOGRAPHIC TEMPLATE

Galaxy radiographic template



Platf.	Model	Reference
	Galaxy	PRADI0140

Scales 1:1 and 1:1.25

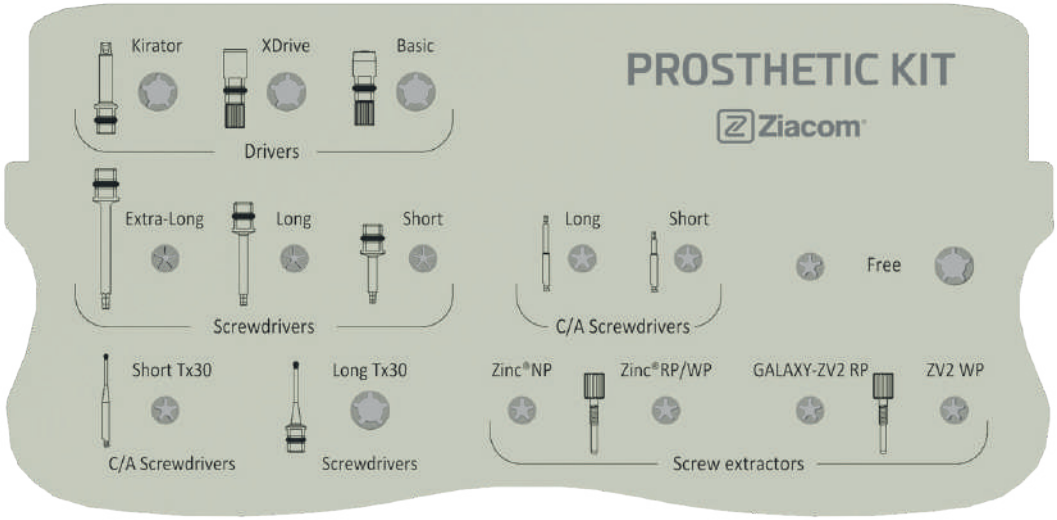
Material: transparent acetate. Non-sterilisable material

See the literature available at **www.ziacom.com/biblioteca**

Prosthetic instruments

Prosthetic instruments

Prosthetic box



Contents of prosthetic boxes available

Contents	Reference
Empty	BOXPN
Basic	BOXPSN
Complete	BOXPCN

134°

Material: Radel.

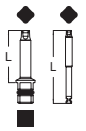
Ensure boxes do not touch the walls of the autoclave to avoid damage.

Contents of prosthetic boxes

REF	Description	BOXPSN	BOXPCN
LOSD01	Kirator insertion key.	●	●
MABA100	Basic insertion key. Short.	●	●
MABA200	XDrive insertion key. Short.	●	●
MADW10	Screwdriver handle. 4x4.	●	●
SMSD1	Screwdriver tip. 1.25 mm. Short.	●	●
LMSD1	Screwdriver tip. 1.25 mm. Long.	●	●
XLMSD1	Screwdriver tip. 1.25 mm. Extra long.		●
MESD	Screwdriver tip. 1.25 mm. Long.	●	●
MESD01	Screwdriver tip. 1.25 mm. Short.	●	●
MESDTX	Tx30 screwdriver tip. Long.	●	●
LMSD1TX	Tx30 screwdriver tip. Long.	●	●
EDSZ20 *	ZPlus extractor screw. NP		●
EDSZ34 *	ZPlus extractor screw. RP/WP.		●
EDSG34	Abutment extractor screw. RP		●
EDSG50 *	Abutment extractor screw. WP		●
TORK50	Regulable torque wrench	●	●

*** Product not included in the Galaxy system.**

Kirator insertion key



System	Length (L)	Reference
Kirator	13.60/Ratchet/Manual	LOSD01
	20.00/CA	LOSD02 *

◆ Square 2.11 mm / ■ Square 4x4 mm

Kirator · Stainless Steel

*Ref. LOSD02 is NOT included in the prosthetic box.

Basic insertion key. Ratchet

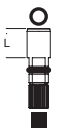
System	Length (L)	Reference
Basic	5.00/Short	MABA100
	13.00/Long	MABA110 *

✱ Basic / ■ Square 4x4 mm

Basic · Grade 5 ELI Titanium · Stainless Steel

*Ref. MABA110 is NOT included in the prosthetic box.

XDrive insertion key Ratchet



System	Length (L)	Reference
XDrive	6.00/Short	MABA200
	13.00/Long	MABA210*

○ XDrive / ■ Square 4x4 mm

XDrive · Grade 5 ELI Titanium · Stainless Steel

*Ref. MABA210 is NOT included in the prosthetic box.

Nature insertion key. Ratchet

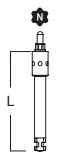
System	Length (L)	Reference
Nature	5.00/Short	MANA100*
	15.00/Long	MANA110*

Ⓝ Nature / ■ Square 4x4 mm

Nature · Stainless Steel

*Ref. MANA100/MANA110 are NOT included in the prosthetic box.

Nature insertion key. CA



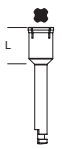
System	Length (L)	Reference
Nature	20.50	MANA120*

Ⓝ Nature

Nature · Stainless Steel

*Ref. MABA210 is NOT included in the prosthetic box.

Basic insertion key. CA



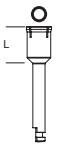
System	Length (L)	Reference
Basic	7.00	MABA120*

✱ Basic

Basic · Stainless Steel

*Ref. MABA210 is NOT included in the prosthetic box.

XDrive insertion key CA



System	Length (L)	Reference
XDrive	7.00	MABA220*

○ XDrive

XDrive · Stainless Steel

*Ref. MABA220 is NOT included in the prosthetics box.

Prosthetic instruments

SCREWDRIVERS

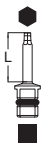
Screwdriver adapter handle

Platf.	Length (L)	Reference
Universal	12.90	MADW10

■ Square 4x4 mm

Stainless Steel

Screwdriver tip. Ratchet



Platf.	Length (L)	Reference
Universal	9.50/Short	SMSD1
	14.50/Long	LMSD1
	27.00/Extralong	XLMSD1

■ Square 4x4 mm

1,25mm Stainless Steel

Screwdriver tip. CA

Platf.	Length (L)	Reference
Universal	20.00/Short	MESD01
	25.00/Long	MESD

1,25mm Stainless Steel

Tx30 screwdriver tip. CA

System	Length (L)	Reference
Tx30	26.00/Short	MESD01TX *
	32.00/Long	MESDTX

Stainless Steel

Do not exceed 30 Ncm as it could cause severe damage to the screwdriver and screw

* Ref. MESD01TX is NOT included in the prosthetics box.

Tx30 screwdriver tip. Ratchet

System	Length (L)	Reference
Tx30	12.00/Short	SMSD1TX *
	18.00/Long	LMSD1TX

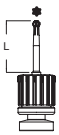
■ Square 4x4 mm

Stainless Steel

Do not exceed 30 Ncm as it could cause severe damage to the screwdriver and screw

*Ref. SMSD1TX is NOT included in the prosthetic box.

Tx30 prosthetic screwdriver. Manual



System	Length (L)	Reference
Tx30	12.00/Short	SMSDTX *
	18.00/Long	LMSDTX *
	27.00/Extralong	XLMSDTX*

Stainless Steel

Do not exceed 30 Ncm as it could cause severe damage to the screwdriver and screw

*Ref. SMSDTX/LMSDTX/XLMSDTX are NOT included in the prosthetics box.

EXTRACTOR SCREW

ZPlus extractor screw

Platf.	Length (L)	Reference
●	25.00	EDSZ20 *
●●	23.70	EDSZ34 *

Anodised ■ NP ■ RP/WP

1,25mm M1,60 M1,80 Grade 5 ELI Titanium

Galaxy/ZV2 abutment extractor screw

Platf.	Length (L)	Reference
■	25.00	EDSG34
■	26.80	EDSG50 *

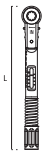
Anodised ■ RP ■ WP

1,25mm M1,60 M2,00 Grade 5 ELI Titanium

*Product not included in the Galaxy system.

RATCHET

Regulable torque wrench



Platf.	Length (L)	Reference
Universal	86.80	TORK50

■ Square 4x4 mm

Ncm 10 20 30 40 50 60 70 Stainless Steel

Complementary instruments

CA to ratchet adaptor

Platf.	Length (L)	Reference
Universal	12.00	MC10Z

■ Square 4x4 mm

Stainless Steel

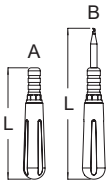
NOT included in the prosthetic box

Retentive joints instruments

Platf.	Dimensions	Reference
Universal	2x1	RREI0030

Pack of 10 units.

Extractor + Retainer inserter handle

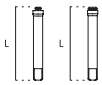


Platf.	A Length (L)	B Length (L)	Reference
Kirator ZM-Equator	81.50	110.40	MBEI3610

Plastic Stainless Steel

NOT included in the prosthetic box

Retainer inserter



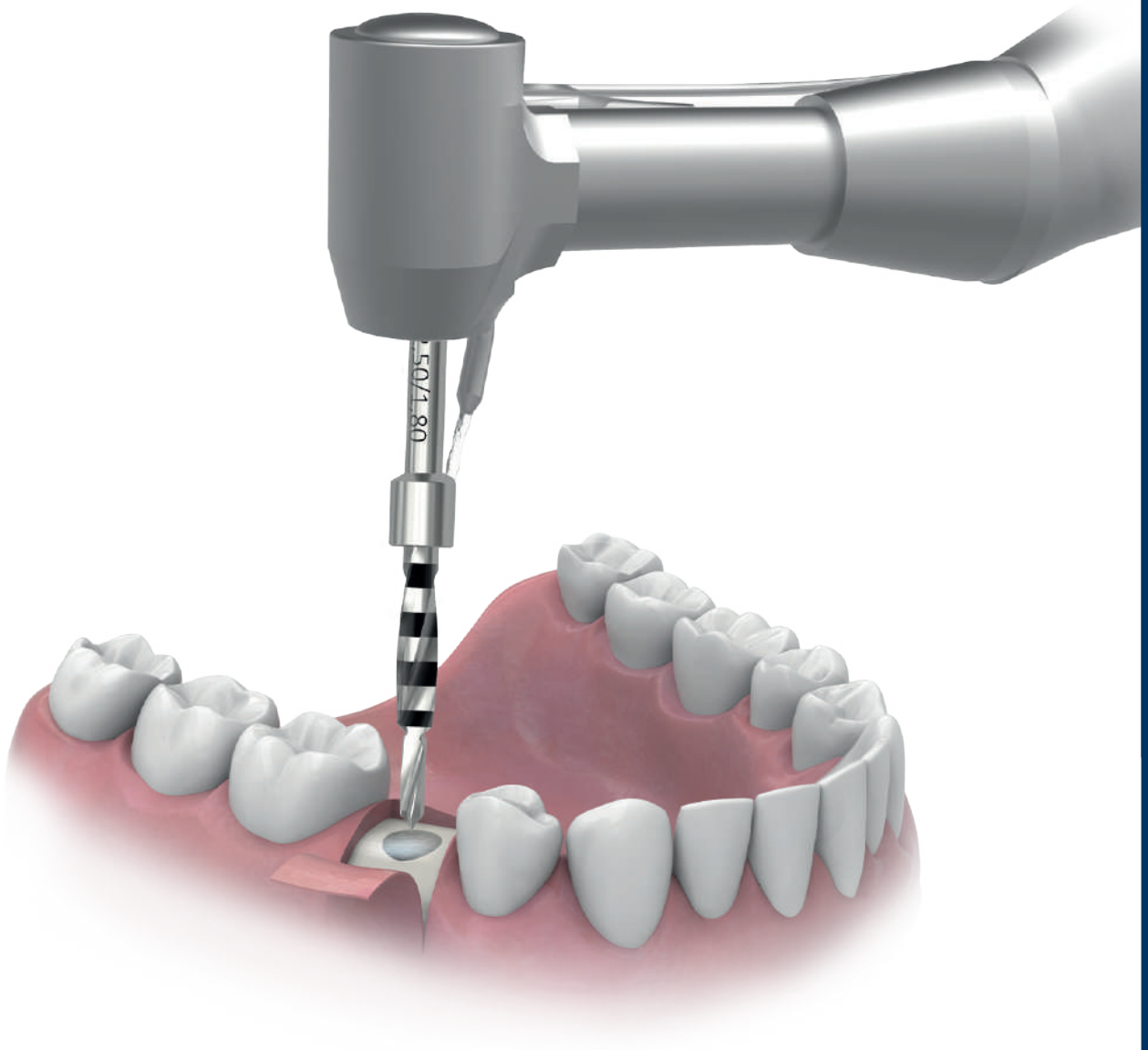
Platf.	Length (L)	Reference
Kirator	32.00	MBEI3602
ZM-Equator	32.00	MBEI3603

Stainless Steel

Kirator / ZM-Equator plastic cap insertion tool
NOT included in the prosthetic box


GALAXY

Surgical protocols

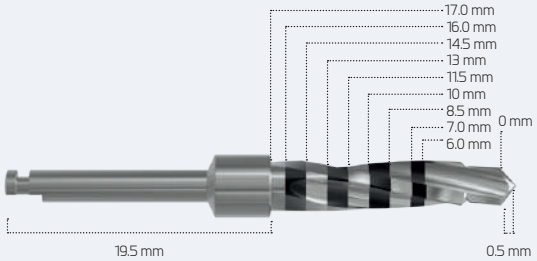


Surgical protocol

Features of the Galaxy drilling system

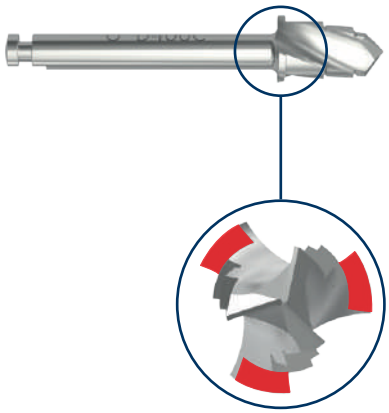
Ziacom® drill system

Ziacom® implant system drills are made from stainless steel. Furthermore, they have a matte finish and therefore anti-reflective properties. A laser marking on the bur's shank identifies its inner and outer diameters and its length, while the horizontal laser marked bands on the active section corresponds to the different lengths of the implants (millimeter drills). The drill tip is 0.5 mm long and this is not included in the different laser-marked lengths.



Ziacom® final drills

Its use is essential and mandatory in order to achieve an ideal finish of the prepared implant bed for smooth, safe and precision insertion. In this way, overtorquing of the implant can be avoided while it is placed into its final position.



FINAL DRILL STOP

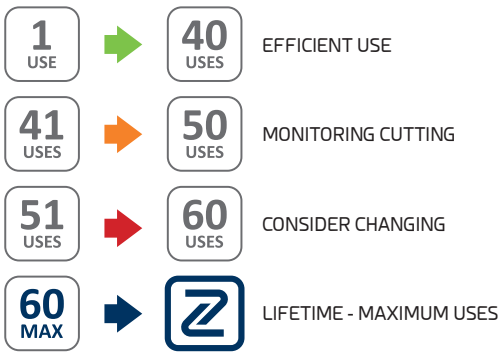
A stop, consisting of three blades (see red areas marked on image) has been incorporated into the design of the final drills, between the active area and the shank, to limit the penetration of the drill.

IMPORTANT
Take care not to drill beyond the stop, as this modifies the coronal anatomy of the surgical site.

ZIACOM® DRILLS EFFICIENCY GUARANTEE

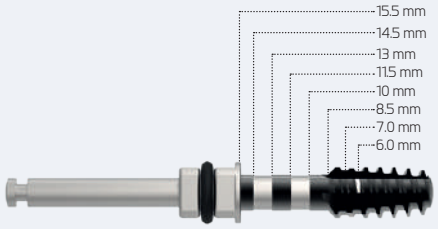
Surgical drills for Galaxy implants from Ziacom® (**cortical drills, lance drill, initial drill, pilot drills and final drills**), have a **lifetime of up to 60 uses**. It is advisable to monitor the cutting status at all times, especially when reaching around 41 to 50 uses, since after 50 uses it is necessary to consider changing the drills before reaching 60 uses.

Bear in mind that, depending on the size of the implant, bone density and your surgical protocol, not all of the various drills will be used equally – it is recommended that you monitor the number of uses for each instrument.



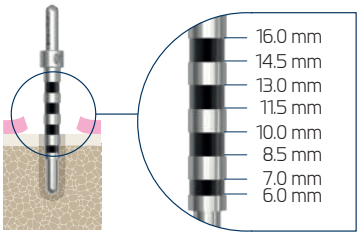
Ziacom® taps - DLC surface

Thread taps are available for contra-angle handpieces. The laser marking on the tap's shank identifies its diameter, while the horizontal laser marked bands on the active section corresponds to the different lengths.



Probe

Check the depth of the surgical site, especially when not using drill stops. To check the surgical bed axis, the direction indicator pins are available in different diameters according to the drilling sequence.

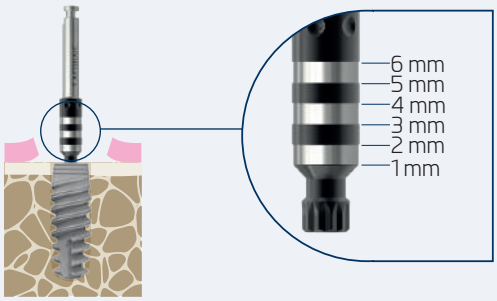


VPress insertion keys - DLC surface

The VPress Insertion key for contra-angle handpieces or ratchets has been especially designed for transporting Galaxy implants from their No-Mount vial to the surgical site ready for insertion.

Short and long insertion keys for torque wrench and contra-angle handpieces.

Depth within the implant platform marked on the insertion keys



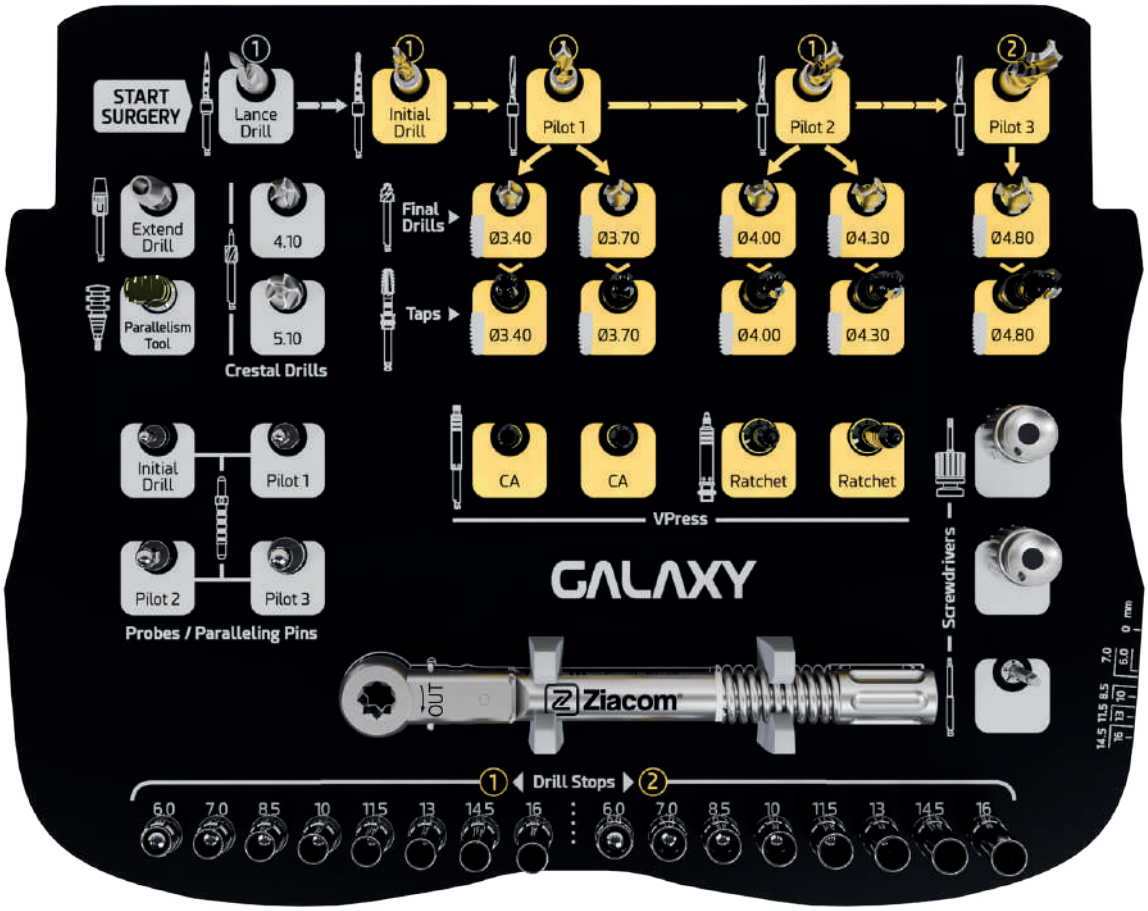
Drill stops

These are a surgical accessory that attach to drills and facilitate the work as they determine the depth of the osteotomy, providing extra assurance when preparing the surgical site.

Surgical protocol

Features of the Galaxy drilling system

Internal view of the Galaxy surgical box



Recommendations on the maximum implant insertion torque

50 Ncm

The recommended insertion torque ranges between **35** and **50 Ncm** on a case-by-case basis.

To avoid deforming the key and/or implant connection, insertions performed with a contra-angle handpiece (CA) must respect the recommended maximum rpm (25 rpm) and maximum torque (50 Ncm).

If the implant cannot be fully inserted using the recommended maximum torque, withdraw the implant, repeat the drilling and then re-insert it.

Check the final insertion torque with the adjustable dynamometric ratchet Ref. TORK50 or a contra-angle handpiece.

Exceeding the maximum torque (50 Ncm) when inserting the implant may result in:

- Irreversible deformations in the implant's internal connection.
- Irreversible deformations in the implant insertion instruments.
- Difficulty or impossibility in dismounting the instrument/implant assembly.

Galaxy implant

It is important to note that the drilling protocol for Galaxy implants varies significantly based on the implant diameter and the type of bone at the surgical site, and therefore it is important to pay special attention to these two aspects.

GALAXY

- **EXAMPLE:**

Galaxy implant

Ø4.80x11.50mm

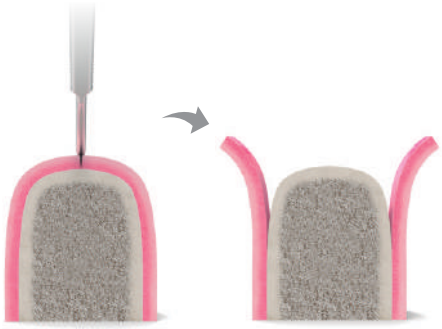
RP (Ø 4.80 mm)

Platform Ø 2.85mm

High-density drilling protocol steps (D1 - D2*)

PRELIMINARY STEP | Opening the gum

Make an incision and raise the flap.



STEP 1 | Lance drill

Start the implant site drilling sequence using the Lance Drill Ref. SID001M. Be aware of the laser marking on the drill to indicate the length, or use drill stop, Ref. GTPD115. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

STEP 2 | Initial drill

Continue the drilling sequence using Initial Drill Ref. OTD100C, until the total length of the chosen implant is reached. Be aware of the laser marking on the drill that indicates the length, or use the drill stop Ref. GTPD11. Monitor the direction and inclination of the drilling, exerting pressure intermittently, always in a vertical direction, taking care not to generate excessive pressure on the bone. If necessary, use drill extender Ref. DEXT10.

STEP 3 | Initial Drill Probe/Paralleling pin

Check the depth of the surgical site and the insertion axis by inserting the Probe/Paralleling pin Initial Ref. MUR100G3. Repeat this step as many times as necessary during the surgery.

Surgical protocol

STEP 4 | Pilot drill 1

Continue the drilling sequence using Pilot drill 1 Ref. OTD101C until the length of the chosen implant is reached. Be aware of the laser marking on the drill to indicate the length, or use drill stop, Ref. GTPD115. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

NOTE
Once this step has been completed, to fit an implant with diameter:
- **Ø3.40 mm** > Final Drill 1 Ref. OTD200C + Tap GTAP34MC
- **Ø3.70 mm** > Final Drill 2 Ref. OTD300C + Tap GTAP37MC

STEP 5 | Pilot Probe/Paralleling pin

Check the depth of the surgical site and the insertion axis by inserting the Probe/ Paralleling pin Pilot 1 Ref. MUR200G3. Repeat this step as many times as necessary during the surgery.

STEP 6 | Pilot drill 2

Continue the drilling sequence using Pilot Drill 2 Ref. OTD102C until the length of the chosen implant is reached. Be aware of the laser marking on the drill to indicate the length, or use drill stop, Ref. GTPD115. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

NOTE
Once this step has been completed, to fit an implant with diameter:
- **Ø4.00 mm** > Final Drill 3 Ref. OTD400C + Tap GTAP40MC
- **Ø4.30 mm** > Final Drill 4 Ref. OTD500C + Tap GTAP43MC

STEP 7 | Probe/Paralleling pin Pilot 2

Check the depth of the surgical site and the insertion axis by inserting the Probe/ Paralleling pin Pilot 2 Ref. MUR300G3. Repeat this step as many times as necessary during the surgery.

STEP 8 | Pilot drill 3

Continue the drilling sequence using Pilot Drill 3 Ref. OTD103C until the length of the chosen implant is reached. Be aware of the laser marking on the drill to indicate the length, or use drill stop, Ref. GTPD115. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

STEP 9 | Final Drill 5

Continue the drilling sequence using Final Drill 5 Ref. OTD600C up to the length corresponding to the cortical bone thickness, according to individual clinical case. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

STEP 10 | Surgical tap Ø4.80

Place the Ø4.80mm surgical tap, Ref. GTAP48MC in the surgical site. Apply firm pressure and start to turn slowly. Once threads engage, continue to screw the tap in without pressure to the planned depth. If excessive resistance is met, turn 90º anti-clockwise after each complete turn. To remove the tap, turn it anti-clockwise. While using the tap, it is recommended that you pass it along the entire length of the implant.

Important notes: Type D2* Bone Density

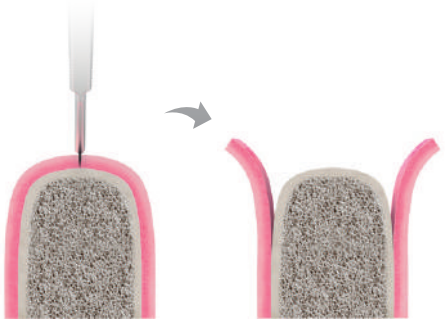
In the case of type D2 bone density, the surgical drilling protocol indicated for type D1 bone density should be followed, leaving out the use of the Surgical Tap on any of the implant diameters. Nevertheless, it is up to the discretion of the professional to decide on full or partial use the Surgical Tap, based on their clinical experience and the identification of the density of the existing bone at the site. This is particularly relevant in cases where the bone density varies significantly along the length of the osteotomy for the implant.

Surgical protocol

Low-density drilling protocol steps (D3 - D4**)

PRELIMINARY STEP | Opening the gum

Make an incision and raise the flap.



STEP 1 | Lance Drill

Start the implant site drilling sequence using the Lance Drill Ref. SID001M. Be aware of the laser marking on the drill to indicate the length, or use drill stop, Ref. GTPD115. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

STEP 2 | Initial drill

Continue the drilling sequence using Initial Drill Ref. OTD100C, until the total length of the chosen implant is reached. Be aware of the laser marking on the drill that indicates the length, or use the drill stop Ref. GTPD11. Monitor the direction and inclination of the drilling, exerting pressure intermittently, always in a vertical direction, taking care not to generate excessive pressure on the bone. If necessary, use drill extender Ref. DEXT10.

NOTE
Once this step has been completed, to fit an implant with diameter:
- **Ø3.40 mm** > Final Drill 1 Ref. OTD200C
- **Ø3.70 mm** > Final Drill 2 Ref. OTD300C

STEP 3 | Initial Probe/Paralleling pin

Check the depth of the surgical site and the insertion axis by inserting the Initial Probe/Paralleling pin indicator pin Ref. MUR100G3. Repeat this step as many times as necessary during the surgery.

STEP 4 | Pilot drill 1

Continue the drilling sequence using Pilot drill 1 Ref. OTD101C until the length of the chosen implant is reached. Be aware of the laser marking on the drill to indicate the length, or use drill stop, Ref. GTPD115. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

NOTE
Once this step has been completed, to fit an implant with diameter:
- **Ø4.00 mm** > Final Drill 3 Ref. OTD403C
- **Ø4.30 mm** > Final Drill 4 Ref. OTD500C

STEP 5 | Probe/Paralleling pin Pilot 1

Check the depth of the surgical site and the insertion axis by inserting the Probe/Paralleling pin Pilot 1 Ref. MUR200G3. Repeat this step as many times as necessary during the surgery.

STEP 6 | Pilot drill 2

Continue the drilling sequence using Pilot drill 2 Ref. OTD102C until the length of the chosen implant is reached. Be aware of the laser marking on the drill to indicate the length, or use drill stop, Ref. GTPD115. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

STEP 7 | Probe/Paralleling pin Pilot 2

Check the depth of the surgical site and the insertion axis by inserting the Probe/ Paralleling pin Pilot 2 Ref. MUR300G3. Repeat this step as many times as necessary during the surgery.

STEP 8 | Final Drill 5

Continue the drilling sequence using Final Drill 5 Ref. OTD600C up to the length corresponding to the cortical bone thickness, according to individual clinical case. Control the direction and angle of drilling by applying intermittent pressure vertically, taking care not to exert too much pressure on the bone. If necessary, use drill extender Ref. DEXT10.

Important notes: Type D4** Bone Density

In the case of type D4 bone density, the surgical drilling protocol indicated for type D3 bone density should be followed, leaving out the use of the last Final Drill for each of the implant diameters. Nevertheless, it is up to the discretion of the professional to decide to use the last Final Drill fully or partially, based on their clinical experience and the identification of the density of the existing bone at the site. This is particularly relevant in cases where the bone density varies significantly along the length of the osteotomy for the implant.

Surgical protocol

Implant insertion with Ziacom® No Mount | **Titansure**

Ziacom® No Mount

Surface treatment

Titansure

STEP 1 | Unpacking the implant

1.1 Press the word "PRESS" and open the carton.

1.2 Remove the top of the carton and take out the blister pack.

1.3 Carefully remove the seal from the blister pack.

1.4 Turn the vial containing the implant onto a sterile cloth in the operating area.

1.5 Hold the vial upright with one hand. Remove the cap by turning and lifting it.

1.6 Remember to remove the label from the implant and to adhere it to the patient's implant card and medical record to ensure that the product is traceable.

STEP 2 | Choosing the right insertion instrument

Based on the specific clinical situation and access to the surgical site, one of three different instruments can be selected to insert the implant:

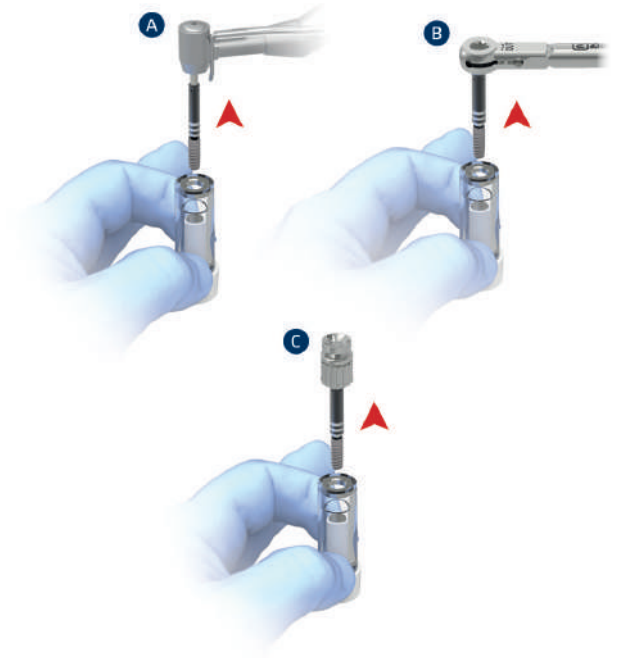
A **Contra-angle.** Use the VPress insertion key. CA of the preferred length Ref. SMRGV1 or LMRGV1. and insert it into the contra-angle.

B **Torque wrench Ref. TORK50.** Use the VPress insertion key. Torque wrench/ Manual of the preferred length Ref. SMRGV or LMRGV. and insert it into the torque wrench set to function "IN".

C **4X4 screwdriver handle Ref. MADW10.** Use the VPress insertion key. Torque Wrench/Manual of the desired length Ref. SMRGV or LMRGV. and insert it into the screwdriver handle.

STEP 3 | Removing the implant from its vial

Hold the vial containing the implant upright in one hand and insert the selected insertion key into the implant with the other hand. Remove the implant by lifting it vertically out of the vial.



Implant insertion with Ziacom® No Mount | **Titansure Active**

Ziacom® No Mount

Surface treatment

Titansure Active

STEP 1 | Unpacking the implant

1.1 Press the word "PRESS" and open the carton.

1.2 Remove the top of the carton and take out the blister pack.

1.3 Carefully remove the seal from the blister pack.

1.4 Turn the vial containing the implant onto a sterile cloth in the operating area.

1.5 Hold the vial upright with one hand. Remove the cap by turning and lifting it.

NOTE: Take care when opening the vial as the implant is submerged in a bioactive liquid.

1.6 Remember to remove the label from the implant and to adhere it to the patient's implant card and medical record to ensure that the product is traceable.

NOTE: Do not reuse any leftover liquid.

STEP 2 | Choosing the right insertion instrument

Based on the specific clinical situation and access to the surgical site, one of three different instruments can be selected to insert the implant:

A **Contra-angle.** Use the VPress insertion key. CA of the preferred length Ref. SMRGV1 or LMRGV1 and insert it into the contra-angle.

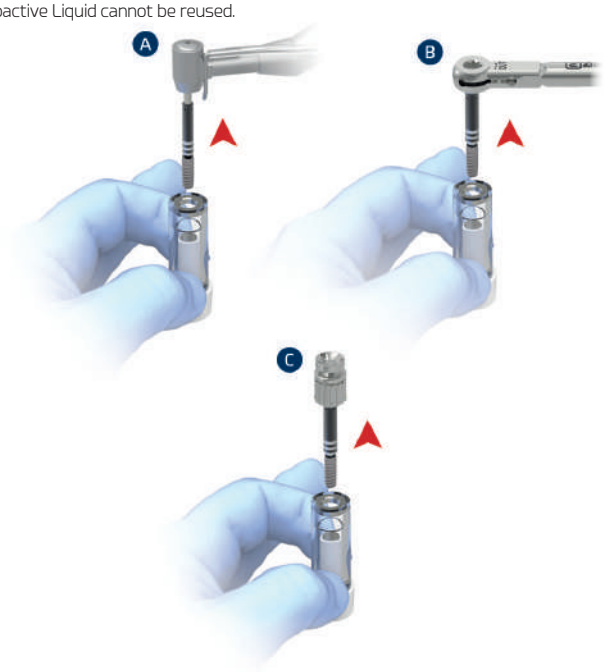
B **Torque wrench Ref. TORK50.** Use the VPress insertion key. Torque wrench/ Manual of the preferred length Ref. SMRGV or LMRGV and insert it into the torque wrench set to function "IN".

C **4X4 screwdriver handle Ref. MADW10.** Use the VPress insertion key. Torque Wrench/Manual of the desired length Ref. SMRGV or LMRGV and insert it into the screwdriver handle.

STEP 3 | Removing the implant from its vial

Hold the vial containing the implant upright in one hand and insert the selected insertion key into the implant with the other hand. Remove the implant by lifting it vertically out of the vial.

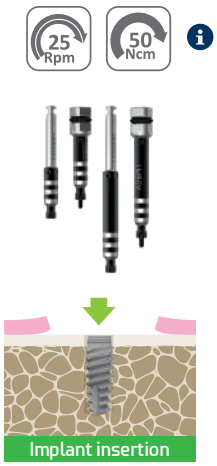
NOTE:
Take care when opening the vial so as not to spill the Bioactive Liquid. Leftover Bioactive Liquid cannot be reused.



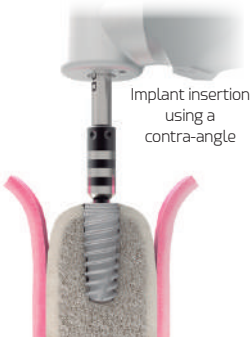
Surgical protocol

Galaxy implant insertion

STEP 4 | Inserting the implant



SMRGV / LMRGV
SMRGV1 / LMRGV1



When inserting the implant with a contra-angle, use a maximum speed of 25 rpm.

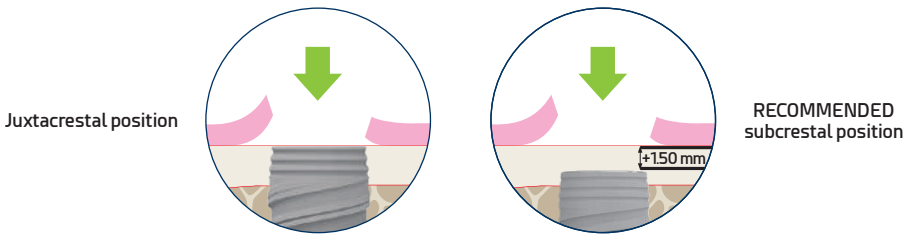
The recommended insertion torque ranges from 35 to 50 Ncm.

If resistance is met during insertion, turn the implant anti-clockwise and then continue to insert after waiting a few seconds. Repeat this process as many times as necessary.

IMPORTANT
The maximum insertion torque for the dental implants is **50 Ncm**. Exceeding the maximum insertion torque indicated for the implants may cause severe damage to the dental implant and its connection. Check the specifications in the surgical protocol according to the type of implant connection and the bone type.

STEP 5 | Crestal placement of the implant

The drilling protocols are described so that the platform for the Galaxy implants is juxtacrestal. However, it is advisable to leave the platform at +1.5mm subcrestally.



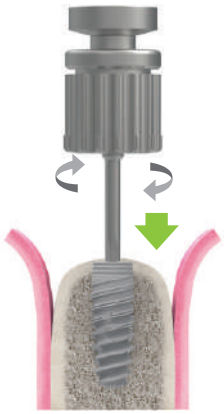
Subcrestal position

- Improves mucosal preservation.
- Improves the thickness of the keratinised tissue.
- Suggests improved bone preservation when combined with tapered connection.
- Helps obtain an ideal emergence profile in aesthetic areas.
- Prevents the implant surface from being exposed, which can facilitate bacterial growth, preservation of the crestal bone.
- Prevents fibrous connective tissue formation at the implant interface.
- Better preservation of the crestal bone.
- Allows abutments with a greater height to be used. Recommended to preserve slim-biotype bone tissue (≤1.0 mm) at the gingiva.
- Reduces the risk of suffering peri-implant pathologies.

Galaxy implant insertion

Soft tissue conditioning

STEP 1 | Placing the cover screw



Bring the cover screw towards the implant with the manual surgical screwdriver, Ref. SMSD or LMSD, preventing it from falling and accidentally being swallowed. Insert the screw into the implant until it locks, applying manual torque in a clockwise direction.

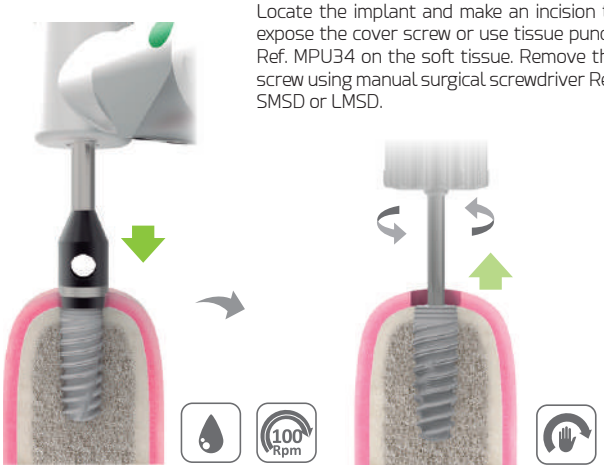
The placement of a cover screw requires a second surgical procedure to uncover the implant and place the desired abutment.

Based on each individual case, you can choose not to place a cover screw but instead to directly attach a healing abutment.

STEP 2 | Closing the soft tissue

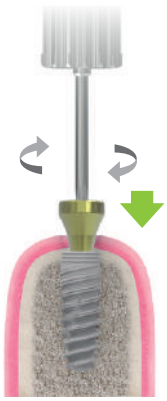
Close and suture the soft tissue, carefully lining up the flaps.

STEP 3 | Exposing and extracting the cover screw



Locate the implant and make an incision to expose the cover screw or use tissue punch Ref. MPU34 on the soft tissue. Remove the screw using manual surgical screwdriver Ref. SMSD or LMSD.

STEP 4 | Placing the healing abutment



Insert the chosen healing abutment using manual surgical screwdriver Ref. SMSD or LMSD.

The choice of healing abutment will depend on each individual case. It should match the implant platform and also the height of the gingival tissue in order to prevent occlusion of the abutment. If the abutment is too tall, it may subject the implant to premature loading, compromising the osseointegration process.

Surgical protocol

Bone types

Misch classification (1988)

TYPE **D1** BONE

- Dense cortical and dense trabecular bone.
- > 1250 HU

TYPE **D2** BONE

- Porous cortical and dense trabecular bone.
- 850 - 1250 HU

TYPE **D3** BONE

- Porous cortical and fine trabecular bone.
- 350 - 850 HU

TYPE **D4** BONE

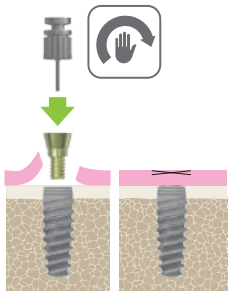
- Thin crestal cortical and fine trabecular bone.
- 150 - 350 HU

HU = Hounsfield Units

IMPORTANT
In order to simplify the surgical drilling protocols, we have created quick drilling guides, in which the criteria for bone types are amalgamated, with D1-D2 treated as "High-Density" bone, and D3-D4 bone types as "Low-Density" bone .

Handling of cover screw

Place the cover screw in the screwdriver. Move the cover screw towards the implant while taking care not to drop it and cause its accidental ingestion. Insert it into the implant applying manual torque in a clockwise direction.



Considerations for temporisation and immediate loading

Immediate temporisation and immediate loading are procedures that involve the placement of the prosthesis within 72 hours after implant surgery. The fundamental difference between these procedures is whether or not the prosthesis will have a functional load.

Adequate primary stability of the implant at the time of insertion is crucial to consider placing a provisional or immediately loaded prosthesis. This stability can be objectively measured by the insertion torque, which must be equal to or greater than 40-45 Ncm or by analysing the resonance frequency (ISQ value), which should be greater than or equal to 70.

IMMEDIATE TEMPORISATION

Immediate temporisation involves thorough monitoring of occlusion, both in central (closed) position, and during lateral or dynamic movements that occur during mastication. By freeing the provisional from any contact in these situations, the transfer of forces to the implant is prevented.

The main objectives of immediate temporisation are:

- Immediate closure of edentulous spaces in aesthetic areas.
- Guided regeneration of the gingival emergence profile due to the presence of the provisional crown or bridge.

IMMEDIATE LOADING

The principle of immediate loading involves the controlled transfer of contact from the moment of placement of the restoration while the restoration is in occlusion; therefore we distinguish between:

- Progressive immediate loading, using an acrylic provisional restoration as the initial restoration (released in dynamic occlusion).
- Definitive immediate loading, with rigid material and active occlusion from day one.

Both processes involve risks to the success of the osseointegration of the implant, so it is up to the practitioner, based on clinical experience and the case in question, whether or not to place an immediate provisional restoration and/or immediate loading.

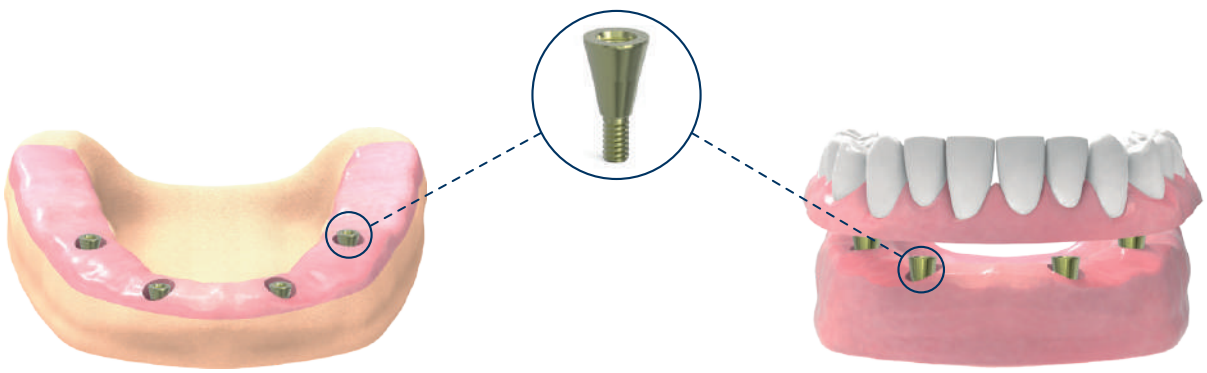
Restorations using transepithelials

Transepithelial abutments

- Allows the peri-implant tissue to form from the initial 8 weeks.
- One abutment-one time, allows gingival adhesion to its surface as repeated detachments are not necessary.
- Avoids bone and soft tissue loss as there is no mechanical rupture of the peri-implant interface.
- The prosthetic working area is above the gingival level, making the soft tissue adhesive behaviour more predictable, maintaining a good seal.
- Less formation of micro-gaps at the implant-prosthesis junction.
- Increased crestal bone preservation.
- Prosthetic try-ins and definitive placement without anaesthesia.
- If the recommended torques are exceeded, the screw suffers the fracture at transepithelial level and not inside the implant.

Abutment heights

- Greater abutment height means more marginal bone is preserved in cemented prostheses.
- Higher abutments (≥2mm) provide better soft tissue adaptation.
- Short abutments (< 2 mm) can compromise the soft tissues, resulting in more crestal bone loss.
- Marginal bone loss will differ depending on the clinical decision on the abutment height. Generally, prosthetic abutments ≥2mm will lead to better preservation of crestal bone.



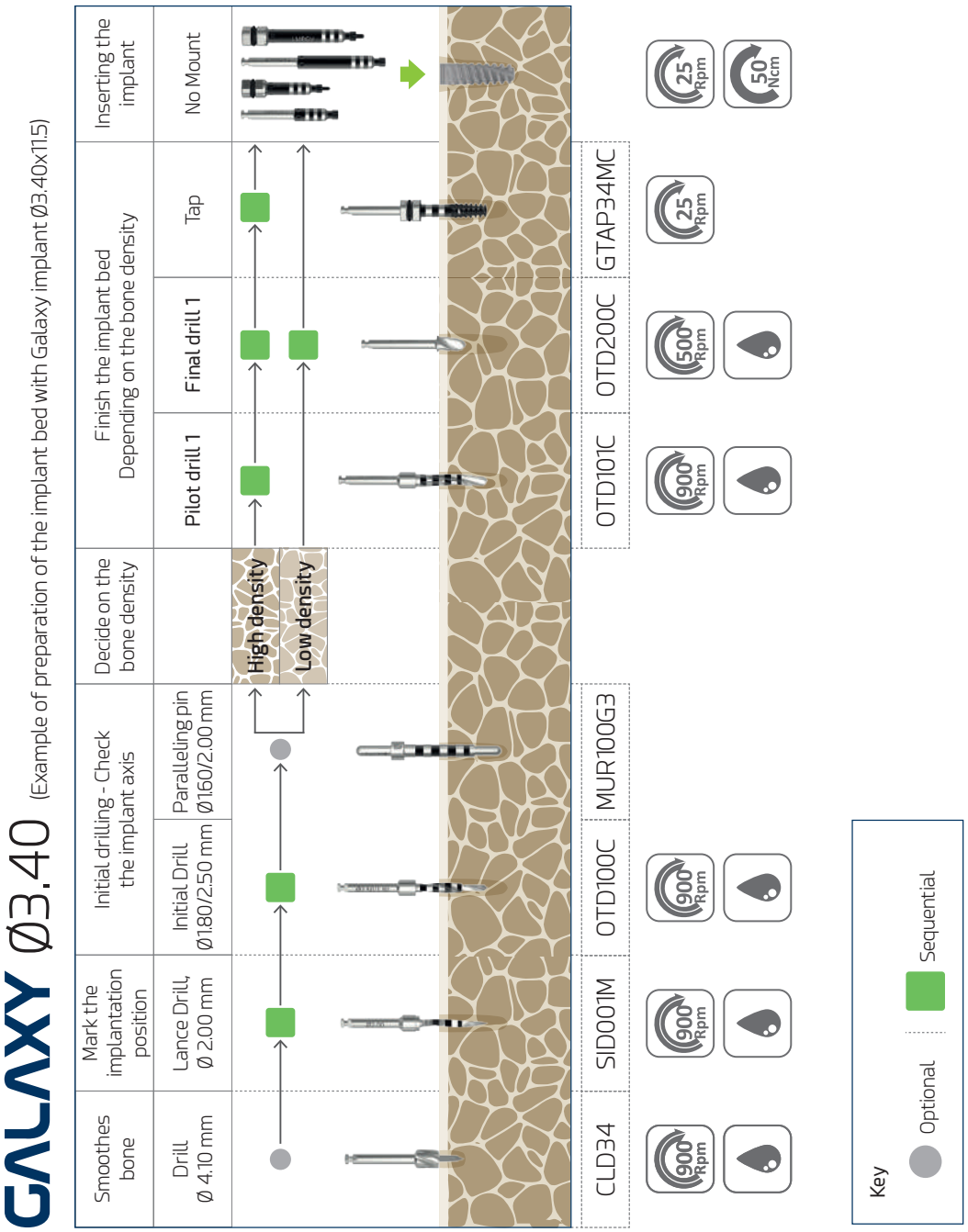
Simplified surgical protocol

These surgical guides have been designed with a simplified surgical protocol to perform simple and efficient drilling of the surgical site. Nevertheless, for more details about the drilling options according to the different bone densities, you can view the (complete) surgical protocol pages 59-63 for a Ø4.80 x 11.50 mm implant in the four bone densities: high density (D1 - D2) and low density (D3 - D4).

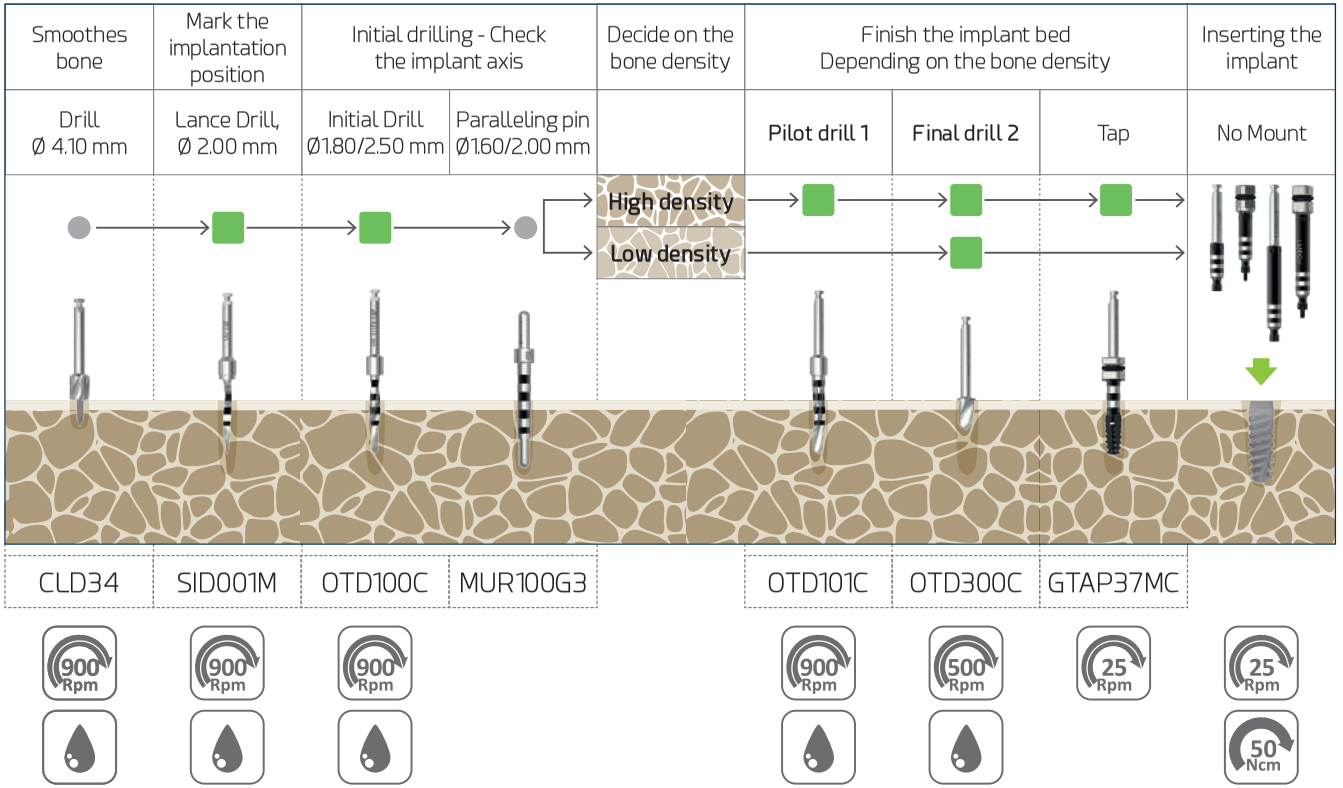
Drilling protocol - Ziacom® No-Mount

Rotation | Irrigation required | Ø Drill diameter | Torque

Detailed speeds are recommended



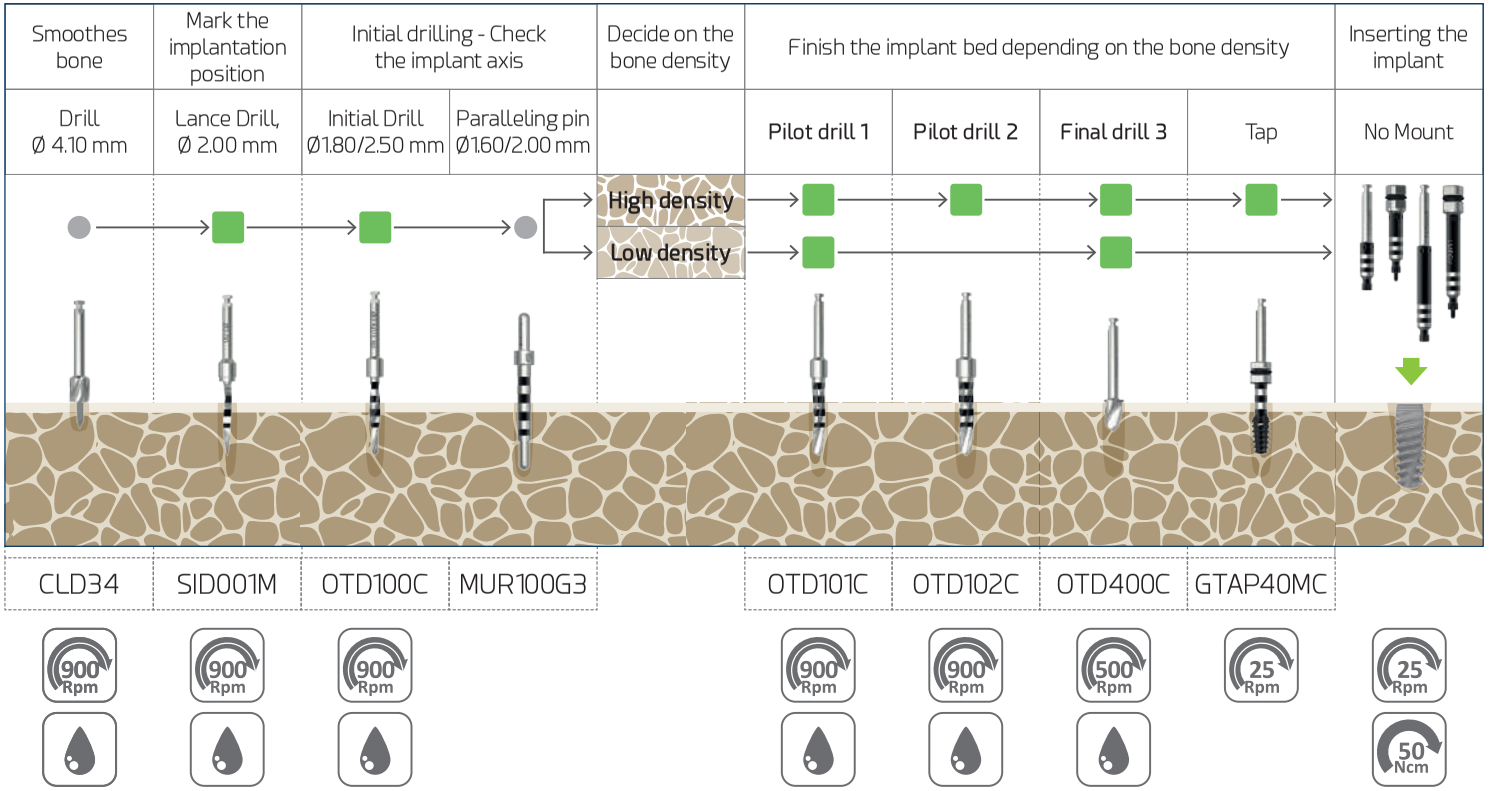
GALAXY Ø3.70 (Example of preparation of the implant bed with Galaxy implant Ø3.70x11.5)



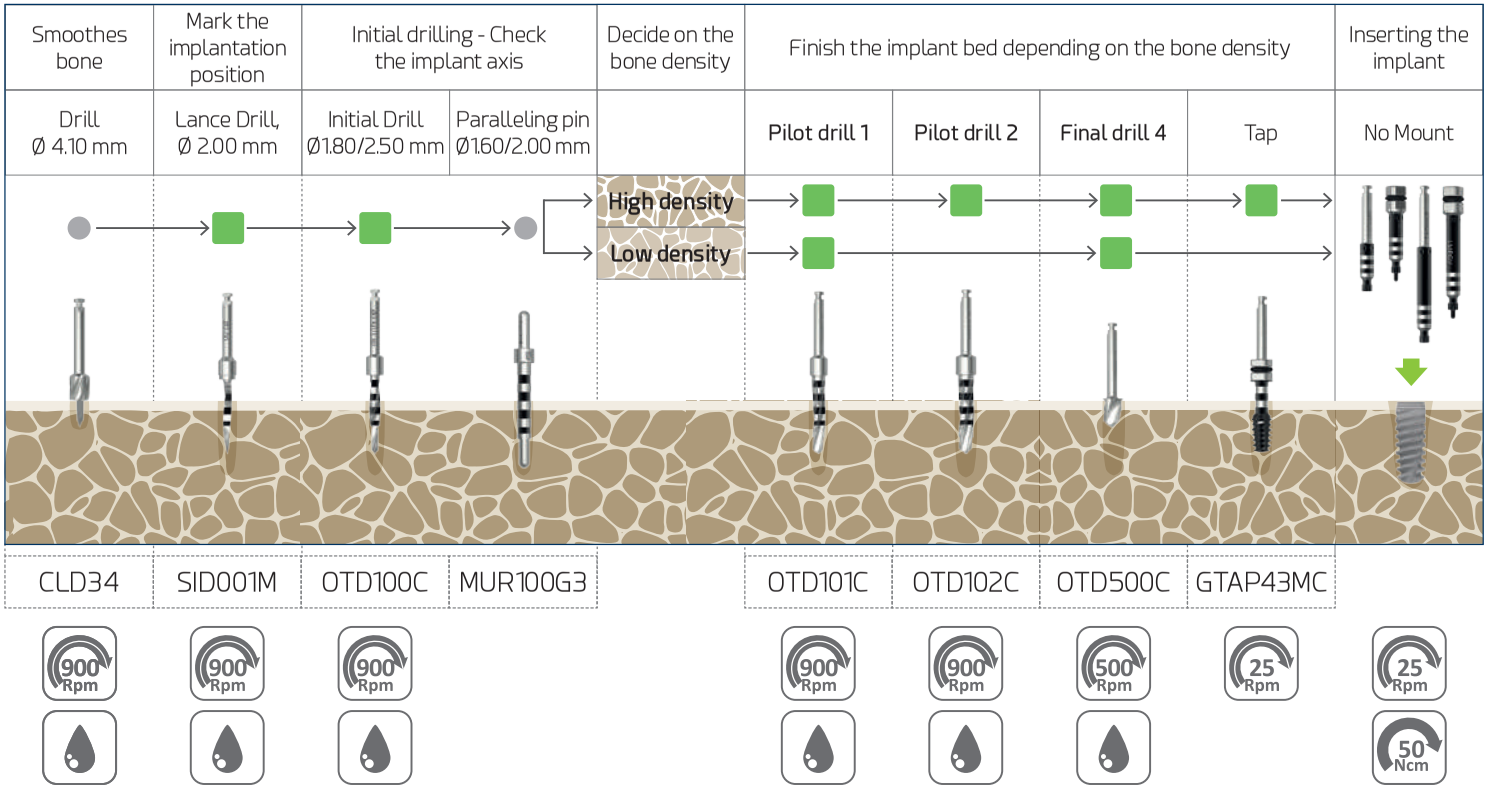
Key

Optional | Sequential

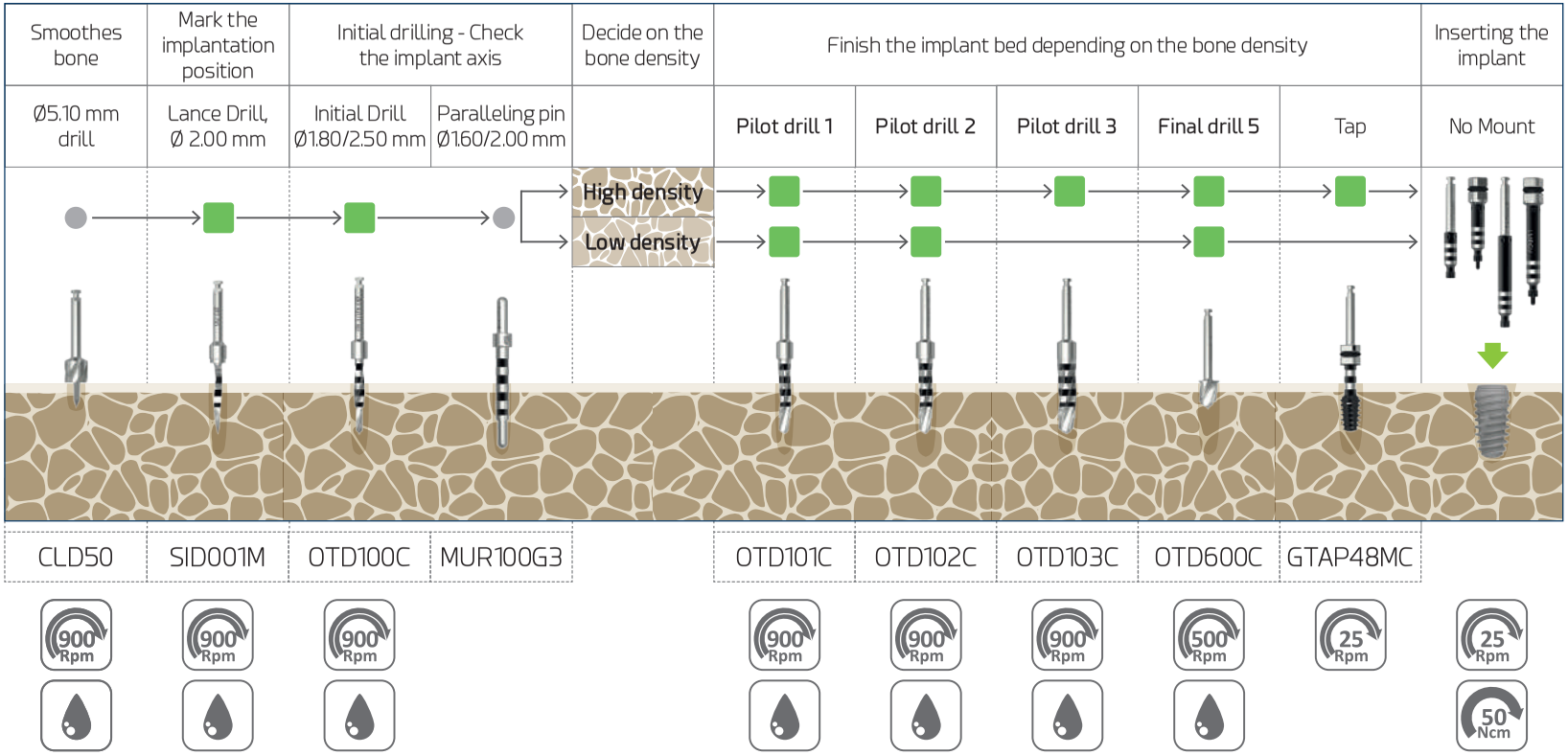
GALAXY Ø4.00 (Example of preparation of the implant bed with Galaxy implant Ø4.00x11.5)



GALAXY Ø4.30 (Example of preparation of the implant bed with Galaxy implant Ø4.30x11.5)



GALAXY Ø4.80 (Example of preparation of the implant bed with Galaxy implant Ø4.80x11.5)



Key

Optional | Sequential

General recommendations

Points to consider during the procedure

1. Surgical drills must be inserted into the contra-angle handpiece with the motor stopped, ensuring that they are seated and rotate properly before starting drilling. Treat drills with the utmost care; the slightest damage to the tips could compromise their effective operation.

2. Damaged instruments must be disposed of according to local regulations.

3. Implantologists should keep one of the identification labels supplied with the product in the patient's records so that the product can be traced correctly.

4. Each instrument must only be used for the specific use recommended by the manufacturer.

Always consult the surgical and prosthetic protocols published in this catalogue, as well as the other documents available in the "Reference literature" section of our website **www.ziacom.com/biblioteca** which explain the procedures, protocols and instructions for use before using the Ziacom® Galaxy system.


GALAXY

Cleaning, disinfection and sterilisation

Cleaning, disinfection and sterilisation

The protocols described in this section must only be carried out by personnel qualified to clean, disinfect and sterilise the dental materials specified herein.

Cleaning and disinfection instructions

Applicable for surgical and prosthetic instruments and boxes.

Disassembly

1. Disassemble* the instruments that need to be cleaned and disinfected, such as manual ratchets, drills or drill stops.
2. Remove all the different components from the surgical or prosthetic kit box for correct cleaning.

Cleaning and disinfection

For disinfection of instruments and surgical kit boxes:

1. Submerge the instruments in a detergent/disinfectant solution** suitable for dental instruments to help eliminate any adhered biological residues. If an ultrasound bath is available***, confirm that the detergent/disinfectant solution is indicated for use with this type of equipment.
2. Manually remove any biological residues with a non-metallic brush and pH-neutral detergent.
3. Rinse with copious water.
4. When cleaning surgical and prosthetic kit boxes, always use a pH-neutral detergent and non-abrasive tools to avoid damaging the surface of the boxes.
5. Dry the materials with disposable, lint-free, cellulose cloths or compressed air.

For disinfection of plastic caps and the protective disk:

1. Submerge for 10 minutes in a neat benzalkonium chloride solution.
2. Rinse with distilled water.
3. Dry the caps and disk prior to use.

Inspection

1. Check that the instruments are perfectly clean; if not, repeat the cleaning and disinfection steps.
2. Discard any instruments with imperfections and replace them before the next surgery.
3. Check that the instruments and surgical and prosthetic kit boxes are perfectly dry before reassembling the parts and proceeding with sterilisation.

* See the assembly and disassembly manuals at **www.ziacom.com/biblioteca**

** Follow the instructions from the disinfectant's manufacturer to determine the correct concentrations and times.

** Follow the instructions from the ultrasound bath's manufacturer to determine the correct temperature, concentration and times.

Sterilisation instructions for steam autoclaves

Applicable to orthodontic implants, abutments, kit, surgical and prosthetic boxes, pins, fixing screws and mesh membranes.

1. Place the material in individual sterilisation pouches and seal the pouches. For joint sterilisation, place the instruments in their surgical kit box, place the box in a sterilisation pouch and seal the pouch.
2. Place the pouches to be sterilised in the autoclave.
3. Sterilise in a steam autoclave at 134°C/273°F (max. 137°C/276°F) for 4 min (minimum) at 2 atm. Dynamometric torque wrenches must be sterilised in 3 vacuum cycles at 132°C/270°F for at least ≥ 4 minutes and vacuum dried for at least 20 minutes.

For the United States only: The validated and recommended sterilisation cycle for the US must be performed in a steam autoclave at 132ºC/270°F for at least 15 minutes with a drying time of at least 15–30 minutes.

IMPORTANT
Make sure the drying stage is allowed to run to completion, otherwise the products may be damp.
Check the sterilisation equipment if the materials or sterilisation pouches are damp at the end of the sterilisation cycle.
Perform the necessary maintenance actions on the autoclave according to the established periodicity and following the manufacturer's instructions.

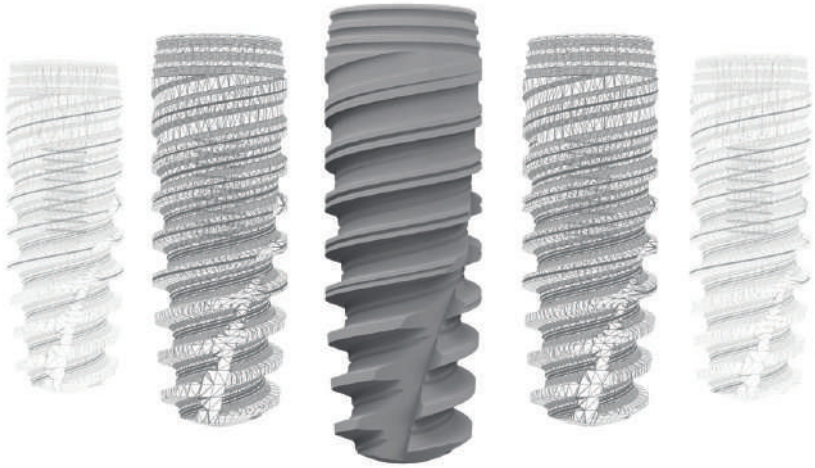
Storage of Ziacom® products

- Store the products in their original packaging in a clean, dry place until they are to be used.
- After sterilisation, keep the products in the sealed sterilisation pouches in a clean, dry location.
- Never exceed the use by date indicated by the manufacturer of the sterilisation pouches.
- Always follow the instructions of the manufacturer of the sterilisation pouches.

General recommendations

- Never use damaged or dirty material; never reuse single-use products. The user is responsible for following the instructions described in this document correctly.
- Pay attention to piercing or sharp elements. Gloves should be worn when cleaning the materials to avoid accidents during handling.
- Follow the safety instructions indicated by the manufacturer of the disinfectant.
- The product's sterility cannot be guaranteed if the sterilisation pouch is open, damaged or damp.
- Respect all stages of the sterilisation process. If the materials or sterilisation pouches contain traces of water or moisture, check the autoclave and repeat the sterilisation.
- Orthodontic abutments and implants are supplied UNSTERILISED and must always be sterilised before use.
- Instruments and surgical and prosthetic kit boxes are supplied UNSTERILISED and must always be sterilised before use and cleaned and disinfected after use.
- Sterilisation, cleaning and disinfection processes gradually deteriorate the instruments. Inspect the instruments thoroughly to detect any signs of deterioration.
- Avoid contact between products made from different materials (steel, titanium, etc.) during the cleaning, disinfection and sterilisation processes.
- Ziacom Medical SL recommends these instructions are implemented for the correct maintenance and safety of their products; accordingly, the company refuses any liability for any damage to the products that could arise if the user applies alternative cleaning, disinfection and sterilisation procedures.

See the latest version of the cleaning, disfection and sterilisation instructions at **www.ziacom.com/biblioteca**



Ziacom®

See the updated general conditions of sale at **www.ziacom.es**.

Check the availability of each product in your country.

See the latest version of the catalogues at **www.ziacom.es**.

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