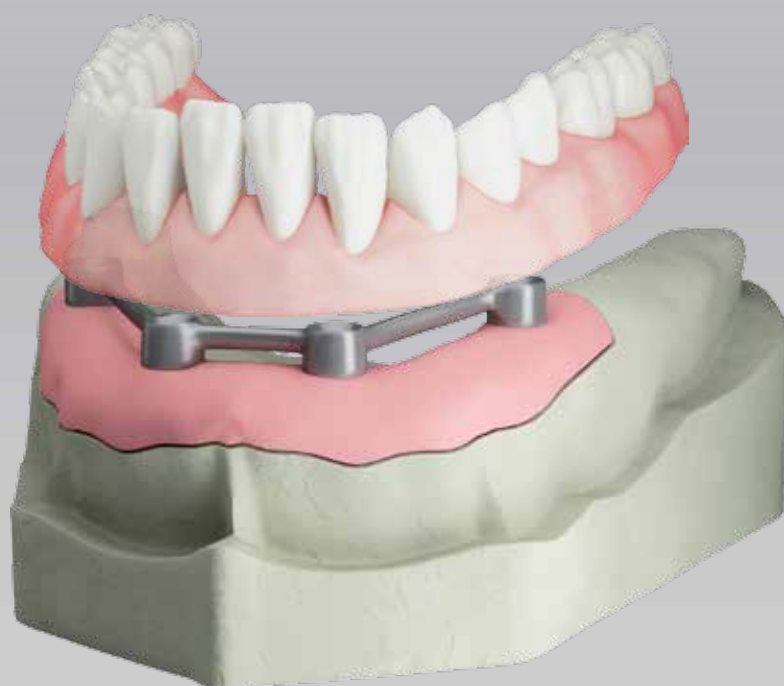


PP

**PROSTHETIC
PROCEDURES**
catalogue



C-TECH
IMPLANT

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PP- PROSTHETIC PROCEDURES

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PRECISION DENTAL SOLUTIONS

C-Tech Implant is a dynamic company with aggressive growth, producing components and product lines primarily for dental implantology.

INTERNATIONAL PRESENCE

With production and management based in Italy, C-Tech Implant is active in all major world markets and is distributed in over 20 countries.

SCIENTIFIC RESEARCH, ADVANCED TECHNOLOGY, SIMPLIFICATION

C-Tech Implant differentiates itself with attention to research and the application of high technology to its products, all while maintaining a simplicity of insertion and ease of use.

C-Tech Implant incorporates the latest trends in implantology but providing for very practical surgical and prosthetic solutions aimed at offering the practitioner and the patient optimal results.

HIGH QUALITY STANDARDS KEPT WITHIN REACH

C-Tech Implant products are made to the highest standards governing the manufacturing and management of European medical and dental components.

Up to date audits and certifications assure that these standards are vigilantly maintained.

TRAINING & ADVICE

Dental professionals are assisted by the rich knowledge and experience of C-Tech Implant personnel and through C-Tech courses and training sessions.

During these courses the professional is able to learn the latest methods of implant placement and reconstruction.

MISSION STATEMENT

The goal of C-Tech Implant is to provide the highest level of quality for technologically advanced products at reasonable prices in order to allow the dental practitioner to find solutions for the broadest range of patients.

EL/BL MORSE TAPER LOCKING CONNECTION

CONCAVE ESTHETIC CONCEPT

- Non surgical thickening of the peri-implantary tissue
- Facilitating the papilla reconstruction-technique

PLATFORM SWITCHING

- Reduces bone loss
- Better representation of the biological width
- Long term esthetic stability

COLD WELD SEAL

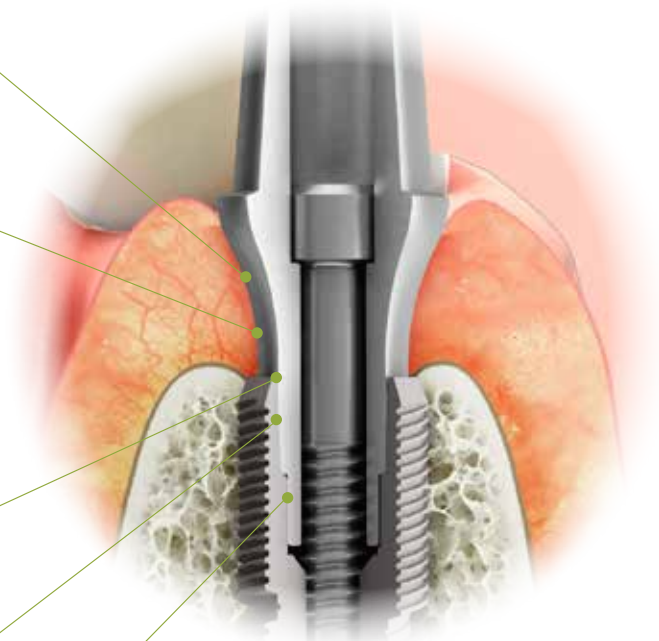
- Hinders bacterial infiltration and consequent bone loss

MORSE LOCKING CONICAL CONNECTION

- Elimination of micro-movements
- Elimination of screw loosening

INDEXING HEX

- Anti-rotational security



ONE CONNECTION FOR ALL 3 DIAMETERS

- Simplifies the system
- Reduces inventory
- Ease of use

ABUTMENT EXTRACTOR SCREW

The implant/abutment connection of the EL and BL systems is a Morse locking connection. This means that after the abutment has been inserted in the implant or the analog and the internal hex screw has been tightened to 30Ncm and then the screw itself has been loosened it will still be impossible to remove the abutment without the extractor instrument due to the cold welding effect. In order to remove the abutment, the BL-6060 or the BL-6061 needs to be inserted in place of the internal hex screw and turned until it pushes the abutment out.



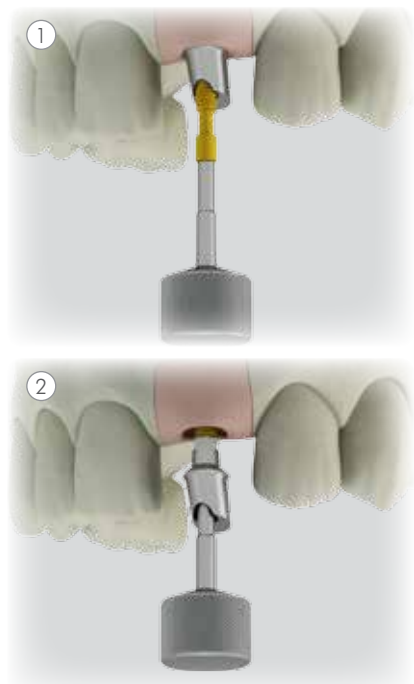
CT-E7003
Finger/Ratchet adapter
for latch drivers



BL-6060
Prosthetic extractor



BL-6061
Latch driver
prosthetic extractor



EL OPEN TRAY IMPRESSION TAKING



EL-4544
Open tray
Impression post includes
the BL-5050L guide screw



BL-5143
Analog



BL-5050L
Guide screw for open tray
impression post



BL-5050S
Short guide screw for open tray
impression post

OPEN TRAY TRANSFER PROCEDURE

STEP 1

Place the impression post accurately into the implant and hand-tighten the guide screw.

STEP 2

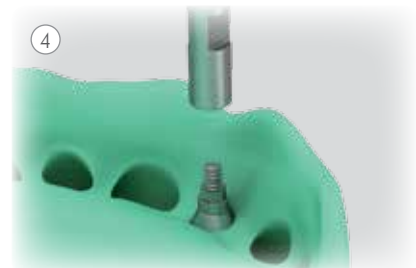
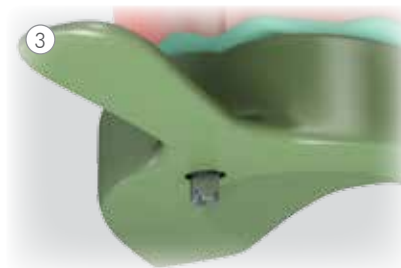
Make perforations in the custom-made impression tray (light cured resin) according to the individual situation so that the positioning screw of the impression post protrudes.

STEP 3

Take the impression using an elastomeric impression material (polyvinyl siloxane or polyether rubber).

STEP 4

Reposition and fix the analog in the impression using the screw.



EL/BL CLOSED TRAY IMPRESSION TAKING



BL-4546
Peek Impression Cap



EL-4502P EL-5502P
EL-4503P EL-5503P
EL-4504P EL-5504P
EL-4506P EL-5506P

EL PEEK abutments together with the snap on BL-4546 cap function as impression transfers



EL-5502F EL-4502F
EL-5503F EL-4503F
EL-5504F* EL-4504F*
EL-5506F* EL-4506F*

EL Titanium Abutments together with the snap on BL-4546 cap function as impression transfers



BL-5143
Analog



BL-5052HX
Short Screw
EL-5052HXL
Long Screw



BL-4543
Peek Impression Cap



BL-4540
Impression Transfer Post
Closed/tray
includes impression
cap (BL-4543)
includes screw



BL-4540L
Impression Transfer Post
Closed/tray/long
includes impression
cap (BL-4543)
includes screw

STEP 1

Place the impression post accurately into the implant and hand-tighten the guide screw.



STEP 2

Push the impression cap at the top of the impression transfer.



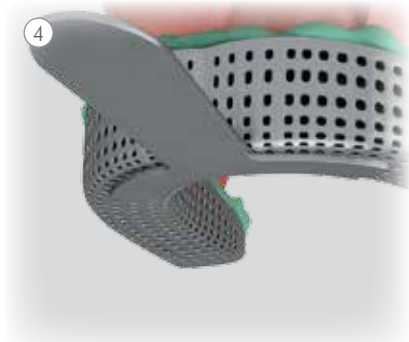
STEP 3

Take the impression using an elastomeric impression material (polyvinyl siloxane or polyether rubber).



STEP 4

Use a standard impression tray.



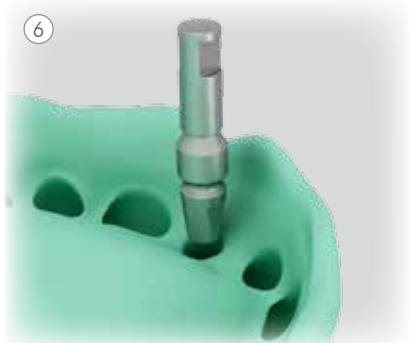
STEP 5

Mount the impression transfer on the analog using the screw (ref. BL-5052HX - EL-5052HXL).



STEP 6

Reposition the impression transfer in the tray. Push the impression transfer until it is firmly seated into the embedded in transfer cap.



NOTE

Since the BL and EL implant connections are identical, the transfers of each system are compatible one with the other. The EL transfer differs from the BL transfer in that it can function as an abutment and will lock into the implant whereas the BL transfer will not lock into the implant and thus does not require use of the extractor.

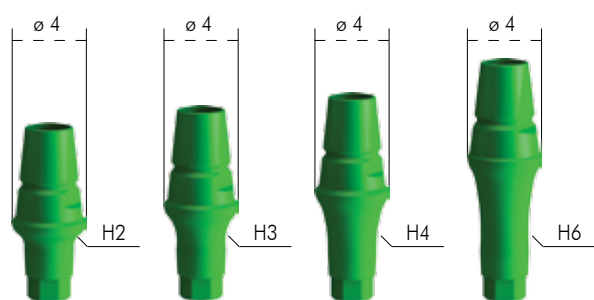
EL/BL PLANNING ABUTMENTS

USE: The planning abutments are used to help the practitioner and the technician to test and check which final abutment would be the best fit for the case at hand.

NOTE: All EL and BL angled abutments have the angulation over the flat of the hex.

EL - Ø 4 STRAIGHT PLANNING ABUTMENTS

INCLUDES SCREW



EL-402

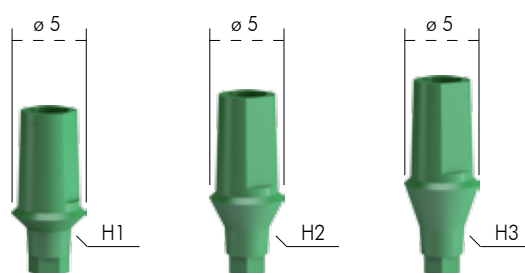
EL-403

EL-404

EL-406

BL - Ø 5 STRAIGHT PLANNING ABUTMENTS

INCLUDES SCREW



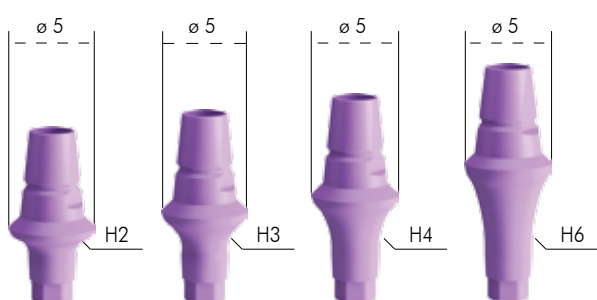
BL-PC107.01/1

BL-PC107.01/2

BL-PC107.01/3

EL - Ø 5 STRAIGHT PLANNING ABUTMENTS

INCLUDES SCREW



EL-502

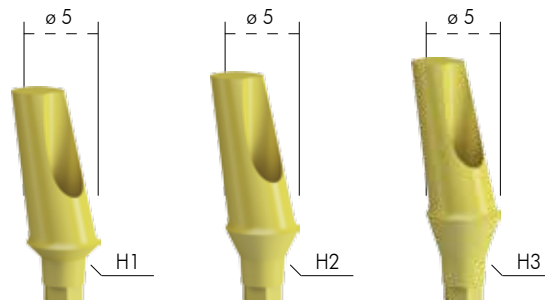
EL-503

EL-504

EL-506

BL - 15° ANGLED PLANNING ABUTMENTS

INCLUDES SCREW



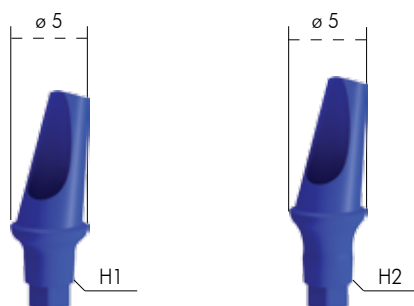
BL-PC107.02/1

BL-PC107.02/2

BL-PC107.02/3

EL - 18° ANGLED PLANNING ABUTMENTS

INCLUDES SCREW

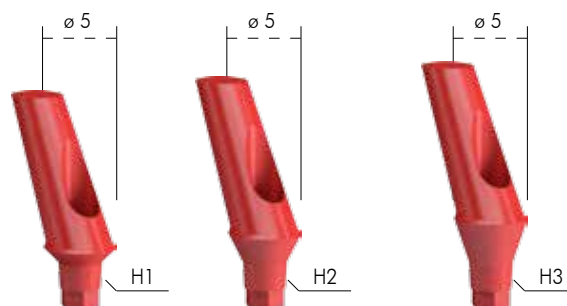


EL-1802

EL-1803

BL - 25° ANGLED PLANNING ABUTMENTS

INCLUDES SCREW



BL-PC107.03/1

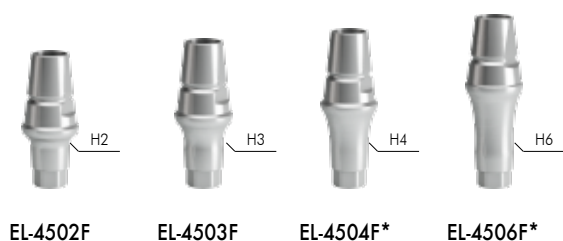
BL-PC107.03/2

BL-PC107.03/3

EL/BL TITANIUM ABUTMENTS

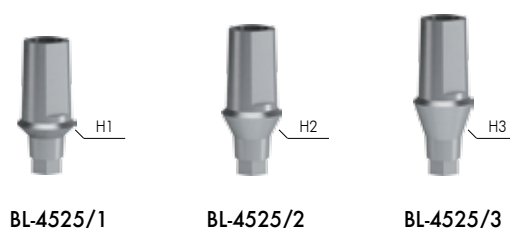
EL - CEC TITANIUM Ø4 ABUTMENTS

INCLUDES SCREW



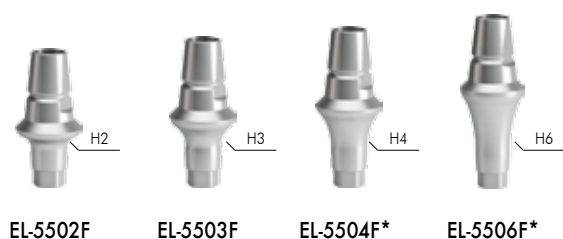
BL - TITANIUM Ø 5 STRAIGHT ABUTMENTS

INCLUDES SCREW



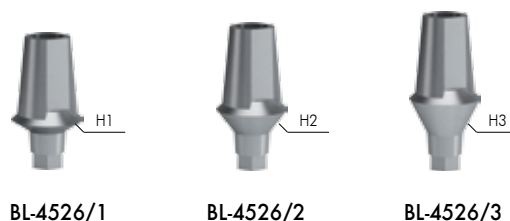
EL - CEC TITANIUM Ø5 ABUTMENTS

INCLUDES SCREW



BL - TITANIUM Ø 6 STRAIGHT ABUTMENTS

INCLUDES SCREW



EL - CEC 18° ANGLED ABUTMENTS



BL - TITANIUM 15° ANGLED ABUTMENTS

INCLUDES SCREW



NOTE

All angled abutments are over flat of the hex.
The last digit on the abutment article number refers to the cuff height, the distance from the point of the abutment's exit from the implant to the shoulder of the abutment.

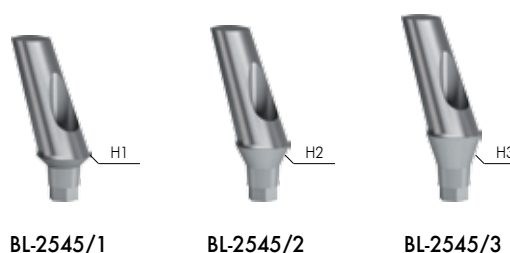
All EL and BL angled abutments have the angulation over the flat of the hex.

TIGHTENING:
with torque ratchet 30
N=Ncm



BL - TITANIUM 25° ANGLED ABUTMENTS

INCLUDES SCREW



TITANIUM ABUTMENT

STEP 1

Fabricate the master cast including a gingival mask.

STEP 2

Place the PLANNING abutment into the technical lab model in order to plan and choose the appropriate titanium abutment in a cost effective manner.

STEP 3

Place the the titanium abutment into the analog that is embedded in the stone model.

STEP 4

Prepare the titanium abutment, modify as required.

STEP 5

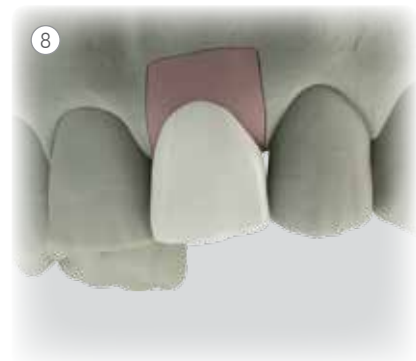
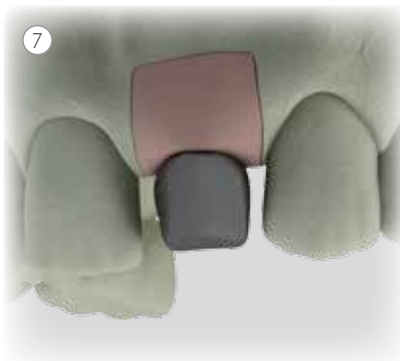
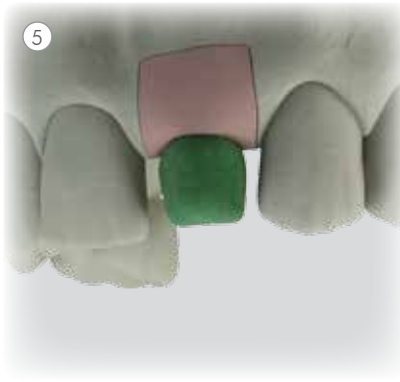
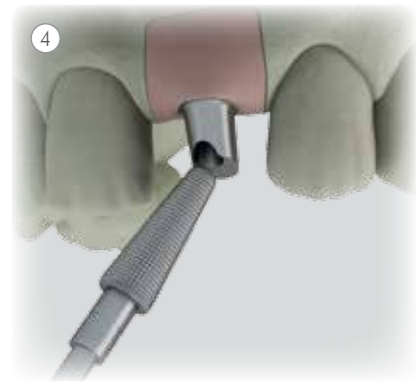
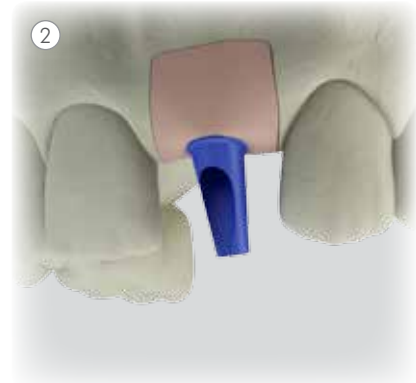
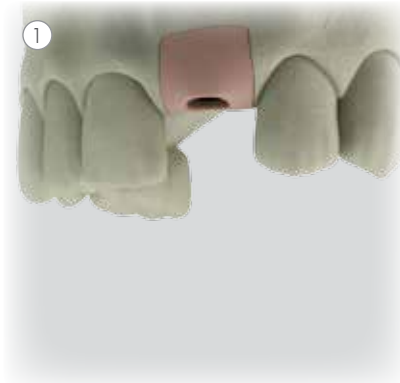
Wax up the prepared abutment.

STEP 6

Cast the framework in the conventional manner.

STEP 7 - Check the fit of the of the metal crown onto the prepared abutment. Then sand blast the crown in order to provide a mechanical bond for the veneer.

STEP 8 - Veneer the crown.



NOTE

Since the BL & EL abutments have an identical connection, they are accordingly compatible one with the other. EL abutments differs from the BL abutments in that they have a concave form at the gingival level and they can also be used as closed transfers when they are used together with the BL-4546 transfer cap.



TITANIUM BASE / CASTING CYLINDER

The BL-6045 consists of a titanium base and plastic cylinder which fits over the base. The reason that the base is machined titanium instead of a non-oxidisable alloy is due to the precision required in order to maintain the morse locking fit into the implant. If the base were cast instead of machined it will not have the same precision. Thus the cylinder alone will be cast and prepared and then bonded to the base using a metal cement such as Panavia®.

STEP 1 - Place the base together with its plastic cylinder onto the model analog.

STEP 2 - Wax up the the cylinder.

STEP 3 - Remove from the titanium base only the waxed up cylinder without the titanium base. The waxed up cylinder will then be placed in the casting oven.

STEP 4 - Casting and divestment. Cast the framework in the conventional manner.

STEP 5 - Verify that the metal crown fits precisely on the customized abutment.

STEP 6 - Sandblast the metal crown in order to create a mechanical bond with the veneer. Veneer the superstructure.

STEP 7 - Cement the superstructure to the abutment.

STEP 8 - Remove superfluous cement.

STEP 9 - Position the abutment in the implant and tighten the screws to 25 Ncm using the hexagonal screwdriver along with the torque ratchet.





TITANIUM BASE WITH CAD/CAM TECHNIQUE

STEP 1 - Place the base into the model analog.

STEP 2 - Seat the scan cap over the abutment of the scan base.

STEP 3
Put the scan model in the laser scanner.

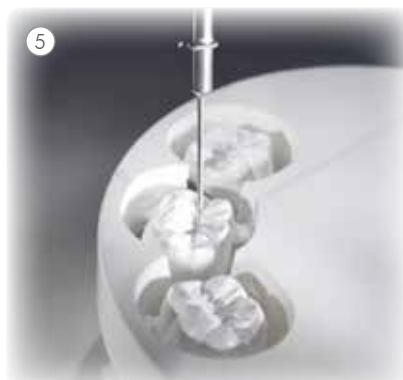
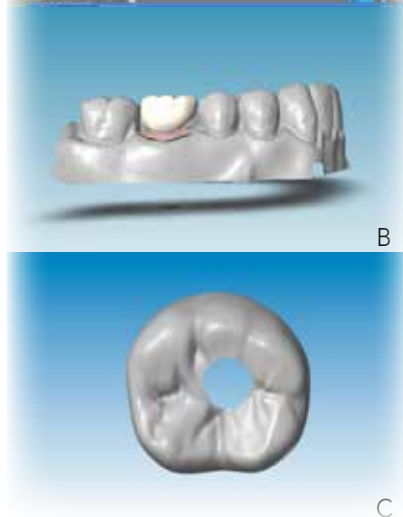
STEP 4
Shape the abutment on screen, using the software.

STEP 5
Based on the design data, the customized structure is manufactured by a milling center.

STEP 6
Check the zirconium framework.
Veneer the superstructure.

STEP 7
Cement the superstructure to the abutment.

STEP 8
Remove superfluous cement.



EL/BL TEMPORARY ABUTMENTS - PEEK

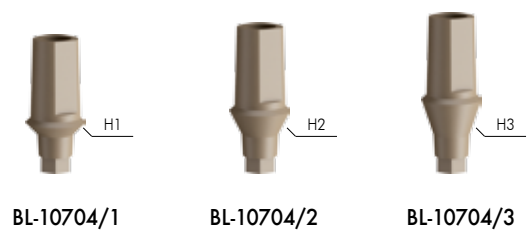
EL - CEC PEEK Ø 4 ABUTMENTS

INCLUDES SCREW AND IMPRESSION CAP



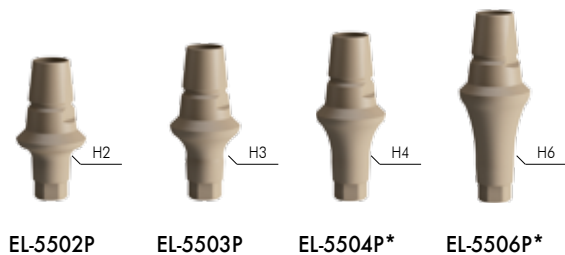
BL - PEEK Ø 5 STRAIGHT ABUTMENTS

INCLUDES SCREW



EL - CEC PEEK Ø 5 ABUTMENTS

INCLUDES SCREW AND IMPRESSION CAP



BL - FIBRE-GLASS 15° ANGLED ABUTMENTS

INCLUDES SCREW



*Uses the long screw EL-5052HXL

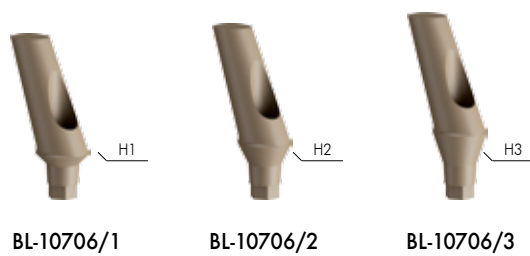
STEP 1
Modelling of the abutment on the implant.

STEP 2
Polish and clean residue from the abutment.

STEP 3
Placement of the restoration.

BL - FIBRE-GLASS 25° ANGLED ABUTMENTS

INCLUDES SCREW



EL/BL ZIRCONIUM ABUTMENTS

EL - CEC PEEK Ø 4 ABUTMENTS

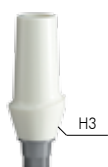
INCLUDES SCREW



BL-4525-Z01



BL-4525-Z02



BL-4525-Z03

BL - PEEK Ø 5 STRAIGHT ABUTMENTS

INCLUDES SCREW



BL-1543-Z01



BL-1543-Z02



BL-1543-Z03

BL - FIBRE-GLASS 15° ANGLED ABUTMENTS

INCLUDES SCREW



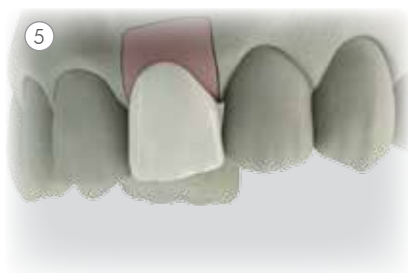
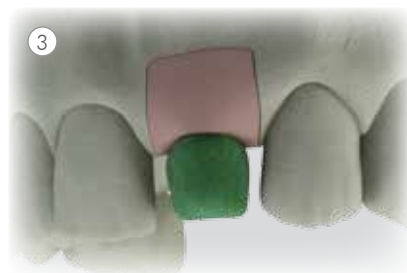
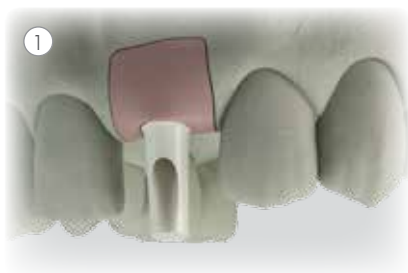
BL-2545-Z01



BL-2545-Z02



BL-2545-Z03



STEP 1
Fit the abutment into the model.

STEP 2
Model the abutment.

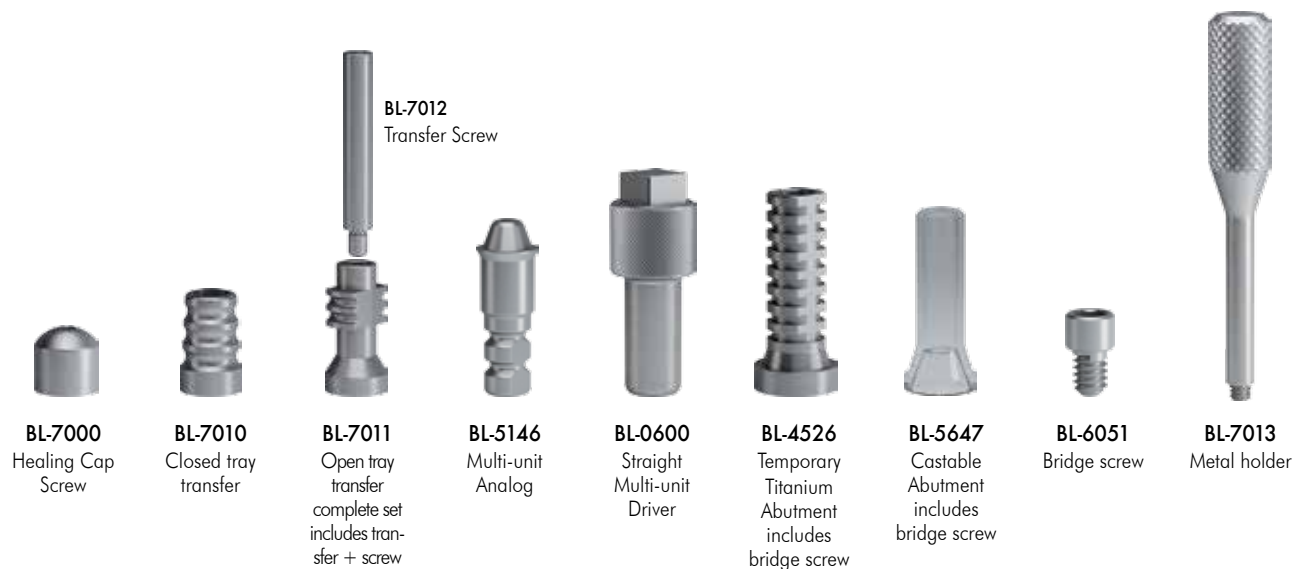
STEP 3
Fabricate the superstructure on the modified abutment using the standard modelling, casting and veneering methods.

STEP 4
Cast the framework using the standard casting methods.

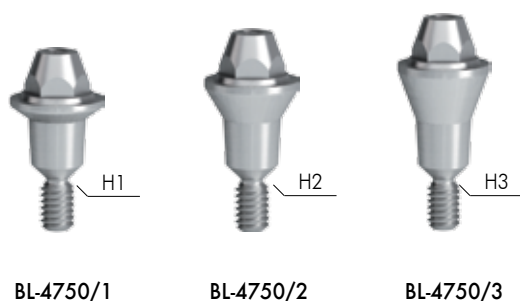
STEP 5
Veneer the superstructure.

Please Note: prosthetic screw for zirconium abutment reference is EL-5052HXL

SCREW RETAINED RESTORATION



STRAIGHT ABUTMENTS



17° ANGLED ABUTMENTS



30° ANGLED ABUTMENTS



COMPLETE SET INCLUDES:



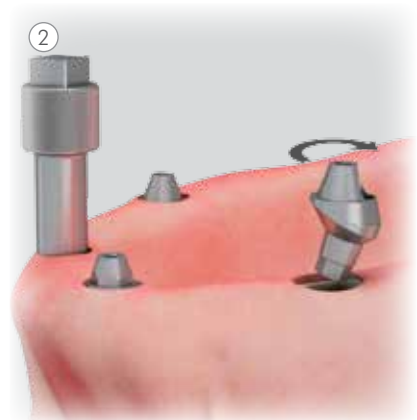
1. Multi-unit angled abutment
2. Prosthetics Screw

SCREW RETAINED CLOSE TRAY TECHNIQUE



STEP 1
Remove the healing abutments.

STEP 2
Screw the straight abutment into the implant using the torque ratchet (30 Ncm) and the Multi-unit Driver.



SURGICAL PROCEDURE

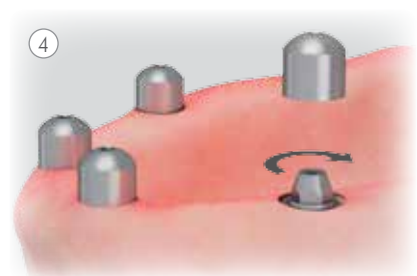
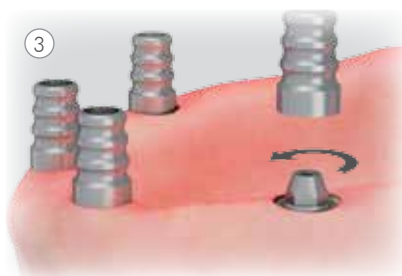
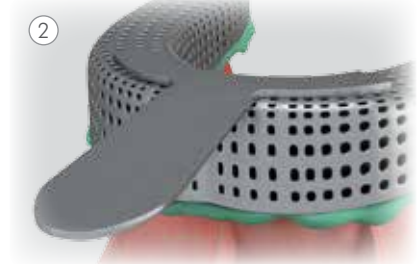
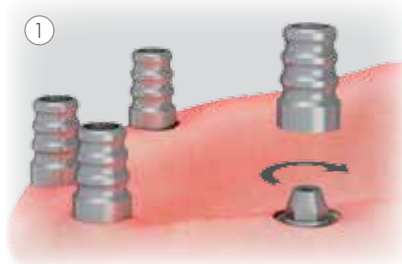


STEP 1
Screw each closed tray transfer onto the protruding abutments.

STEP 2
Take the impression using an elastomeric impression material (polyvinyl siloxan or polyether rubber).

STEP 3
Remove the closed tray transfer from the abutment.

STEP 4
Screw onto the abutments the healing cap screws so as to keep the soft tissue in place until the final prosthesis is completed.



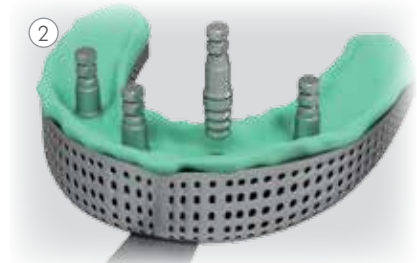
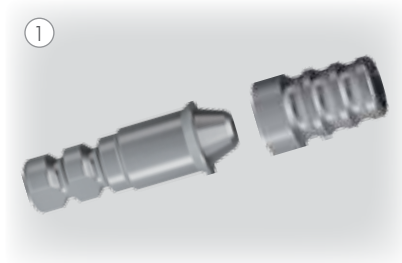
LABORATORY PROCEDURE



STEP 1
Screw the closed tray transfer onto the analog.

STEP 2
Reposition the transfer into the previously taken impression material being sure that the transfers are properly seated.

STEP 3
Produce master model.

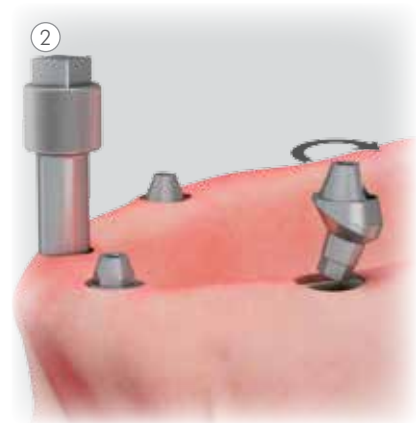
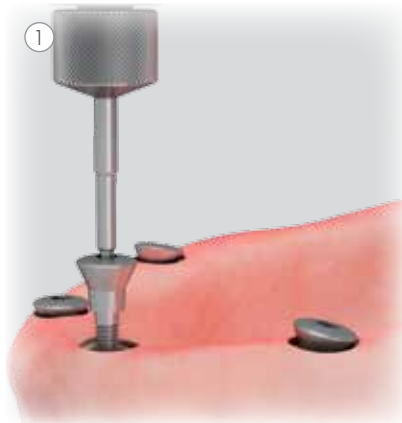


SCREW RETAINED OPEN TRAY TECHNIQUE



STEP 1
Remove the healing abutments.

STEP 2
Screw the straight abutment into the implant using the torque ratchet (30 Ncm) and the Multi-unit Driver.



SURGICAL PROCEDURE

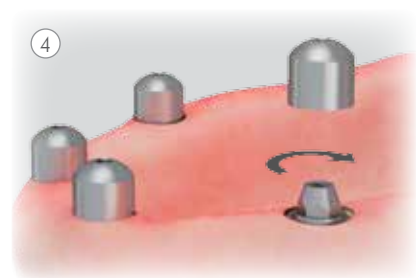
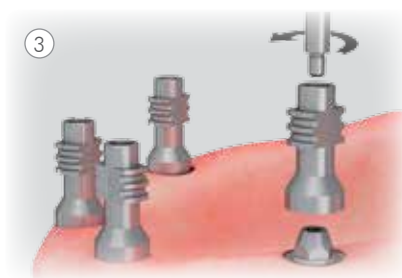
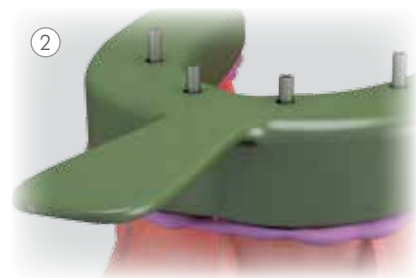
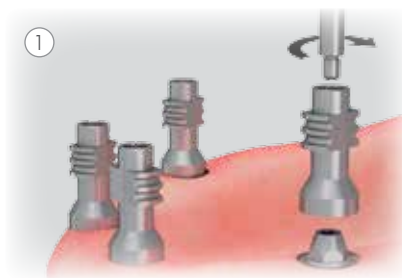


STEP 1 - Screw the impression post accurately into the Multi-unit abutments and hand-tighten the guide screw.

STEP 2 - Make perforations in the custom-made impression tray (light cured resin) according to the individual situation so that the positioning screw of the impression post protrudes. Take the impression using an elastomeric impression material (polyvinyl siloxane or polyether rubber).

STEP 3 - Unscrew the opened tray transfers from the abutment.

STEP 4 - Screw onto the abutments the healing cap screws so as to keep the soft tissue in place until the final prosthesis is completed.



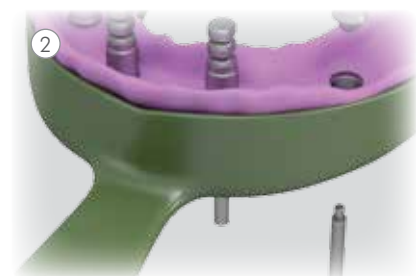
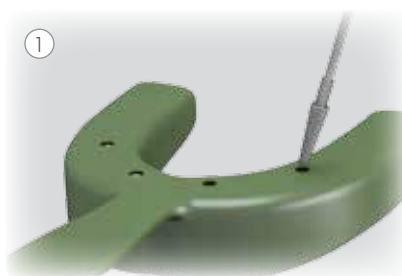
LABORATORY PROCEDURE



STEP 1
The laboratory will prepare the tray for the clinician by preplanned openings in the tray from which the impression posts will protrude. The tray will in turn be given to the clinician to take the impression.

STEP 2
Reposition and fix the analog in the impression using the screw.

STEP 3
Produce master model.



SCREW RETAINED RESTORATION

STEP 1

Fabricate the stone model including analogs and gingival mask.

STEP 2

Place and screw the castable abutments onto the protruding multi-unit analogs.

STEP 3

Shorten the cylinders down to the height of the occlusal plane.

STEP 4

Remove the gingiva modeling material to permit easy access for submucosal contouring and verification of component seating. Wax-up the bridge framework to appropriate dimensions. The layer of wax must have sufficient thickness to avoid the wrong coefficient of thermal expansion and a negative effect on porcelain firing.

STEP 5

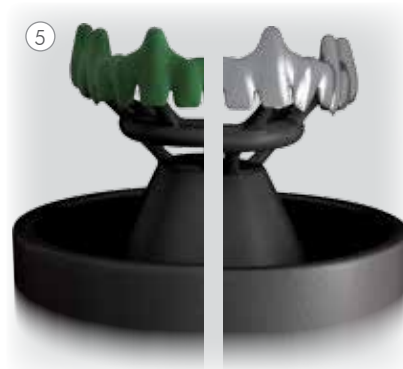
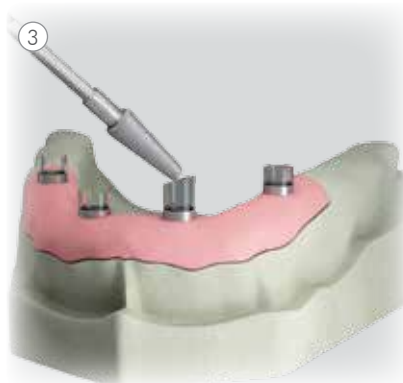
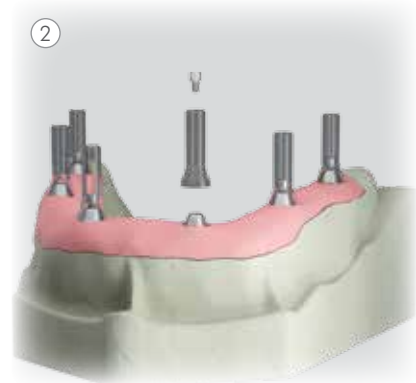
Prepare the wax-up for investing and casting procedures.

STEP 6

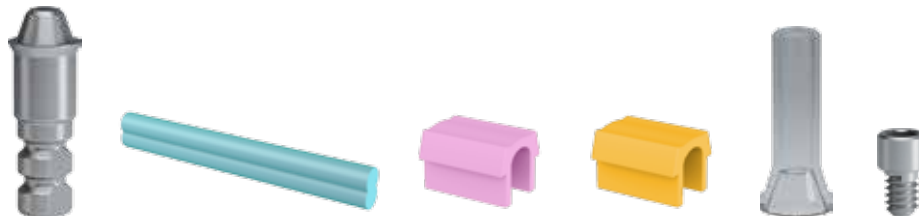
Attach the resulting framework to the models and create final prosthesis.

STEP 7

Passively fit the resulting prosthesis onto the abutments.



BAR

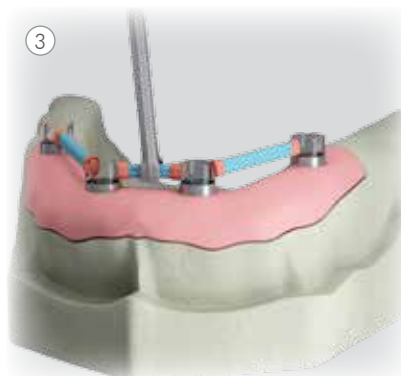
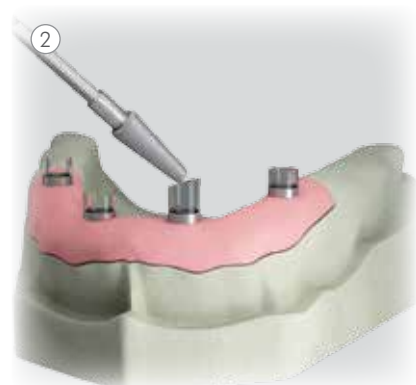
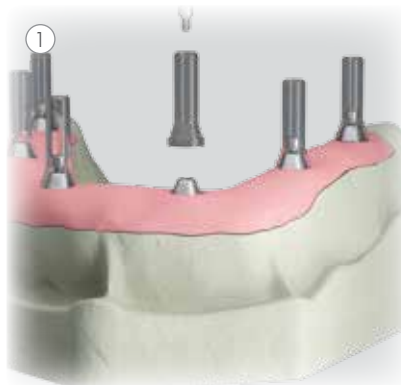


STEP 1
Place the castable Multi-unit abutments on the analogs and tighten the Multi-unit internal screws.

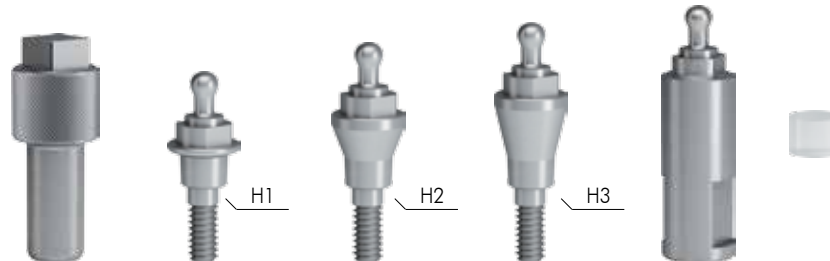
STEP 2
Make height adaptations according to the individual situation.

STEP 3
Use a residue-free burn-out plastic to fix the bar segments to the castable abutments.

STEP 4
The yellow clips (027CRG) are fixed into the prosthesis.



O-BALL ATTACHMENT SYSTEM



STEP 1

Screw the spherical abutments into the implants using the torque ratchet (30 Ncm) and the driver (ref. BL-0600).

STEP 2

Prior to placing the housings over the O-balls, silicone tubes (ref. MC-3008) will have to be fitted around the necks of the implants or analogs in order to block out the acrylic from prosthesis and prevent the acrylic attaching itself to the analogs or implants.

STEP 3

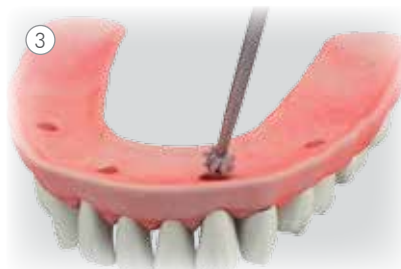
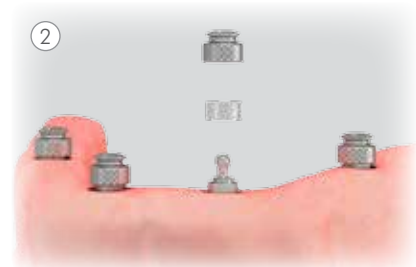
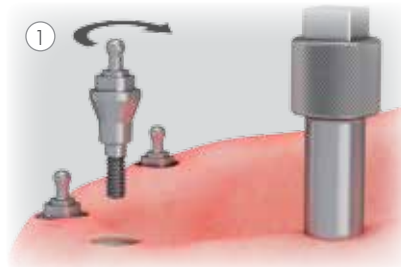
Burr out the the prosthesis in order make room for the housings. Pour acrylic into the burred out space in order to pick up the housings.

STEP 4

Immediately after filling with acrylic, fit the prosthesis over the housings.

STEP 5

Apply medium occlusal pressure to the prosthesis until the acrylic has hardened and picked the housings.



ANCHOR ABUTMENT SYSTEM

CAPS WITH METAL HOUSING



141CAE
2 Stainless steel housings



140CEV
4 Retentive caps
violet "strong" (2.7kg)



140CET
4 Retentive caps
white "standard" (1.8kg)

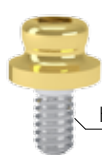


140CER
4 Retentive caps
pink "soft" (1.2kg)

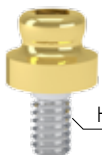


140CEG:
4 Retentive caps
yellow "extra-soft" (0.6kg)

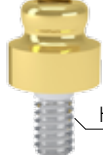
ANCHOR ABUTMENT SYSTEM COMPLETE SET



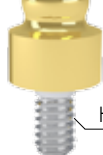
130BL1



130BL2



130BL3



130BL4



130BL5



- COMPLETE SET INCLUDES:**
- 1 Anchor abutment (Ref. 130BL1, 130BL2, 130BL3, 130BL4, 130BL5)
 - 1 Stainless steel housings (Ref. 141CAE)
 - 1 Retentive caps - violet "strong" (Ref. 140CEV)
 - 1 Retentive caps - white "standard" (Ref. 140CET)
 - 1 Retentive caps - pink "soft" (Ref. 140CER)
 - 1 Retentive caps - yellow "extra-soft" (Ref. 140CEG)

LABORATORY ACCESSORIES



140CEN
4 Processing Caps - black



144MTE
2 Impression Coping

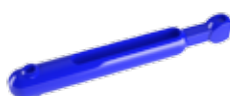


144AE
2 Laboratory Analog



044CAIN
Pull-off Impression Coping

SURGICAL INSTRUMENTS



124ICP
1 Blue plastic
"multiuse"
insertion tool



185IAC
1 Metal insertion tool for
caps



191ECS
1 Metal extractor tool for
caps



774CQ
1 OT-Equator square
screw driver for implant
abutment (square 1,25mm)

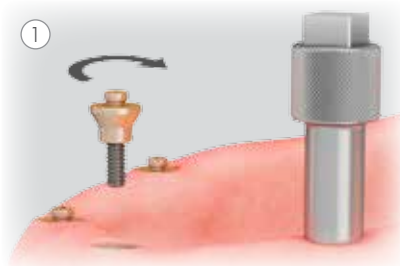


760CE
1 Square driver
connector for torque

ANCHOR ABUTMENT SYSTEM

STEP 1

Choose equator abutments with the appropriate height. The top margin of abutment should be 1mm above the gingival line. Use a torque ratchet to fix the abutment at 25Ncm.



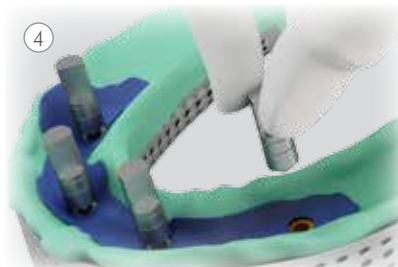
STEP 2

Place the 044CAIN impression copings onto the abutments, make sure they are well seated.



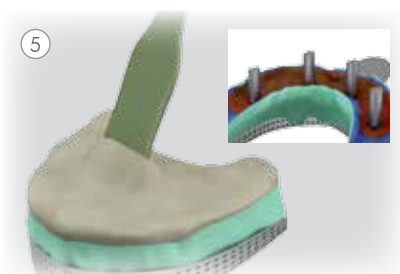
STEP 3

Apply impression material on and around impression copings. Make the impression while picking up the copings.



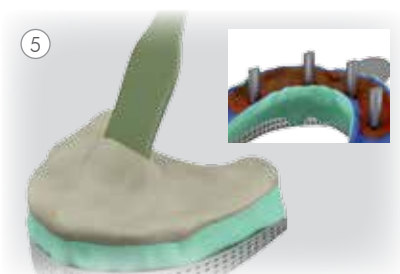
STEP 4

Once the impression is completed, insert the 144AE analogs into the copings that are embedded in the impression material.



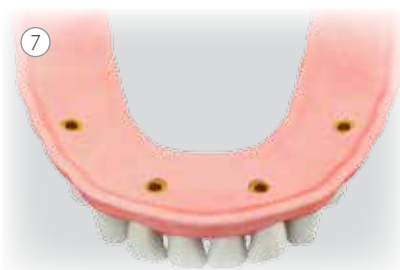
STEP 5

Create a gingival mask in order to maintain the optimal emergence profile of the crowns, then cast the stone model.



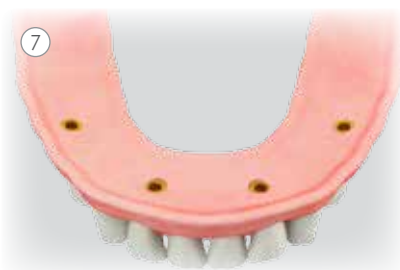
STEP 6

Once the stone model is complete, seat the 140CEN Processing caps onto the abutment analogs which are protruding from the model.



STEP 7

Fabricate the prosthesis using standard laboratory procedures.



STEP 8

The laboratory returns the final prosthesis to the dentist for the final seating in the patient's mouth.





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