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INSTRUCTIONS FOR USE: Temporary Titanium Abutments
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INSTRUÇÕES DE UTILIZAÇÃO: Pilares temporários de titânio



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Subsidiaries

Australia



Intended use

Southern Implants® dental implant abutments are intended to be used in the Maxilla or Mandible for suppor ng a prosthesis on endosseous implants in order to restore chewing func on for the pa ent.

Intended user

Dental Technicians, Maxillo-facial Surgeons, General Den sts, Orthodon sts, Periodon st, Prosthodon sts and other appropriately trained and experienced implant users.

Intended environment

The devices are intended to be used in a clinical environment such as an opera ng theater or a den st consulta on room.

Intended pa ent popula on

This device is used in the dental restora on of par ally or fully edentulous pa ents in the upper or lower jaw. Restora ons may comprise, par al or full bridges, mul -unit cases and may be 2xed or removable.

Descrip on

These are pre-manufactured dental implant abutments that can either be connected direct to an endosseous implant, or connect the prosthesis to a compact conical abutment for use as an aid in temporary prosthe c rehabilita on. Refer to individual product catalogues for product characteris cs and compa ble accessories. The Titanium abutments are provided sterile, however, it will no longer be sterile a er modi⊡ca on.

Indica ons for use

Southern Implants Dental Implants are intended for both one- and two-stage surgical procedures in the following situa ons and with the following clinical protocols:

- replacing single and mul ple missing teeth in the mandible and maxilla.
- immediate placement in extrac on sites and in situa ons with a par ally or completely healed alveolar ridge,
- immediate loading in all indica ons, except in single tooth situa ons on implants shorter than 8 mm or in so bone (type IV) where implant stability may be difficult to obtain and immediate loading may not be appropriate.

Contraindica ons

Do not use in pagents:

- who are medically un2t for dental implant procedures
- where adequate numbers of implants could not be placed to achieve full func onal support of the prosthesis,
- who are allergic or have hypersensi vity to pure tanium or tanium alloy (Ti-6Al-4V), gold, palladium, pla num or iridium.
- who are under the age of 18, have poor bone quality, blood disorders, infected implant site, vascular impairment, uncontrolled diabetes, drug or alcohol abuse, chronic high dose steroid therapy, an coagulant therapy, metabolic bone disease, radiotherapy treatment.

Warnings

THESE INSTRUCTIONS ARE NOT INTENDED AS A SUBSTITUTE FOR ADEQUATE TRAINING.

- For the safe and effec ve use of dental implants it is suggested that specialised training be undertaken, including hands-on training to learn proper technique, biomechanical requirements and radiographic evalua ons.
- Responsibility for proper pa ent selec on, adequate training, experience in the placement of implants, and providing appropriate informa on for informed consent rests with the prac oner. Improper technique can result in implant failure, damage to nerves / vessels and / or loss of suppor ng bone.

New and experienced Implant users should do training before using a new system or a empt to do a new treatment method. Take special care when trea ng pa ents who have local or systemic factors that could affect the healing of the bone and so ssue. (i.e. poor oral hygiene, uncontrolled diabetes, are on steroid therapy, smokers, infec on in the nearby bone and pagents who had oro-facial radiotherapy.) Thorough screening of prospec ve implant candidates must be performed including:

- A comprehensive medical and dental history.
- Visual and radiological inspec on to determine adequate bone dimensions, anatomical landmarks, occlusal condions & periodontal
- Bruxism and unfavourable jaw rela ons must be taken into account.
- Proper pre-opera ve planning with a good team approach between well trained surgeons, restora ve den sts and lab technicians is essen al for successful implant treatment.
- Minimizing the trauma to the host ssue increases the poten al for successful osseointegra on.
- Electro-surgery should not be a empted around metal implants, as they are conduc ve.

During surgery

Care must be taken that parts are not swallowed during any of the procedures, a rubber-dam applica on is recommended when appropriate. Care must be taken to apply the correct ghtening torque of abutments and abutment screws.

Post-surgery

Regular pa ent follow-up, and proper oral hygiene must be achieved to ensure favourable long-term results.

Compa bility informa on

SI implants should be restored with SI components. In the SI range there are 5 implant connec ons, the implant code and connec on type, can be iden 2ed by speci2c abbrevia ons in the product codes. Range 'iden Pers are summarised in table A.

Table A (*) is indica ve of various lengths available.

Implant connec on type	Compa ble device
External Hex (TC)	Parts labelled TCP1h, TCBN1h/5h, TCB1h/5h, TCBA1h/5h, TCBBB1h/5h, TCMAX9-1h for engaging items
	Parts labelled TCP1nh, TCBN1nh/5nh, TCB1nh/5nh, TCBA1nh/5nh, TCBBB1nh/5nh, TCMAX9-1nh, for non-engaging items
Tri-Nex (EL) (Lobe)	Parts labelled TC-EL-(ø), for engaging items
	Parts labelled TC-NL-(ø), for non-engaging items
Deep Conical	Parts labelled TC-DC-(ø), for engaging items
(DC)	Parts labelled TC-NDC-(ø), for non-engaging items
Internal Hex (M)	Parts labelled TC-M, (used with ø3.75, 4.20 & 5.00 mm pla orms) for engaging items
	Parts labelled TC-NM, (used with ø3.75, 4.20 & 5.00 mm pla orms) for non-engaging items

Internal Hex (Provata) (M)(Z)	Parts labelled TC-M, (used with ø4.0, 5.0 & 6.0 mm pla orms) for engaging items
	Parts labelled TC-NM, (used with ø4.0, 5.0 & 6.0 mm pla orms) for non-engaging items
	Parts labelled TC-EZ-(*), (used with ø7.0, 8.0 & 9.0 mm pla orms) for engaging items
	Parts labelled TC-NZ-(*), (used with ø7.0, 8.0 & 9.0 mm pla orms) for Non-engaging items
Implant connec on type	Compa ble device
IT (ITS) (ITS6)- Octagon	Parts labelled ITS-TC1 (used with ø4.8 mm pla orms) for engaging items
	Parts labelled ITS-TC1ne (used with Ø4.8 mm pla orms) for non-engaging items
	Parts labelled ITS6-TC1 (used with ø6.5 mm pla orms), for engaging items
	Parts labelled ITS6-TC1ne (used with ø6.5 mm pla orms) for non-engaging items
Abutment level	Parts labelled TMC1/5, TMCSL (used with ø4.8 mm abutment pla orms) non-engaging
	Parts labelled TMCW1/5 (used with ø6.0 mm abutment pla orms) non-engaging

Storage, cleaning & sterilisa on

The implants, cover screws and healing abutments are supplied sterile (sterilised by gamma irradia on) and intended for single-use prior to the expira on date (see packaging label). Sterility is assured unless the container or seal is damaged or opened. If packaging is damaged do not use the product and contact your Southern representa ve/ or return to Southern Implants. Do not reuse implants, cover screws, temporary abutments and abutments. Re-using these components may result in:

- Damage on the surface or cri cal dimensions, which may result in performance and compa bility degrada on.
- Adds the risk of cross-pa ent infec on and contamina on if singleuse items are reused.

Southern Implants does not accept any responsibility for complica ons associated with reused components.

Cleaning and disinfec on

An implant restora on is a single- or mul ple-tooth implant crown, bridge or substructure, a ached to a Southern Implants abutment or mul ple abutments.

Before intraoral use the 2nal restora on needs to be cleaned and disinfected, as per restora ve material manufacturer's instruc ons.

Sterilisa on

Southern Implants recommends the following procedure to sterilise the restora on prior to use:

Methods to sterilise the restora on and abutment screw

- 1. Pre-vacuum sterilisa on method: Steam sterilise the abutments at 132°C (270°F) at 180-220kPa for 4 minutes. Dry for at least 20 minutes in the chamber. Only an approved wrap or pouch for steam sterilisa on must be used.
- 2. Pre-vacuum sterilisa on method: Wrapped, steam sterilise at 135°C (275°F) for 3 minutes. Dry for 20 minutes in the chamber. Use a wrap or pouch that is cleared for the indicated steam sterilisa on cycle.

NOTE: Users in the USA must ensure that the steriliser, wrap or pouch, and all steriliser accessories are cleared by the FDA, for the intended sterilisa on cycle.

Chairside procedure (making a temporary restora on)

Note: Modi@ca on of Titanium abutments can be done with a carbide

burr or disk. It is recommended to do this extraorally and with copious irriga on during cu ng.

- 1. Determine the cuff height that will be most suitable for the restora on. Titanium abutments are available in 1 mm and 5mm collar heights. DC (Deep Conical) and IT (octagon) are only available in 1 mm collar heights. Provata (Internal Hex implant Promax ranges) are available in 1 mm and 3 mm collar heights.
- 2. Connect the abutment to the implant and modify the abutment to the correct occlusal height, with no addi onal angular correc on. Modi@ca on of the abutment must be done with copious amounts of irriga on intra-orally. (Extraoral trimming of the abutment is the preferred recommenda on). For single-unit use, do not reduce the post below a minimum height of 4 mm.
- 3. With a 5 mm Titanium abutment the collar can be trimmed to follow the contours of the so ssue.
- 4. Close the screw channel hole in a way that will ensure the prosthe c screw can be retrieved.
- 5. Make a temporary restora on by using a pre-formed stent and suitable temporary material.
- 6. Unscrew the temporary prosthesis.
- 7. Make Inal adjustments.
- 8. Clean and disinfect the restora on as applicable per the restora ve material manufacturer's instruc ons.
- 9. A ach the Temporary abutment to the endosseous implant or Compact Conical abutment with the compa ble prosthe c screw. Tighten the restora on using a manual torque wrench to the torque value specined in Table C.
- 10. Close screw access hole.
- 11. Cement 2 nal prosthesis if applicable.

Laboratory procedures (making a temporary restora on)

- 1. The laboratory receives the impression either implant level or abutment level.
- The corresponding laboratory analogue is connected to the impression coping, fabricate a working model with removable gingival mask or so ssue material.
- 3. The same steps as for clinical procedures will apply.

Clinical procedures (placing the Temporary restora on)

The clinician receives the restora on from the laboratory.

- 1. Remove the healing abutment.
- 2. Clean, disinfect and sterilise the restora on as described.
- 3. Insert the restora on into the pa ent's mouth.
- 4. Posi on the restora on on the implant / abutment making sure that the reten ve elements of the implant / abutment connec ons are properly aligned.

Table B

Driver type	External Hex	DC	Tri-Nex	Internal Hex	IT	Compact Conical screw
1.22 mm / 1.27 mm Universal driver	✓	✓		√		√
1.22 mm hex driver	✓	✓				✓
1.27 mm hex driver				✓		
Unigrip driver	✓		✓			✓
Quad driver	✓			Gold screws only		
Blade driver	✓		·			✓
Torx driver			·		√	

5. Fix the abutment to the implant / abutment with the correct screw using applicable driver (Table B). Torque the screw down to the value indicated in Table C.

Table C

Direct to Implant	Torque			
Ext-Hex				
ø3.0 mm	25-32 Ncm			
ø3.25, 4.0, 5.0, 6.0, 7.0, 8.0 and 9.0 mm	32-40 Ncm			
Direct to Implant	Torque			
Tri-Nex				
ø3.5mm	32 Ncm			
ø4.3, 5.0, 6.0, 7.0, 8.0 and 9.0 mm	32-40 Ncm			
DC				
ø3.0 mm	15 Ncm			
ø3.5, 4.0 mm	20 Ncm			
ø5.0 mm	25-32 Ncm			
Internal Hex (M-Series & Provata)				
ø3.75, 4.2, 5.0 mm M-Series 32 Ncm				
ø4.0, 5.0, 6.0, 7.0, 8.0 and 9.0 mm Provata Implant	32 Ncm			
IT Octagon				
ø3.3, 4.1, 4.9, 4.0, 5.0, 6.0, 7.0, 8.0 and 9.0 mm IT Implant 32-40 Ncn				

Abutment level	All Titanium cylinders on Compact Conical
	Abutments: 10-15 Ncm

- 6. Verify the correct sea ng of the restora on using radiographic
- 7. Do not exceed the recommended torque value as this may result in failure of the screw, abutment or implant. Do not torque less than the recommended value, this may result in loosening of the abutment that can lead to abutment or implant failure.
- 8. Close the screw access hole.
- 9. Cement the temporary prosthesis if applicable.

Clinical bene2ts

Through this procedure pa ents can expect to have their missing teeth replaced and/ or crowns restored.

Healing

The healing me required for osseointegra on depends on the individual and treatment protocol. It is the responsibility of the prace oner to decide when the implant can be restored. Good primary stability will govern if immediate loading can be done.

Implant care and maintenance

Poten al implant pa ents should establish an adequate oral hygiene regime prior to Implant therapy. Proper post opera ve oral hygiene and implant maintenance instruc ons must be discussed with the pa ent, as this will determine the longevity and health of the Implants. The pa ent should maintain regular prophylaxis and evalua on appointments.

Materials

Titanium abutments: Titanium grade 2, 3, 4, or 5. Abutment screws: Titanium alloy Ti-90%, Al-6%, V-4%

Gold Alloy Au-61%, Ag-16.5%, Pt-13.5%, Cu-9% Note: DC Titanium abutments are anodized gold in colour.

Side effects

Poten al Side Effects and Temporary symptoms: Pain, swelling, phone c difficul es, gingival in amma on. More persistent symptoms: The risks and complica ons with implants include, but are not limited to: (1) allergic reac on(s) to implant and/or abutment material; (2) breakage of the implant and/or abutment; (3) loosening of the abutment screw and/ or retaining screw; (4) infec on requiring revision of the dental implant; (5) nerve damage that could cause permanent weakness, numbness, or pain; (6) histologic responses possibly involving macrophages and/ or Dbroblasts; (7) forma on of fat emboli; (8) loosening of the implant requiring revision surgery; (9) perfora on of the maxillary sinus; (10) perfora on of the labial and lingual plates; and (11) bone loss possibly resul ng in revision or removal.

Breakage

Implant and abutment fractures can occur when applied loads exceed the tensile or compressive strength of the material. Poten all overloading condi ons may result from; de iciencies in implant numbers, lengths and/or diameters to adequately support a restora on, excessive can lever length, incomplete abutment sea ng, abutment angles greater than 30 degrees, occlusal interferences causing excessive lateral forces, pa ent parafunc on (e.g., bruxing, clenching), loss or changes in den on or func onality, inadequate prosthesis 12t, and physical trauma. Addi onal treatment may be necessary when any of the above condi ons are present to reduce the possibility of hardware complica ons or failure.

Changes in performance

It is the responsibility of the clinician to instruct the pa ent on all appropriate contraindica ons, side effects, and precau ons as well as the need to seek the services of a trained dental professional if there are any changes in the performance of the implant (e.g., looseness of the prosthesis, infec on or exudate around the implant, pain, or any other unusual symptoms that the pa ent has not been told to expect).

MR Condi onal

Non-clinical tes ng and MRI simula ons were performed to evaluate the dental implant system offered by Southern Implants. Non-clinical tes ng demonstrates that these products are MR Condi onal. A pa ent with an implant from a Southern Implants System can be scanned safely in an MR system under the following condions:

- Sta c magne c 🛮 eld of 1.5 Tesla and 3 Tesla only
- Maximum spa al gradient magne c 2 eld of 4,000 gauss/cm (40 T/m)
- Maximum MR system reported whole body averaged special absorp on rate (SAR) of 2 W/kg and head average SAR of 3.2 W/kg, for 15 minutes of scanning (i.e., per pulse sequence) in the normal opera ng mode

The scanning condi ons dended above will produce a maximum temperature increase of 4.9 °C in implants from Southern Implants systems a er 15 minutes of con nuous scanning (i.e., per pulse sequence).

In non-clinical tes ng, the image ar fact caused by implants from Southern Implant System extends approximately 10 mm from this device when imaged with a gradient echo pulse sequence and a 3 Tesla MR system.

Disposal

Disposal of the device and its packaging; Follow local regula ons and environmental requirements, taking different contamina on levels into account. When disposing of spent items, take care of sharp drills and instruments. Sufficient PPE must be used at all mes.

Disclaimer of liability

This product is part of the Southern Implants product range and should only be used with the associated original products and according to the recommenda ons as in the individual product catalogues. The user of this product has to study the development of the Southern Implants product range and take full responsibility for the correct indica ons and use of this product. Southern Implants does not assume liability for damage due to incorrect use. Please note that some Southern Implants products may not be cleared or released for sale in all markets.

No ce regarding serious incidents

Any serious incident that has occurred in rela on with the device must be reported to the manufacturer of the device and the competent authority in the member state in which the user and / or pa ent is

The contact informa on for the manufacturer of this device to report a serious incident is as follows: sicomplaints@southernimplants.com

Basic UDI

Product	Basic-UDI Number
Basic-UDI for Metal Abutments	600954403872

Related literature & catalogues

CAT-2004- Tri-Nex Implants Product Catalogue

CAT-2005- IT Product Catalogue

CAT-2020- External Hex Implants Product Catalogue CAT-2042 - Deep Conical Implants Product Catalogue CAT-2043- Internal Hex Implants Product Catalogue

CAT-2060- PROVATA® Implants Product Catalogue CAT-2069- INVERTA® Implants Product Catalogue

CAT-2070- Zygoma c Implants Product Catalogue

Symbols and Warnings



South Africa







using Irradiation







instruction

for use



Use by date











if package is

damaged



Tel: +27 12 667 1046 * Prescription device: Rx only. Caution: Federal Law restricts this device to sale by or on the order of a licenced physician or dentist.

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