# BONEWAY IMMEDIATE LOADING single part implants DENTAL IMPLANT SYSTEM

#### **APPLICATION AREAS**

OF THE ENDOSSEOUS DENTAL IMPLANT SYSTEM GCS®

Suitable for crowns, bridges and bars. With the correct surgical procedure and good bone quality, the compression screws design permits to incorporate the restoration in an immediate loading protocol (incorporation of the prosthesis within a maximum of three days). Today, **GCS**® implants are routinely used for immediately loaded bridge constructions. The single-piece design saves costs, effort and prevents the problem of screw loosening. In extraction cases, **GCS**® and **GBC**® are combined.

The prescribed or recommended tightening torques for implants, abutments and screws can be found on our website:

www.implant.com/en/downloads

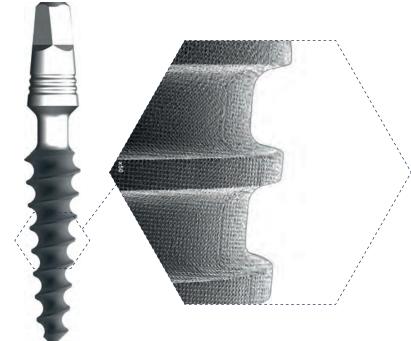




#### No-Itis® LASER - THE NEW SURFACE GENERATION

The new surface treatment for Dr. Ihde Dental AG implants is created with the latest generation of robotic tools for laser ablation. This new technology of high precision creates roughness in the implant through a mesh of hemispherical micrometric pores, with a defined, always identical size and shape and with a symmetrical distribution.

The result is a more adequate topography, which provides the most suitable conditions for the osseointegration of the implant, but at the same time it is, and behaves like, a smooth surface at a micrometric (cellular) level. This means that while bone grows well on this surface, the adhesion of bacteria to the same surface is significantly reduced.



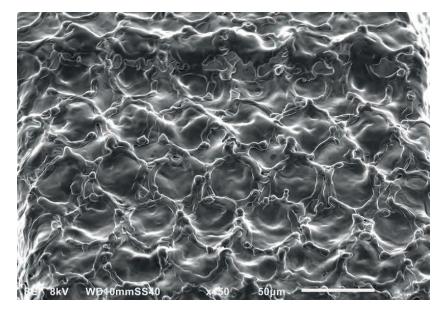
No-Itis® LASER
A SMOOTH SURFACE THAT, IN
CONTACT WITH THE BONE, IS
SHAPED LIKE A ROUGH SURFACE

In the 1990s, rough surfaces on dental implants became increasingly popular – while the risk of bacterial adhesion was blissfully disregarded. This caused the appearance of a new disease, peri-implantitis, which severely compromises the survival of the implants in the long term and which, as a result, requires a renewed intervention on a dissatisfied patient, wasting time and increasing costs. Surfaces like that are not patient-friendly!

The use of the laser technology we developed allows us to create an exactly defined micromorphology on the treated surface, leaving no residue and without altering the properties or composition of the titanium alloy. This creates a mesh of very perfect cavities in terms of the (hemispherical) shape and its dimensions (of 20 to 30  $\mu$ m), as well as their distance and distribution. The surface of these cavities as well as the retentions created by laser ablation are smooth as experienced by the bacteria, a characteristic that is assumed to improve the resistance of

the implant against bacterial colonisation. This characteristic might also radically limit the incidence of peri-implantitis. In contact with the bone, however, the laser-ablated surface behaves like a rough surface. Rough implants (e.g., GCS®, Hexacone®) and smooth implants (e.g., GBC®, GCS®) therefore have the same recovery rate.

No-Itis® LASER
THE SURFACE THAT INCREASES
SURVIVAL RATIOS



Rugosity (Ra)	Definition
≤ 0,4 µm	Smooth
0,5 - 1,0 μm	Machined
1,0 - 2,0 μm	Moderately rough
> 2,0 µm	Rough
Rugosity (Ra)	No-Itis® Laser
0,9 μm	Smooth

According to the classification of surface roughness by Albrektsson and Wenneberg, the Ra value corresponds to a moderately rough surface, and our lasered surface actually has the characteristics and many of the advantages of a smooth implant surface. The NO-ITIS® LASER

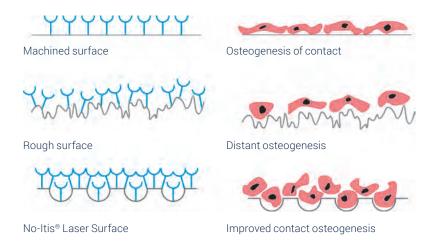
No-Itis® LASER

THE MOST ADVANCED SURFACE A SAFE ANSWER
AGAINST PERI-IMPLANTITIS, MAINTAINING THE
OSSEOINTEGRATION LONG TERM

surface allows the adhesion of the uniform and extended fibrin clot, which then leads to the formation of woven bone. The distribution and size of the concavities favours the accommodation and activity of the osteoblasts, promoting effective osseointegration

#### STABLE FIBRIN MESH

With the NO-ITIS® LASER, as with traditional rough surface, fibrin filaments are almost exclusively attached to surface peaks forming bridges between them (distance osteogenesis). On the NO-ITIS® LASER surface, fibrin forms as a well developed and defined grid mesh even within the concavities, which favours colonisation of the osteogenic cells directly on the surface of the implant (contact osteogenesis).



#### **MAXIMUM CONTACT OSTEOGENESIS**

Thanks to the good cell adhesion, a normal fibrin mesh can be created, adapted and extended on the surface of the NO-ITIS® LASER. This process activates the formation of osteonal bone, also directly in contact with the implant.

**No-Itis® LASER** A UNIQUE SURFACE

#### No-Itis® LASER

# THE IDEAL SURFACE FOR IMMEDIATE OR EARLY LOADING

#### RAPID OSSEOINTEGRATION

The perfectly symmetrical and reproducible topography of the NO-ITIS® LASER surface attracts a greater number of osteogenic cells, allowing them to settle and to proliferate on the implant surface in

a stable and uniform manner. This process activates the formation of bone directly in contact with the implant, resulting in a more dynamic and favourable osseointegration, with greater BIC (Bone implant Contact), and it allows true bone engineering.

- · Smooth implant surface
- Less bacterial adhesion

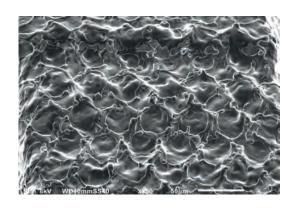


- Increased fibrin adhesion
- More contact osteogenesis on a larger surface



#### No-Itis® LASER - A CLEAN SURFACE

Unlike standard-surface implants (sandblasting and etching, or blasting and anodising), the implants with the NO-ITIS® LASER surface have a completely clean surface without residues nor contaminants. Due to this modern manufacturing process, no residues of jet particles or traces of the chemicals (acids) or anodisation (oxides) used in the etching process can come into contact with the implant. Eliminating the anodisation also eliminates the risk that the top layer of the coloured implant dissolves mechanically.



# No-Itis® LASER A CLEAN SURFACE

#### No-Itis® LASER - THE IDEAL SURFACE FOR BONE CONTACT

The total cleanliness of the NO-ITIS® LASER allows the endosseous implant surface to be increased without having to accept the disadvantages of all the traditional methods for surface roughening.

This new surface generation can coexist for some time with others developed by onewaybiomed GmbH, while regularization of production and stocks, and therefore any reference may not be available on the new No-Itis® Laser surface.

#### **GCS® - INSTRUCTION FOR APPLICATION**

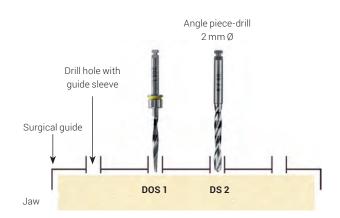
#### **PREPARATORY WORK**

Get your lab to make a drilling template with the specified drill holes for the marking hole.

For the pilot hole, use  ${\tt DOS\,1}$  or  ${\tt BCD\,1}$  (yellow) as the primary reamer. Prepare the implant bed with the form drills at full length.

Please use an intermittent drilling technique with good NaCl cooling. If necessary, the laboratory can insert guide sleeves can in the drill holes (code **BFH**) through which the precise direction of drilling can be set.

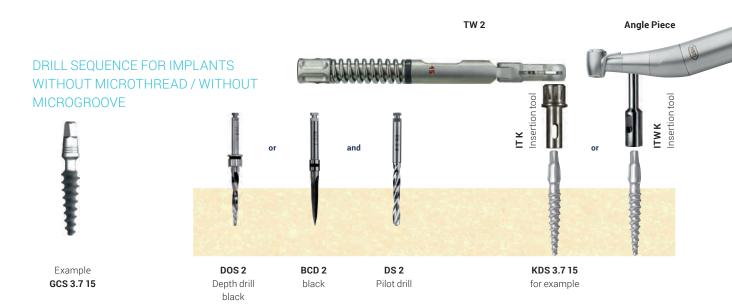
If, due to high drilling resistance in hard bone, it is difficult to reach the complete drilling depth with **DOS 1**, the correct depth can be reached with the cylinder drill **DS 2** (diameter 2 mm).

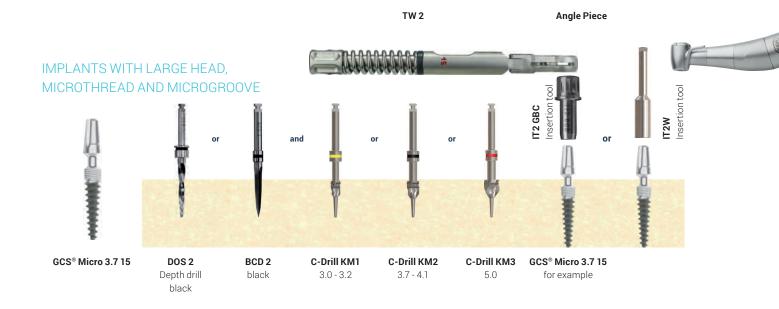


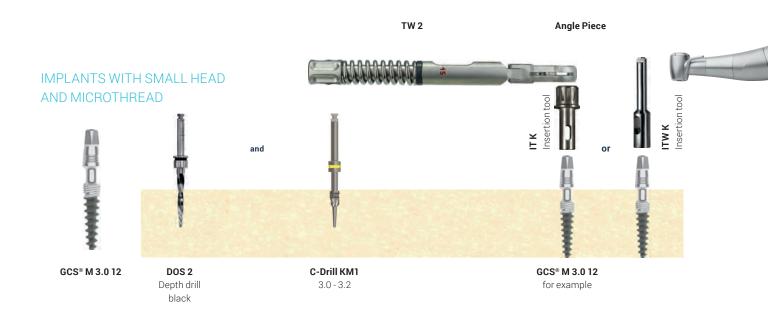
#### **SURGERY**

1. Drilling and preparation/compaction of the implant site

DRILL SE	QUENCE norm	nal / hard bone		DRILL SE	QUENCE soft	bone	
Pilot drill	Form drill	KDS	Implant	Pilot drill	Form drill	KDS	Implant
		KDS 3.0	GCS 3.0				GCS 3.0
	DOS 2	KDS 3.2	GCS 3.2			KDS 3.0	GCS 3.2
DOS 1	D000(4)	KDS 3.7	GCS 3.7	DOS 1	D000	KDS 3.2	GCS 3.7
	DOS 3 (4)	KDS 4.1	GCS 4.1		DOS 2	KDS 3.7	GCS 4.1
	DOS 5	KDS 5.0	GCS 5.0		DOS 3 (4)	KDS 4.1	GCS 5.0







Direction and depth calculation; alternatively BCD 1 "Pathfinder" drill.

Pilot drill DS 2 For use in hard bone in the cortical region only.

KDS Prepare the implant bed in the maxilla stepwise using the appropriate bone-expanding screw and ratchet or motorized insertion tool. Maximum 40-45 Ncm. Remove the bone-expanding screw again.

GCS® B To create the definitive implant cavity for GCS® B implants, it is imperative to use bone-expanding screws. These screws must be screwed to their full depth. They generate the compression and ensure that sufficient space is created for the implant thread in the cortical region.

All GCS® implants are used as compression screws. If possible, the hole should be created substantially thinner than the core diameter of the implant, since only in this way can good bone condensation be achieved. The minimum hole diameter depends on the bone density. For this reason, it is not possible to specify drill sequences that can be used favorably for all bone qualities. As a rule, it is necessary to drill much less into the soft maxilla (e.g. the DOS1 drill only can be used for GCS® implants with diameter 3.0-5.0) than into the well-mineralized mandible, which requires the use of a drilling sequence adjusted to the bone density.

#### 2. Implant packaging



Original packaging



Open the sealed cover at the lid. Remove the label and place it into the patients record.

#### 3. Remove the implant from its packaging



The open pack contains the implant, mounted to a plastic holder.

The pack also contains the lab-set.



Remove the implant by holding onto the plastic holder

The implant is fixed to the holder by a break joint.

#### 4. Handling

Hold the implant by the holder and place the insertion tool on the implant head. The endosseous implant surface must not be touched. Pull out the implant with the plug and then twist off the plug with the needle holder at the predetermined breaking point.

# IMPLANTS WITH LARGE HEAD



GCS® implant with insertion tool IT2W (for angle piece) and IT2 GBC (manual)

GCS® K implant with insertion tool IT TB K

Twisting off the bracket with the needle holder

# IMPLANTS WITH SMALL HEAD

#### GCS® (straight) / GCS® B (flexible)



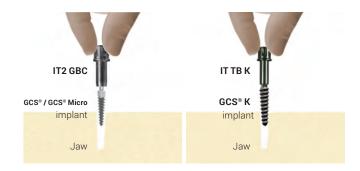
GCS® / GCS® B implants with insertion tool ITW K (for angle piece) and IT K (manual)

Twisting off the bracket with the needle holder

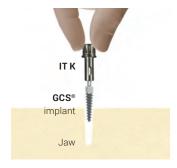
## 5. Insertion using manual tools

Insert the implant by hand until it is firmly seated in the jaw.

# IMPLANTS WITH LARGE HEAD



# IMPLANTS WITH SMALL HEAD



#### 6. Definitive implant insertion

Using the ratchet, torque ratchet or contra-angle, screw the implant clockwise into the cavity. With GCS® B, the use of the torque ratchet is mandatory. The endosseous (blasted) part of the implant must be completely covered by bone. The polished implant neck is located in the mucosa. We recommend screwing the implant into the bone up to 1 mm deeper into the implant neck.

# IMPLANTS WITH LARGE HEAD



The head of the bendable GCS® 3.0 & 3.2, GCS® Micro (all diameters) and GCS® B screws can be bent into the desired position after insertion with the aid of the mounted insertion tool and ratchet

Maximum bend: approx. 15°. Only one bending operation may be performed. In the maxilla, the motorised insertion tool should be used due to its better implant guidance during insertion.



# IMPLANTS WITH SMALL HEAD



#### IMPORTANT NOTE

**GCS B**® implants have a predetermined breaking point integrated into the head. If the preparation with bone-expanding screws was not performed sufficiently, high screwing forces can cause the upper head portion to be torn off.

So that the implant can be screwed out again, an additional square is milled below the breaking point, into which the emergency tool **Tool E** can be inserted. The **Tool E** instrument may only be used to remove the implant.

#### 7. Removing the placement aid from the implant

# IMPLANTS WITH LARGE HEAD



# IMPLANTS WITH SMALL HEAD



#### 8. Result

All implant heads (except for the  $\mathbf{GCS}^{\otimes}$   $\mathbf{K}$ ) can be reshaped by grinding. The implants can be prosthetically supplied immediately if indicated. The definitive superstructure should be cemented within a few days. Immediate prosthetic splinting with a provisional bridge is recommended.

# IMPLANTS WITH LARGE HEAD



# IMPLANTS WITH SMALL HEAD



#### 9. Impression

#### IMPLANTS WITH LARGE HEAD



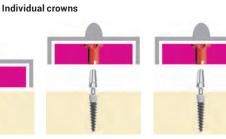
Attachment of the impression post **TSPA 5**, internally round, for **GCS**®



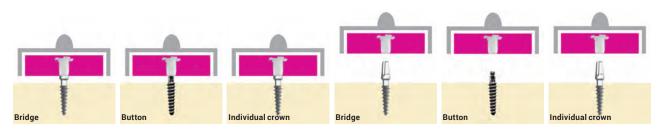
Attachment of the impression post **TSPA 5**, with anti-rotation protection, for **GCS® Micro** 



Pressureless impression taking e.g. with Safeprint®



Removal of the individual scoop from the implant post. The impression post is located in the impression material. The impression can be sent to the laboratory.



Pressureless impression taking e.g. with  $\textbf{Safeprint}^{\$}$ 

Removal of the individual scoop from the implant post.
The impression post is located in the impression material.
The impression can be sent to the laboratory.

## IMPLANTS WITH SMALL HEAD



Attachment of the impression post TSPA 4, Internally round, for GCS®, GCS® B and GCS® T

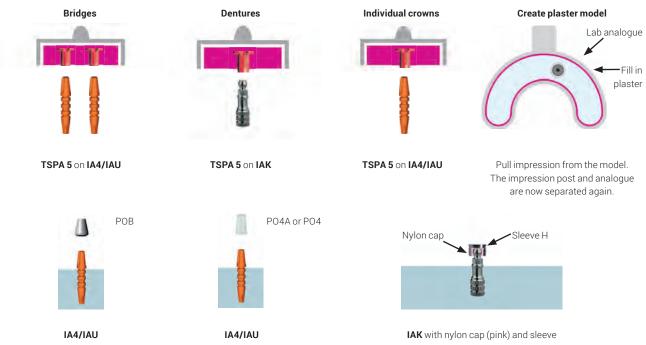
Fill **TSPA 4** inside with **Safeprint® IM** 

Attachment of the impression post TSKPA 4, with anti-rotation protection, for GCS®, GCS® B and GCS® T

#### LABORATORY PROCEDURES

Attachment of the impression post onto lab analogues

#### IMPLANTS WITH LARGE HEAD



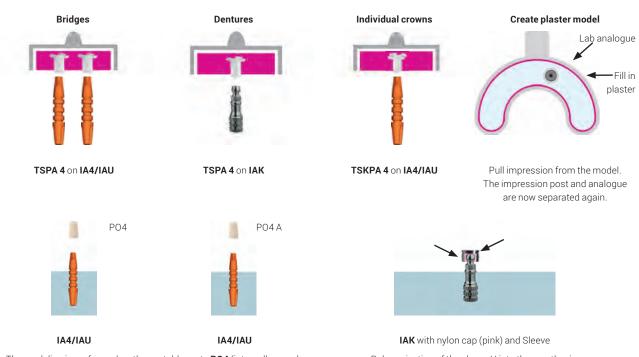
The modeling is performed on the castable parts **PO4/POB** (internally round; for bridges and bars) or **PO4A** (edged inside; for individual crowns).

Polymerization of the sleeve H into the prosthesis.

Press NC/NC1/NC2 into the sleeve.

For initial restorations, NC1 or NC2 should be used.

#### IMPLANTS WITH SMALL HEAD



The modeling is performed on the castable parts **P04** (internally round; for bridges and bars) or **P04A** (edged inside; for individual crowns).

Polymerization of the sleeve H into the prosthesis.

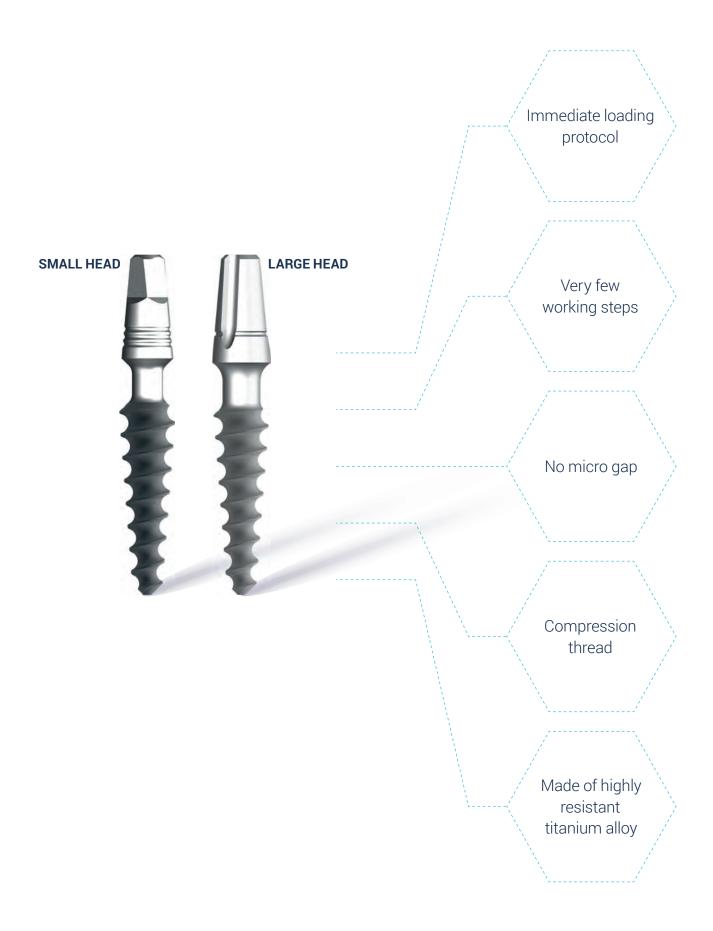
Press NC/NC1/NC2 into the sleeve.

For initial restorations, NC1 or NC2 should be used.

#### SYMBOLS FOR IMPLANT PROPERTIES AND PROSTHETIC SOLUTIONS

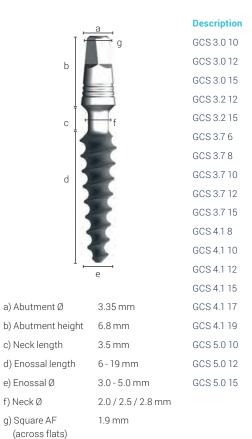


### THE ADVANTAGES OF GCS® CLASSIC AND CLASSIC X IMPLANTS



#### **GCS® CLASSIC IMPLANTS**

Implants with small head for crowns and bridges.



Enossal Ø	Enossal length	Neck Ø	REF	Price cat.
3.0 mm	10 mm	2.0 mm	BM1030	F
3.0 mm	12 mm	2.0 mm	BM1031	F
3.0 mm	15 mm	2.0 mm	BM1032	F
3.2 mm	12 mm	2.0 mm	BM1033	F
3.2 mm	15 mm	2.0 mm	BM1034	F
3.7 mm	6 mm	2.5 mm	BM6204	F
3.7 mm	8 mm	2.5 mm	BM6205	F
3.7 mm	10 mm	2.5 mm	BM1035	F
3.7 mm	12 mm	2.5 mm	BM1036	F
3.7 mm	15 mm	2.5 mm	BM1037	F
4.1 mm	8 mm	2.8 mm	BM1038	F
4.1 mm	10 mm	2.8 mm	BM1039	F
4.1 mm	12 mm	2.8 mm	BM1040	F
4.1 mm	15 mm	2.8 mm	BM1041	F
4.1 mm	17 mm	2.8 mm	BM1042	F
4.1 mm	19 mm	2.8 mm	BM1043	F
5.0 mm	10 mm	2.8 mm	BM1044	F
5.0 mm	12 mm	2.8 mm	BM1045	F
5.0 mm	15 mm	2.8 mm	BM1046	F





GCS 3.0 - 3.2 Max. insertion torque 50 Ncm
GCS 3.7 - 5.0 Max. insertion torque 80 Ncm



**GCS**® implants are delivered incl. lab-set REF 462353, consisting of



Double analogue, plastic

IA4/IAU

BM5118



Impression post castable, internally edged, for large head

PA X

BM1429



Impression post castable, internally round, for small head

TSPA 4

BM1394

**NOTE** This is a standard lab-set and therefore contains parts for both **LARGE** abutment heads (**PA X**) and **SMALL** abutment heads (**TSPA 4**).

#### **GCS® CLASSIC X IMPLANTS**

Large head for easy prosthetic handling.



361		
		GCS X 3.2 12
c   }	· f	GCS X 3.2 15
† <b>4</b>		GCS X 3.7 10
13		GCS X 3.7 12
d 3		GCS X 3.7 15
5		GCS X 4.1 8
		GCS X 4.1 10
		GCS X 4.1 12
	E .	GCS X 4.1 15
1	e	GCS X 4.1 17
		GCS X 4.1 19
a) Abutment Ø	3.9 mm	GCS X 5.0 10
b) Abutment height	7.2 mm	GCS X 5.0 12
c) Neck length	3.0 mm	GCS X 5.0 15
d) Enossal length	8 - 19 mm	

3.0 - 5.0 mm

2.0, 2.5, 2.8 mm

Enossal Ø	<b>Enossal length</b>	Neck Ø	REF	Price cat.
3.0 mm	10 mm	2.0 mm	BM1110	F
3.0 mm	12 mm	2.0 mm	BM1111	F
3.0 mm	15 mm	2.0 mm	BM1112	F
3.2 mm	12 mm	2.0 mm	BM1113	F
3.2 mm	15 mm	2.0 mm	BM1114	F
3.7 mm	10 mm	2.5 mm	BM1115	F
3.7 mm	12 mm	2.5 mm	BM1116	F
3.7 mm	15 mm	2.5 mm	BM1117	F
4.1 mm	8 mm	2.8 mm	BM1118	F
4.1 mm	10 mm	2.8 mm	BM1119	F
4.1 mm	12 mm	2.8 mm	BM1120	F
4.1 mm	15 mm	2.8 mm	BM1121	F
4.1 mm	17 mm	2.8 mm	BM1107	F
4.1 mm	19 mm	2.8 mm	BM1108	F
5.0 mm	10 mm	2.8 mm	BM1122	F
5.0 mm	12 mm	2.8 mm	BM1123	F
5.0 mm	15 mm	2.8 mm	BM1109	F





GCS® implants are delivered incl. lab-set REF 462353, consisting of

Description

GCS X 3.0 10 GCS X 3.0 12 GCS X 3.0 15



e) Enossal Ø

f) Neck Ø

Double analogue, plastic

IA4/IAU

BM5118



Impression post castable, internally edged, for large head

PA X

BM1429



Impression post castable, internally round, for small head TSPA 4

BM1394

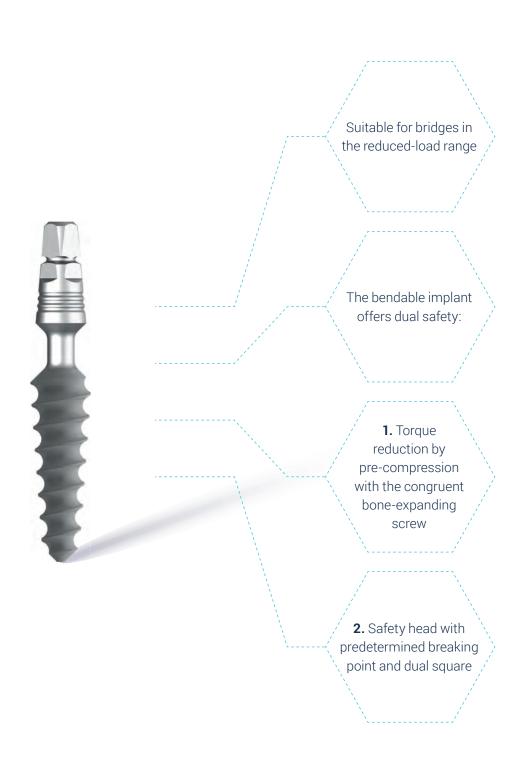
**NOTE** This is a standard lab-set and therefore contains parts for both **LARGE** abutment heads (**PA X**) and **SMALL** abutment heads (TSPA 4).





(not secured against rotation).

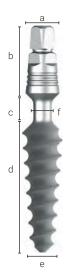
### THE ADVANTAGES OF GCS® B IMPLANTS



#### GCS® B IMPLANTS WITH SMALL HEAD FOR BRIDGES

GCS® B implants with bendable neck (use after pre-drilling and preparation with the bone-expanding screw). Suitable for bridges in the reduced-load range (no individual tooth restorations). The bendable implant now offers dual safety:

- 1. Torque reduction by pre-compression with the congruent bone-expanding screw
- 2. Safety head with predetermined breaking point and dual square



Description	Code KDS	Enossal Ø	Enossal length	REF	Price cat.
GCS B 3.0 15	С	3.0 mm	15 mm	BM1019	F
GCS B 3.2 12	D	3.2 mm	12 mm	BM1020	F
GCS B 3.2 15	E	3.2 mm	15 mm	BM1021	F
GCS B 3.7 12	F	3.7 mm	12 mm	BM1022	F
GCS B 3.7 15	G	3.7 mm	15 mm	BM1023	F
GCS B 4.1 15	L	4.1 mm	15 mm	BM1024	F
GCS B 4.1 17	М	4.1 mm	17 mm	BM1025	F

The predetermined fracture site integrated in the abutment prevents the twisting off of the abutment head from the endosseous implant part. The implant socket has to however always be pre-compressed using the bone-expanding screw.

a) Abutment Ø	3.35 mm
b) Abutment height	6.8 mm
c) Neck length	3.0 mm
d) Enossal length	12 - 17 mm
e) Enossal Ø	3.0 - 4.1 mm
f) Neck Ø	1.8 mm

# f) Neck Ø 1.8 mm Max. insertion torque 45 Ncm









GCS® implants are delivered incl. lab-set REF 462353, consisting of



Double analogue, plastic

IA4/IAU

BM5118



Impression post castable, internally edged, for large head

PA X BM1429



Impression post castable, internally round, for small head

TSPA 4

BM1394

**NOTE** This is a standard lab-set and therefore contains parts for both **LARGE** abutment heads (**PA X**) and **SMALL** abutment heads (**TSPA 4**).



After insertion, the bendable GCS® B screws can be bent into the desired position using the inserted insertion aid and ratchet. Maximum bend: approx. 15°. Only one bending process may take place. The motor insertion aid should be used in the upper jaw because of the better implant guidance when screwing in.

#### **IMPRESSION TAKING AND LABORATORY ACCESSORIES**

Description	Unit	Code	REF	Price cat.
Impression post made of POM Castable, internally round	Pack of 5	TSPA 4*	BM1394	В
ALTERNATIVE Impression post made of POM Castable, internally round	Pack of 5	TSPA 4*	BM1372	В
Impression post Castable, internally edged	Pack of 5	TSKPA 4	BM1395	В
Double analogue, plastic For large and small head	Pack of 5	IA4/IAU	BM5118	В
Double analogue, metal For large and small head	1 piece	IA4/IAU	BM5119	A
Castable abutment and base for provisionals For small head 7 mm high, white, internally round	Pack of 5	P04	BM1317	В
Castable abutment and base for provisionals 7 mm high, white, internally edged	Pack of 5	PO4A	BM1318	В

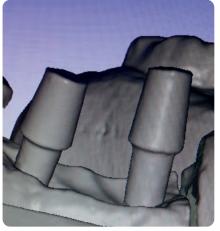
<sup>\*</sup>TSPA 4 and 5 For impressions on ground-down implant heads.

This ring-transfer exposes the lower border of the abutment head. The impression is then poured with extra-strong gypsum or epoxi-resin. For this techniques no implant analogues are needed. Material: PP

#### **SCANNER ANALOG**

Scanner analogue for large and small implant head, self-descriptive. These analogues do not need to be sprayed with spray paint. They can be pulled out of the model with anti-rotation protection. Matching impression posts: **TSPA 4** and **TSPA 5** 





Use example for self-descriptive scanner analogue

### **CEMENTABLE ANGULATION ADAPTER** (TI6AL4V)

These adapters are mounted on GCS® implants to compensate for the insertion direction. Plastic cements are preferably used. The implant head must be roughened beforehand. The protruding head parts are then removed. The impression is taken directly on the adapter.





<b>Description</b> Adapter, 15° For small head	Code AA15 KK	REF BM1303	Price cat.
Adapter, 25° For small head	AA25 KK	BM1305	С
Adapter, 15° For large head	AA5 15°	BM1197	С
Adapter, 25° For large head	AA5 25°	BM1198	С

#### **CASTABLE CROWN BASE**

These adapters are used by the dental technician for modeling of bridge frames. In the metal try-in, the protruding head parts are removed by the dentist.



Description
Adapter 15°
For small head
Reducible and castable
Pack of 5

Description

Height Code 7.5 mm

AAL 15 KK

**REF** BM1308 Price cat. С

#### **LAB ANALOGUE**



Description
Abutment analogue for angulation adapte
For small head
15° and 25°

Code AAA

BM1309

Price cat.

#### CASTABLE PART AND IMPRESSION CAP



Description	Code	REF	Price cat.
Castable abutment and transfer for AAA	PA AAA	BM1310	В

#### **KDS** BONE EXPANDING SCREWS

For all **GCS® B** screw implants, bone-expanding screws are available as tools to create the definitive implant cavity. Basically, for each implant prior to insertion of a **GCS® B** screw implant, a bone compression with the bone-expanding screw should be performed. In addition, with a narrow alveolar ridge, an expansion of the alveolar ridge can be performed with the bone-expanding screw. By inserting the bone-expanding screw, it can be checked whether the **GCS® B** screw implant can be inserted into the bone easily and fully. Titanium alloy Ti6Al4V, machined. Tighten with **IT K**, **ITS K** or **ITX K** using the torque ratchet **TW2** (max. 45 Ncm), or alternatively **RAT 2**. Package unit: 1 piece, non-sterile



Description	Code KDS	Enossal Ø	<b>Enossal length</b>	Neck Ø	REF	Price cat.
KDS 3.0 10	Α	3.0 mm	10 mm	2.0 mm	BM1173	F
KDS 3.0 12	В	3.0 mm	12 mm	2.0 mm	BM1174	F
KDS 3.0 15	С	3.0 mm	15 mm	2.0 mm	BM1003	F
KDS 3.2 12	D	3.2 mm	12 mm	2.5 mm	BM1175	F
KDS 3.2 15	Е	3.2 mm	15 mm	2.5 mm	BM1176	F
KDS 3.7 12	F	3.7 mm	12 mm	2.8 mm	BM1177	F
KDS 3.7 15	G	3.7 mm	15 mm	2.8 mm	BM1004	F
KDS 4.1 8	Н	4.1 mm	8 mm	2.8 mm	BM1178	F
KDS 4.1 10	1	4.1 mm	10 mm	2.8 mm	BM1179	F
KDS 4.1 12	K	4.1 mm	12 mm	2.8 mm	BM1180	F
KDS 4.1 15	L	4.1 mm	15 mm	2.8 mm	BM1005	F
KDS 4.1 17	М	4.1 mm	17 mm	2.8 mm	BM1181	F
KDS 4.1 19	N	4.1 mm	19 mm	2.8 mm	BM1182	F

a) Abutment Ø 3.35 mm
b) Abutment height 6.8 mm
c) Enossal length 8-19 mm
d) Enossal Ø 3.0-4.1 mm
e) Neck Ø 2.0-2.8 mm

The bone-expanding screws can easily be screwed in using suitable insertion tools and immediately screwed out again after reaching the full insertion depth. Subsequently, the GCS® B implant is inserted. With the GCS® B (bendable), the use of bone-expanding screws is mandatory regardless of the region, so that the shear forces occurring during insertion do not fracture the implant neck.

Do not use for GCS  $^{\! \otimes}$  implants with microthread.

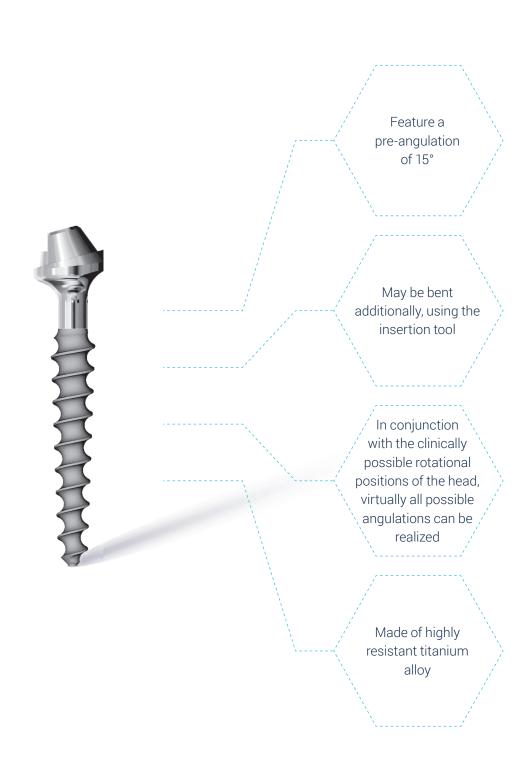
#### **AUXILIARY TOOL**

Auxiliary tool for determining the plane of bite in relation to the Camper's plane and the bipupillary line during the creation of the upper jaw part of the bite registration. Can be used with wax or silicone.



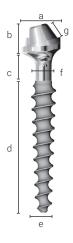
REF Price cat.
BM1199 N

### THE ADVANTAGES OF GCS® MU IMPLANTS



#### GCS® MU IMPLANTS

GCS® MU implants feature a pre-angulation of 15 degrees. GCS® MU may be bent additionally, using the insertion tool. In conjunction with the clinically possible rotational positions of the head, virtually all possible angulations can be realized. Material Ti6Al4V.



Description
GCS MU 3.0 15
GCS MU 3.2 12
GCS MU 3.2 15
GCS MU 3.7 10
GCS MU 3.7 12
GCS MU 3.7 15
GCS MU 4.1 8
GCS MU 4.1 10
GCS MU 4.1 12
GCS MU 4.1 15
GCS MU 5.0 10
GCS MU 5.0 12

Enossal Ø
Enossai
3.0 mm
3.2 mm
3.2 mm
3.7 mm
3.7 mm
3.7 mm
4.1 mm
4.1 mm
4.1 mm
4.1 mm
5.0 mm
5.0 mm

Enossal length	REF	Price cat.
15 mm	BM1152	L
12 mm	BM1233	L
15 mm	BM1234	L
10 mm	BM1235	L
12 mm	BM1236	L
15 mm	BM1153	L
8 mm	BM1237	L
10 mm	BM1238	L
12 mm	BM1154	L
15 mm	BM1155	L
10 mm	BM1156	L
12 mm	BM1139	L



c) Trans-mucosal height

d) Enossal length

e) Enossal Ø

f) Neck Ø

g) Height of connecting part

Prosthetic screw

4.8 mm
3.7 mm
3 mm
8 - 15 mm
3.0 - 5.0 mm
2 mm
2 mm
SFK MU







#### MULTI-UNIT LAB SET



Description	Code	REF	Price cat.
<b>Titanbasis</b> Use with SF K MU	T-Base MU	BM3169	
Castable abutment Use with T-Base and SF KMU	PA2 MU	BM3170	
Prosthetic screw For GCS® MU and GBC® MU	SF K MU	BM3159	
COMPLETE SET		BM3112	E

#### **ACCESSORIES** SINGLE-PIECE MULTI-UNIT IMPLANTS

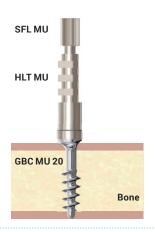
	Description	Code	REF	Price cat.
d	Insertion tool for GCS® MU, GBC® MU and Hexacone® Plus MU 15° Use with IT2 GBC, IT2 S GBC, AH MU Tool HT 1.25	ITX MU15	BM3222	G
-	Insertion tool long For large head Use with RAT2 and TW2, length 19 mm	UST 1 M	BM2064	E
	Insertion tool short For large head Use with RAT2 and TW2, length 7 mm	UST 2 M	BM2110	E
	Adapter for handgrip Fits ITX MU15 (REF BM3222)	Adapter UST 1	BM2063	F
<i>y</i>	Description	Code	REF	
5	Hex Instrument 1.25, length 14 mm short	HTS 1.25	BM3023	С
	Hex Instrument 1.25, length 21 mm medium	HT 1.25	BM3022	С
	Hex Instrument, length 45 mm long	HTX 1.25	BM7764	С
	Scan abutment for MU implants Incl. screw SSA MU Sterilisable, two-part, material Ti6Al4V	SAB MU	BM3135	D
	Prosthetic screw for GCS® MU and GBC® MU	SF K MU	BM3159	В
Parts for passive connection of the bridge frame	Castable abutment Use with T-Base and SF K MU	PA2 MU	BM3170	В
I	Titanium base * Use with SF K MU (REF 418164) For GCS® MU, GBC® MU and Hexacone® Plus MU	T-Base MU	BM3169	В
	Prosthetic screw For GCS® MU and GBC® MU	SF K MU	BM3159	В
Parts for UCLA technique	Castable abutment UCLA For direct use on MU implants SF K MU sold separately	PA MU	BM3200	В
Part for UCLA technique & passive connection	Digital lab analogue for MU implants* For GCS® MU, GBC® MU and Hexacone® MU	IA K MU	BM3178	В
<b>II</b>	Long screw for prosthetic use or as pick-up screw for use with HLT MU Tool: HT 1.25, material Ti6Al4V	SFL MU	BM3218	В
	Transfer for pick-up impressions Straight Delivery incl. SFL MU Works with all MU implat	HLT MU	BM3152	С
	Temporary base SF K MU or SFL MU sold separately	TC MU	BM3151	D

#### **APPLICATION** OF SINGLE-PIECE MULTI-UNIT IMPLANTS

1.

Tighten screw SFL MU with the tool HT 1.25.

Fix the transfer with the long screw, then take pick-up-im-pression.



4.

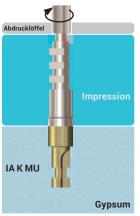
T-Base is sandblasted **from the outside** and cleaned.

The bridge frame is sandblasted from below in the area of the implants.



2.

Connect the transfer to the implant analogue (IA K MU) and pour the impression with gypsum.



5

All T-Base are fixed to the implants with SF K MU or the long screw SFL MU. Then all T-Base are glued with adhesive cement to the bridge frame.

This guarantees a passive fit. Composite excess is removed and the site is polished.



3. a

Connect PA MU with SF K MU on the analogue IA K MU. Tighten screw SFL MU with the tool HT 1.25.

Now the modulation can be created and the frame is veneered. Veneering is possible with acryl, composite and ceramics.



6

Now the bridge may be screwed on passive with SF K MU.

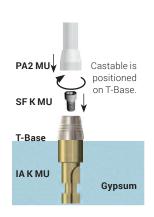
Screw canals are closed with temporary filling material or composite, taking into consideration that later access must be possible.



3. b

T-Base is positioned over the analogue and screwed on with SF K MU. The cartable PA2 MU is then fitted on top of the T-Base

Now the modulation is made. Veneering is possible with acryl, composite and ceramics.

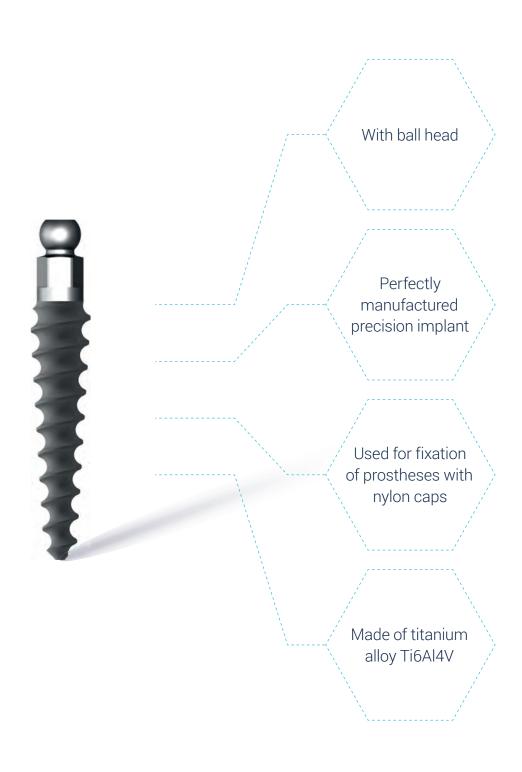


# **Application** of insertion tool MU

Example for insertion tool ITX MU15 on the implant GBC® MU / GCS® MU.



### THE ADVANTAGES OF GCS® K IMPLANTS



#### GCS® K IMPLANTS

Perfectly manufactured precision implant made of highly fracture-resistant titanium alloy Ti6Al4V. GCS § K implants with ball head are used for fixation of prostheses with nylon caps.

b) Abutment height

d) Enossal length

f) Height of hexagon

c) Length

e) Enossal Ø

4.1 mm

5.6 mm

1.8 mm

12 - 15 mm

3.0 / 3.7 / 4.1 mm





Description	Code KDS	Enossal Ø	Enossal length	REF	Price cat.
GCS K 3.0 12	В	3.0 mm	12 mm	BM1169	F
GCS K 3.0 15	С	3.0 mm	15 mm	BM1168	F
GCS K 3.7 12	F	3.7 mm	12 mm	BM1170	F
GCS K 3.7 15	G	3.7 mm	15 mm	BM1171	F
GCS K 4.1 15	L	4.1 mm	15 mm	BM1172	F
a) Ball head Ø	2.5 mm				

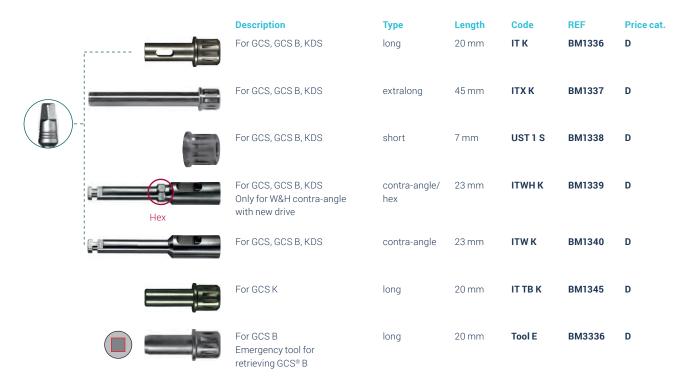
#### **ACCESSORIES**

<b>Description</b> IAK Lab analogu	ie	Unit	Code IAK	REF BM1324	Price cat. B
Nylon cap transp (EXTERNAL PRO	parent, Pull-off force ca. 1200g DDUCT)	Pack of 2	NC	465028	A1
Nylon cap pink, l (EXTERNAL PRO	Pull-off force ca. 800g DDUCT)	Pack of 2	NC 1	465029	A1
Nylon cap yellov (EXTERNAL PRO	v, Pull-off force ca. 500g DDUCT)	Pack of 2	NC 2	465030	A1
Green, strong	Nylon caps R-NC With increased friction strength Only with reduced diameter ball	Pack of 2	R-NC	465034	A1
Pink, medium	≤ 2.3 mm (EXTERNAL PRODUCT)	Pack of 2	R-NC 1	465033	A1
Orange, soft		Pack of 2	R-NC 2	465032	A1
Metal sleeve for (EXTERNAL PRO			Н	465031	В
Giessbare Kugel	for einteiligen Abdruck with Stegver	bindung	PA SB	BM6652	Α

#### **BALL ADAPTER** (SPARE BALL)



#### **INSERTION TOOLS**



#### **INSTRUMENTS** AND **TOOLS**

	Description	Length	Code	REF	Price cat.
	Drill extension Extends by 19 mm		DX 2	BM1349	D
	Standardized probe. 1 mm scale For radiological measurements	22 mm	PDG	BM1350	Α
	Radiological measure pin Fits DOS 1		RMS	BM1364	Α
Out	Ratchet for all Hex instruments and insertion tools		RAT2	BM1352	К
C TO THE	Torque wrench 10-70 Ncm		TW2 *	BM1356	S

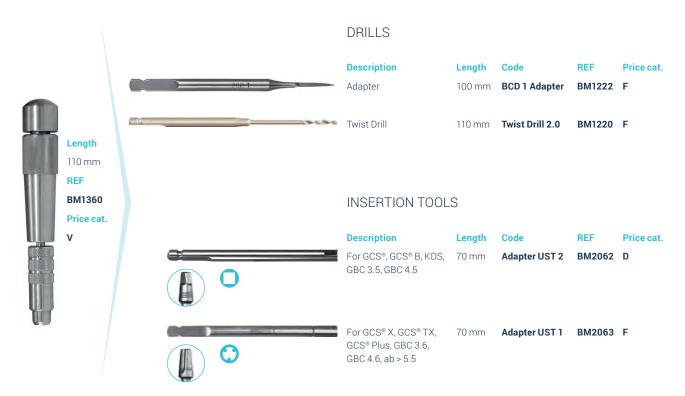
<sup>\*</sup> It is recommended to have the torque ratchets recalibrated by us once a year.

#### HARD METAL BONE CUTTER

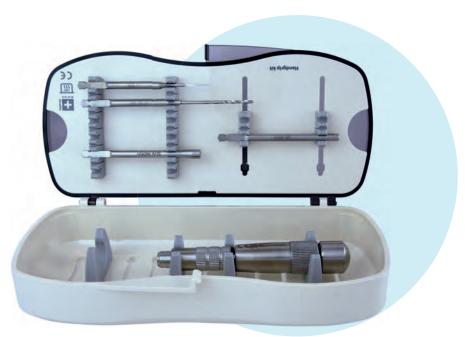


#### HANDGRIP SELF LOCKING, CANNOT BE DISMANTLED

Please note the cleaning instructions on www.implant.com/en/downloads



#### **HANDGRIP** TRAY



Size of closed tray **W** 195 mm **D** 90 mm **H** 45 mm
For all autoclaves

Description	Length	REF	<b>Price €</b>
BCD 1 Adapter	100 mm	BM1222	
Twist Drill 2.0	110 mm	BM1220	
Adapter UST 2	70 mm	BM2062	
Adapter UST 1	70 mm	BM2063	
Handgrip	110 mm	BM1360	
Handgrip tray w/o content		BM2061	upon request
Handgrip tray with content		SBM2061	upon request

Please read our detailed instructions for cleaning and re-sterilization of surgical instruments on  ${\bf https://implant.com/en/downloads}$ 

## **INSTRUMENT T**RAY FOR GCS® AND GBC®

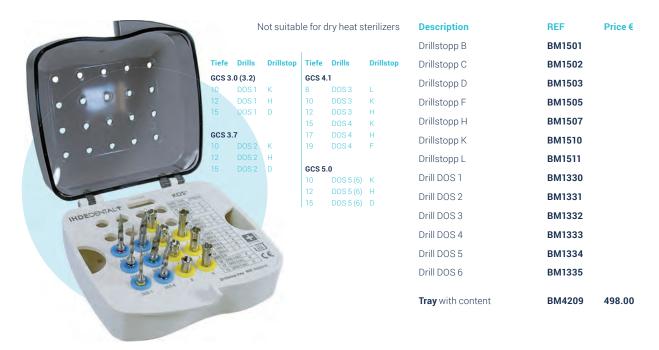


Size of closed tray **W** 175 mm **D** 145 mm **H** 65 mm For all autoclaves. Autoclaveable up to 134° C, not suitable for dry heat sterilizers.

Description	System	Head	REF	Description	System	REF	Price €
IT2 GBC	GCS/GBC	large	BM2064	Twist Drill 2.0 30	GBC*	BM1362	
IT2 S GBC	GCS/GBC	large	BM2110	Twist Drill 2.0 21	GBC*	BM1361	
IT2 W	GCS/GBC	large	BM3339	Twist Drill 2.5 21	GBC*	BM1363	
IT K	GCS/GBC	small	BM1336	BCD 1	GCS/GBC	BM2100	
UST 1 S	GCS/GBC	small	BM1338	BCD 2	GCS/GBC	BM2101	
ITWK	GCS/GBC	small	BM1340	BCD 3	GCS/GBC	BM2102	
ITWH K	GCS/GBC	small	BM1339	BCDX 1	GCS/GBC	BM2103	
DOS 1	GCS		BM1330	BCDX 2	GCS/GBC	BM2104	
DOS 2	GCS		BM1331	BCDX 3	GCS/GBC	BM2105	
DOS 3	GCS		BM1332	RMS	GCS/GBC	BM1364	
DOS 4	GCS		BM1333	RMS	GCS/GBC	BM1364	
DOS 5	GCS		BM1334	DX 2	GCS/GBC	BM1349	
C-Drill KM 1	GCS		BM1071	TW2	GCS/GBC	BM1356	
C-Drill KM 2	GCS		BM1072				
C-Drill KM 3	GCS		BM1073	Instrument tray w/o	content	BM4264	upon request
DS 2	GCS		BM1359	Instrument tray with	n content	SBM4264	upon request
ITTBK	GCS		BM1345				

<sup>\*</sup> The content for the system GBC  $^{\tiny \scriptsize (\!0\!)}$  is optional

#### **DRILLSTOP** TRAY



#### IT HAS BEEN SCIENTIFICALLY PROVEN

**Heatless® drills by Dr. Ihde Dental generate 55 % less heat** than traditional bone drills from other manufacturers. This makes it possible to use higher rotational speeds: between 3,000 and 5,000 rpm are recommended with good external cooling and intermittent drill technique.

#### **STARTER** TRAY



Description	REF	Price €
IT K	BM1336	
UST 1 S	BM1338	
C-Drill KM 1	BM1071	
C-Drill KM 2	BM1072	
C-Drill KM 3	BM1073	
UST 1 M	BM2064	
UST 2 M	BM2110	
DOS 1	BM1330	
DOS 2	BM1331	
DOS 3	BM1332	
BCDX 1	BM2103	
Torque wrench TW2	BM1356	
HT 1.25	BM3022	optional
ITX MU 15	BM3222	CO
Starter tray w/o content	BM6500	upon request
Starter tray with content	SBM6500	upon request

#### INDICATIONS GCS® II GCS® MICRO

- · Anchorage of crowns, bridges and bars, with the presence of adequate bone supply in terms of bone quality, bone width and bone height
- · Anchorage of prostheses via bar and button anchorage systems
- Not for use in combination with simultaneous bone augmentations

#### RESTRICTIONS FOR GCS® B APPLICATION

- · These two implant types may only be used as support implants in the reduced-load area
- Splinting of at least three and possibly several implants for cross arch stabilisation
- At least one GCS® or GCS® Micro implant must be involved in the construction
- · The prosthetic restoration must be securely fixed (with definitive cements)
- Not to be used for segmented bridges without the involvement of at least two GCS® screws
- If in doubt, angulation adapters on GCS® screws are preferable to the GCS® B implant
- Not to be used for additional abutments in combination with natural teeth
- · Not to be used under off-axis load as well as in deep-bite cases in the maxillary and mandibular anterior region
- · Max. width of occlusal surface 5 mm
- · Not to be used as terminal abutments
- Bendable up to 13 degrees

#### NOTES ON THE CARE OF SURGICAL STEEL INSTRUMENTS

Surgical steel instruments can quickly become damaged if inadequately or improperly cared for. Only the special solvents for cleaning surgical steel should be used; in case of doubt, consult **Dr. Ihde Dental GmbH / AG**.

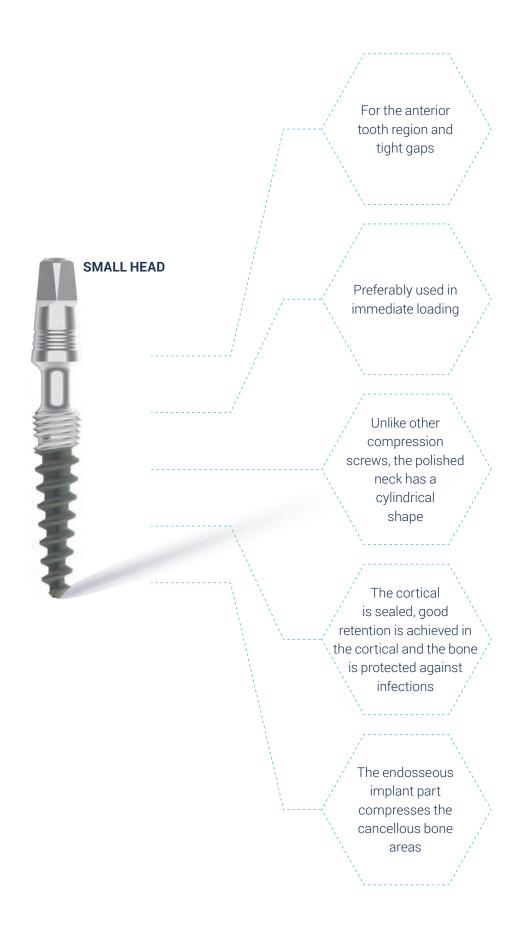
The following are not recommended:

- Disinfectants/cleaners with a high chlorine content
- · Disinfectants/cleaners with a high oxalic acid content

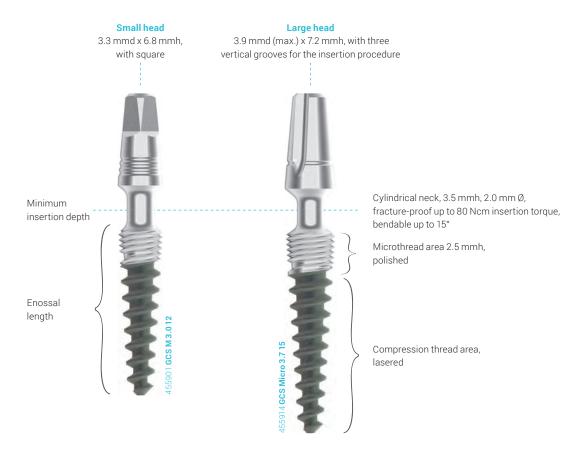
For instruments with colour coding, the following are <u>NOT</u> recommended:

- · Excessively high solvent concentrations, disinfectants/cleaners with the components mentioned above
- Excessive temperatures during cleaning and sterilization (no dry heat sterilization)

#### **THE ADVANTAGES** OF GCS® M IMPLANTS



#### **GCS® M AND MICRO IMPLANTS**



#### **MATERIAL**

**Ti6AL4V**, also known as "Grade 5", is the high-purity version of the conventional 6/4 Ti alloy, which is used for more than 50% of all metallic human implants. This material is the first choice for all applications which require high stability, corrosion resistance and mechanical strength. This is why today's most modern dental implant designs are made of this material. This titanium alloy is superior to the alternatively used pure titanium in terms of stability by more than 25%. Also regarding biocompatibility and the support of bone cell growth, this titanium alloy shows advantages compared to pure titanium.

#### **FUNCTIONALITY**

The one-piece GCS® M / GCS® Micro dental implant is preferably used in immediate loading. Unlike other compression screws, the polished neck has a cylindrical shape. Thus, the cortical is sealed, good retention is achieved in the cortical and the bone is protected against infections. At the same time, the endosseous implant part compresses the cancellous bone areas.

**NOTE** The smooth microthread must be completely submerged below the bone level. The cylindrical neck must extend into the bone at least 1 mm deep. Therefore, the implant must be selected so that at least 1.5 mm more usable vertical bone is present than the nominal length of the implant. **Example** For GCS Micro 3.7 15, 17 mm of usable vertical bone must be present. If in doubt, a shorter implant should be selected so as to ensure a sufficient insertion depth.

#### **DRILLING PROCEDURE**

The pilot hole is made with the drills of the GCS® system. Except in very dense mandibular bone, the pilot hole is usually sufficient with BCD1 or DOS1.

#### **INSERTION**

The implant can be inserted most easily with the handgrip (REF 311431) and the adapter (REF 900 037). When using the ratchet RAT2, small or medium insertion tools are used. Max. torque is 80 Ncm.

#### THE IMPLANTS ARE SUPPLIED WITH TWO DIFFERENT HEAD SIZES

GCS® M implants are supplied with a small head; they also fit in small individual tooth gaps.

GCS® Micro implants are supplied with a large head. This head permits easy and speedy prosthetic restoration.

#### GCS® M IMPLANTS WITH SMALL ABUTMENT HEAD

 ${\tt GCS@M\ with\ small\ head\ for\ the\ anterior\ tooth\ region\ and\ tight\ gaps.\ Material\ Ti6Al4V.}$ 



Description	Enossal Ø	Enossal length	Neck Ø	Drill *	REF	Price cat.
GCS M 3.0 10	3.0 mm	10 mm	2 mm		BM6252	F
GCS M 3.0 12	3.0 mm	12 mm	2 mm	DOS 1	BM6253	F
GCS M 3.0 15	3.0 mm	15 mm	2 mm	or	BM6254	F
GCS M 3.2 12	3.2 mm	12 mm	2 mm	BCD 1	BM6255	F
GCS M 3.2 15	3.2 mm	15 mm	2 mm		BM6256	F
GCS M 3.7 6	3.7 mm	6 mm	2 mm		BM6250	F
GCS M 3.7 8	3.7 mm	8 mm	2 mm	DOS 2	BM6251	F
GCS M 3.7 10	3.7 mm	10 mm	2 mm	or	BM6257	F
GCS M 3.7 12	3.7 mm	12 mm	2 mm	BCD 2	BM6258	F
GCS M 3.7 15	3.7 mm	15 mm	2 mm		BM6259	F

<sup>\*</sup> In very hard bone, it may be additionally necessary to make a cylindrical hole with a twist Drill 2.5 mmd to a depth of 2.5 mm.

 a) Abutment Ø
 3.35 mm

 b) Abutment height
 6.8 mm

 c) Neck length
 3.5 mm

 d) Enossal length
 6 - 15 mm

 e) Enossal Ø
 3.0 - 3.7 mm

 f) Neck Ø
 2.0 mm

 g) Square AF (across flats)
 1.9 mm







# 1CLUSIVE

**GCS**® implants are delivered incl. lab-set REF 462353, consisting of



Double analogue, plastic

IA4/IAU

BM5118



Impression post castable, internally edged, for large head

PA X

BM1429



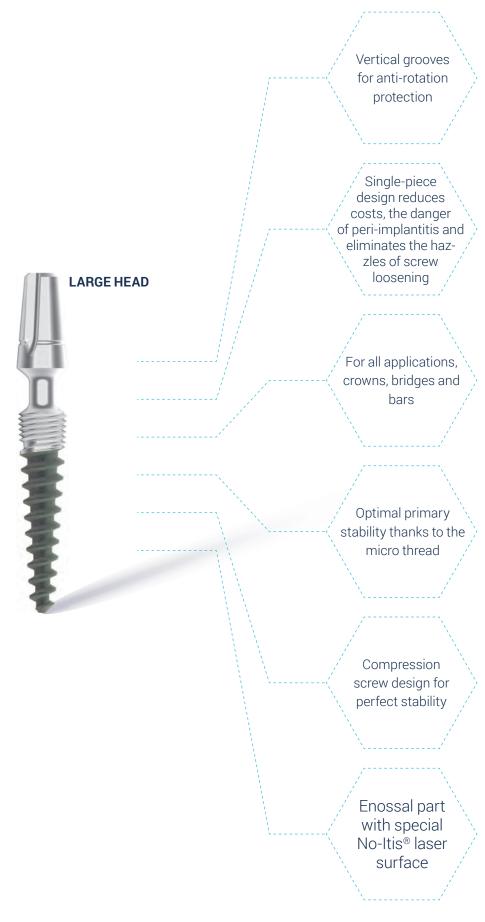
Impression post castable, internally round, for small head

TSPA 4

BM1394

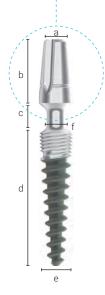
**NOTE** This is a standard lab-set and therefore contains parts for both **LARGE** abutment heads (**PA X**) and **SMALL** abutment heads (**TSPA 4**).

#### **THE ADVANTAGES** OF GCS® MICRO IMPLANTS



#### GCS® MICRO IMPLANTS WITH LARGE ABUTMENT HEAD

GCS® Micro with large head for all applications. Material Ti6Al4V.



Description	Enossal Ø	Enossal length	Neck Ø	Drill *	REF	Price cat.
GCS Micro 3.7 6	3.7 mm	6 mm	2.0 mm	DOS2/BCD2	BM1460	F
GCS Micro 3.78	3.7 mm	8 mm	2.0 mm	DOS2/BCD2	BM1461	F
GCS Micro 3.7 10	3.7 mm	10 mm	2.0 mm	DOS2/BCD2	BM1462	F
GCS Micro 3.7 12	3.7 mm	12 mm	2.0 mm	DOS 2 / BCD 2	BM1463	F
GCS Micro 3.7 15	3.7 mm	15 mm	2.0 mm	DOS 2 / BCD 2	BM1464	F
GCS Micro 4.1 8	4.1 mm	8 mm	2.0 mm	DOS3/BCD3	BM1470	F
GCS Micro 4.1 10	4.1 mm	10 mm	2.0 mm	DOS3/BCD3	BM1471	F
GCS Micro 4.1 12	4.1 mm	12 mm	2.0 mm	DOS3/BCD3	BM1472	F
GCS Micro 4.1 15	4.1 mm	15 mm	2.0 mm	DOS3/BCD3	BM1473	F
GCS Micro 5 10	5.0 mm	10 mm	2.0 mm	DOS 5	BM1475	F
GCS Micro 5 12	5.0 mm	12 mm	2.0 mm	DOS 5	BM1476	F

<sup>\*</sup> In very hard bone, it may be additionally necessary to make a cylindrical hole with a twist Drill 2.5 mmd to a depth of 2.5 mm.

a) Abutment Ø 3.9 mm
b) Abutment height 7.2 mm
c) Neck length 3.5 mm
d) Enossal length 6 - 15 mm
e) Enossal Ø 3.7 - 5.0 mm
f) Neck Ø 2.0 mm







# **NCLUSIVE**

**GCS**® implants are delivered incl. lab-set REF 462353, consisting of



Double analogue, plastic

IA4/IAU

BM5118

Impression post castable, internally edged, for large head

BM1429

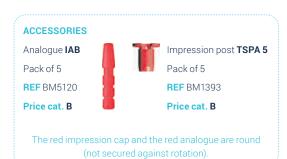


Impression post castable, internally round, for small head

TSPA 4

BM1394

**NOTE** This is a standard lab-set and therefore contains parts for both **LARGE** abutment heads (**PA X**) and **SMALL** abutment heads (**TSPA 4**).

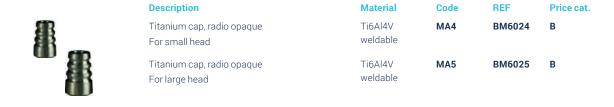


#### IMPRESSION TAKING AND LABORATORY ACCESSORIES

FOR SMALL HEAD	<b>Description</b> Impression post castable, POM Internally round	<b>Unit</b> Pack of 5	Code TSPA 4	REF BM1394	Price cat.
	Impression post castable, POM Internally round	Pack of 5	TSPA 4	BM1372	В
	Castable abutment and base for provisionals For small head 7 mm high, white, internally round	Pack of 5	P04	BM1317	В
	Double analogue, plastic For large and small head	Pack of 5	IA4/IAU	BM5118	В
	Double analogue, metal For large and small head	1 piece	IA4/IAU	BM5119	A
FOR LARGE HEAD	Impression post castable Internally edged	Pack of 5	PA X	BM1429	В
	Castable abutment for large head Internally round	Pack of 5	РОВ	BM5121	В
	PO4/MA4 POB/MA5				



#### **TITANIUM CAPS**



#### CORTICAL MILLING FOR GCS® M AND GCS® MICRO



Description		Code	REF	Price cat.
C-Drill KM1 3.0 - 3.2	Cortical milling	C-Drill KM1	BM1071	E
C-Drill KM2 3.7 - 4.1	Cortical milling	C-Drill KM2	BM1072	E
C-Drill KM3 5.0	Cortical milling	C-Drill KM3	BM1073	E

### SCANBODIES MATERIAL PEEK/POM

					View from top
Description	Scanbody-4 Cylyndrical, for small head	Description	Scanbody-5 Cylyndrical, for large head	Description	Scanbody-MU Cylyndrical
Systems	GCS®, GBC®	Systems	GCS®, GBC®	Systems	GCS® MU, GBC® MU, GIH® MU
REF	BM1561	REF	BM1562	REF	BM1563
Price cat.	B (Pack of 5)	Price cat.	B (Pack of 5)	Price cat.	B (Pack of 5)
					View from top
Description	Flag-Scanbody <b>SCB4</b> For small head For intra-oral scans	Description	Flag-Scanbody <b>SCB5</b> For large head For intra-oral scans	Description	Flag-Scanbody <b>SCB MU</b> Incl. screw SFK MU (418164) For intra-oral scans
Systems	GCS®, GBC®	Systems	GCS®, GBC®	Systems	GCS® MU, GBC® MU, GIH® MU
REF	BM5126	REF	BM5127	REF	BM5128
Price cat.	C (Pack of 5)	Price cat.	C (Pack of 5)	Price cat.	<b>B</b> (1 piece)

Please go to **https://implant.com/en/downloads** to download the corresponding STL files.

#### **HEATLESS® DRILLS** DOS FOR IMPLANTS WITH CONICAL CORE

Surgical steel, colour-coded, depth-coded and autoclaveable. The drill is marked with laser depth markings. Use between 3,000 and 5,000 rpm with good cooling and intermittent drill technique. Due to the extremely high cutting performance, you can work without pressure.





D	escription	Colour	Max. working length	REF	Price cat.
D	OS 1	yellow	17 mm	BM1330	D
D	OS 2	black	17 mm	BM1331	D
D	OS 3	red	17 mm	BM1332	D
D	OS 4	blue	21 mm	BM1333	D
D	OS 5	green	17 mm	BM1334	D
D	OS 6	transparent	15 mm	BM1335	D

**DOS 6** This drill is 2 mm shorter at the tip. It can therefore drill up to 2 mm deeper into hard bone than nominally indicated on the drill. Therefore, the conical bone cavity is only circularly extended in the crestal area without increasing the drilling depth.

#### **INSTRUMENTS** AND **TOOLS**

Description Insertion tool short, for large head Use with RAT 2 and TW2	<b>Length</b> 7 mm	Code UST 2 M	REF BM2110	Price cat.
Insertion tool long, for large head Use with RAT 2 and TW2	19 mm	UST 1 M	BM2064	E
Insertion tool for large head Use with contra-angle	23 mm	IT2W	BM3339	E
Insertion tool long, for small head Use with RAT 2 and TW2	20 mm	ITK	BM1336	D
Insertion tool short, for small head Use with RAT 2 and TW2	7 mm	UST1S	BM1338	D
Insertion tool for small head Use with contra-angle	23 mm	ITW K	BM1340	D
Torque wrench 10 - 70 Ncm		TW2	BM1356	s
Adapter for large head Use with handgrip	70 mm	Adapter UST 1	BM2063	F
Adapter for small head Use with handgrip	70 mm	Adapter UST 2	BM2062	D
For machine reprocessing, cannot be dismantled Clean in an ultrasonic bath at 45° with an alkaline cleaning agent	110 mm		BM1360	V

For adapter, self-locking





#### MANUFACTURER'S INFORMATION regarding the preparation of resterilisable medical devices compiles with EN ISO 17664

#### Please read carefullyi

#### Medical devices which may be re-processed are

- Tools for abulments and sarews
   torques control instruments and rabilities
   Instruments for preparing endosteous bone cavillies (drills, cutters)

- culters!

   Bone expansion previa and distractors:

  Diffli guide letwes:

   Abulments and strews, provided they do not remain in/
  with the patient between individual treatment appointments and are not used on other patients. They should be
  stored by the operator between the treatment appointments a.g. together with the patients of the
  Manual instruments for the plagement of implants and
  bone preparation.

Re-usability
Frequent re-processing has influence on the product espediality it high temperatures are applied for sterification. Daily
claim it high temperatures are applied for sterification. Daily
to bone cavities should be used only 10 times. Teols and
refethelt may be used asing at they lift to the "2" gait. In general the operator is responsible for the decision of te-using
and re-processing of instruments. Damagad instrument
and instruments showing signs of wear must be discarded,
tability at the manufacturer is valid. If these restictions are
not negarided.

- Legal bases
  The following legal bases, regulations and recommendations are applied with regard to the products mentioned 
  above; (Germany)

   Directive 934/4 ETC

   Medical device regulation (winds) is valid in the country 
  where the medical device is used to treatment or whenthe functionality of the medical gievice is being evaluafied.
- ted) Bundesgesündheltsblatt (Federal Health Gazetté) 2001 ; 44:1115-1126

44:1115-1126
Hygiene requirements for the processing of medical devices, (Recommendation of the Commission for Hospital Hygiene (Recommendation of the Commission for Hospital Hygiene (Remendation) for Verdeenhoustyglene) of the Robert-Koch Institute and the Federal Ministry for Drugs and Mindical Devices (Bundesministeriums für Arznelmittel und Medizinsprodukse)).

Legal Information:
Implants and other components of the implant system.
Distan, 80.1 8CS, 8ECS; GBC as well as KOS PUS (base)
Implants according to the Consensus on baral/Intralegic implants of suced by the International Implants of Suced by the International Implants Foundation,
Munich, see www.implantloundation.org/en/consensus-papers are sold any to its among a practitionars with valid
the use of the system. This demand for buffler and continuous advanced in a divide the control of the Implants.

our educotion is also valid for advising patients before and after the placement of the implaints.

General principles
All resorbies products must be circumed, disinfected and stressed by the products of the interest of circums and disinfection is exception for effective sterilisation. Special black many distinctions for itse. The operating instructions of the certaining and disinfection is exception for effective sterilisation in Special black many distinctions and the practice units must also be observed. At the operatoris responsible for the sterilism and stockload parameters specific to the unit and product are constantly maintained during each cycle. Hease state of the interest of the int

Care instructions of surgical steel instruments
Surgical steel instruments can quickly become damaged,
with inadequate or incorrect care, Only commercially
available solvents should be used for surgical steet if in douavailable solvents should be used for surgical steets if in doubt contact newsylblands (mbH). The following are not recommended:

• Dilinfection/cleaning agent with a high amonitorine content or bindection/cleaning agent with a high oxalic acid content. The following are not recommended for instruments with the following are not recommended for instruments with

content. The following are not recommended for instrument's with colour coding. The following are not recommended to instrument's with colour coding. Too high solvent concentrations, assirtection/cisaming, agent with the incredents mentioned apove.

1 Too high imprortatives with neichanical cleaning and strumination; never higher than 135° C.

Conditioning
Cootie imputities must be removed from the products immediately after use (within 1-2 his maximum). Singlical institute of the use (within 1-2 his maximum). Singlical institute (placed societies), status residue (placed societies), status residues (placed in a disinfectional solution immediately offer use or patients the interments should be placed in a disinfectional solution immediately offer use or patients the interments can be proceed in an open. Contamination should than be elecaned from the line institutes that the contamination should than be elecaned from the fraction of blood and contamination, howe groven efficacy (e.g. CGHM, [German Society for thygiene and Microbiology)/PDA approved and CE Man), bewarder in the situation of blood and contamination, be with the instrument discharged and CE Man), bewarders in the situation of blood and contamination, be without the situation of the contamination and composition with the instrument of the contamination and composition with the instrument of the situation of the contamination are only open of the contamination and composition with the instrument for use, for manual removal of contamination use only open of the contamination and composition with the instrument of the contamination and composition of the contamination are only open of the contamination of the contamination and the contamination are only only on the contamination and the

- Used;
   Encrustations must be thoroughly removed using nylon
- builtes.

  Encutled blood can also be dissolved using hydrogen periodic 3%

  Instrument disinfectant residues can be removed by rinding several times with viater.

Cleaning/disinlection
Far cleaning and disinlection onewsyblomed Gmbit recommencisties use of:
Instrument disinlection (fine with high bacterial
loading is finited to 3% consectration) as disinlection
including its more productive of the distinlection
including the production for cleaning and disinfection.

- Ensure when using after products for cleaning and districtation.

   That the products are basically suitable for the cleaning and distriction and distriction and distriction and distriction agent in a public product in the cleaning and distriction agent with proven efficiency (e.g. Dotther of FAD appearance) (e.g. Dotther of FAD

#### Process: Cleaning and disinfection

Automotic cleaning in a cleaning and disinfection unit in combination with the cleaning agent recommended by the unit manufacturer. Procedure: Procedure: Insert the instruments so that the liquid can flow out of the arian lubes and blind holes, 3et the cycle and adhere to the unit manufacturer's with and kinst limes; the cleaned components should be examined for shallow aff when removing the instruments. If necessary, repeat the cycle or clean naturally.

Manual cleaning

1. Incrognity clean disinfection/cleaning agent from the intransport of the property of the property of the inferturement by triding them with water and, it required with
the aid of a soft ryloo bash,
Illitrasonic cleanure: Floor the companents in a backet,
evoid accustic, shadows: Add on ensymalic cleaning
agent to the vater and clean the companents of a leniperature of 40 - 50° C in the ultrasonic cleaner (35-60 AHz)
for 3 minutes.
Ensure that the campanents are immersed completely in
the water without bubbles.

2. Then remove the instruments from the cleaning solution
and rises them throughly finitimum it minuted the
increase of the position of the property of the position.

- possible
  3. Then dry the instruments with compressed oir
  4. Check the instruments visually and repeat the cleaning stage, if necessary.
  5. Pack the intrument as soon as possible after removal (see Section Packaging." If necessary after drying again of a clean leadlon).

Mechanical cleaning.
Cleaning, distriction and drying in accordance with DIN.
PINSO 158631-2005 and DIN RN 15883(2005,
Pre-cleaning: Place the disassembled instruments in cold
water for 5 minutes, Then brush the disassembled instruments with a 4off nylon brush under water to 7 emove coorse
imposition.

impunites.

Mechanical cleaning: e.g. using the Miele 8535 CD unit at 35°C for 3 minutes (pragramme Varia 1D) with an enzymatic

# BIOMED

- Important points

  All instruments must be stellisted after cleaning.

  When stellisting multi-part instruments in an autoclaive without a drying programme. If it is seenful that the instruments are dways stellisted in a disassembled state!

  The instruments should always be checked for comolor other steelisting limits instruments must till be viable after the risitionine of the wheeling instruments about be replaced, risky instruments must be cleaned and stellisted without packaging before using for the first time.

  Preparation of all instruments with convities is particularly critical. This applies aspectally to internally coaled critics, placement dids and instruments with the differ hales. At the water supply cavity cannot be checked with internally coaled critics and base critics and debts; could be corried from patient to patient, we recommend using these instruments as insplicate products the country of completely clean. Multi-patiel encounter the country or completely clean. Multi-patiel possible.

Control

Check all intruments after cleaning and cleaning/disinlection for corrollon, damaged syrtaces, chipping, damage to the shape (e.g., bent and non-concentric running instruments, damaged or bluet blades) as well as contamination and dispared only damaged instruments, instruments that are still conforminated must be cleaned and dishrected again. Then check the function and inlegify of the instruments it is not necessary to apply care products (e.g., oil) to instruments and obultments or scriews.

and obtiments or scrives.

Special appears to observe with drills and culters
the culting fruitments for a maximum of 10 times.

Lee culting fruitments for a maximum of 10 times.

Lee culting fruitments for a maximum of 10 times.

Lee culting fruitments for a maximum of 10 times.

Lee culting fruitments for the bases of the culting fruitment of the bases of the scripes of the bases of the culting performance if the tip is damaged. To ensure core of the drills if it herefore esterolla to observe the following points:

Churing the orbits: a culting performance if the tip is damaged. To ensure core of the drills if the reformance if the tip is damaged. To ensure core of the drills if the drills it is now to be placed gently in the following points:

Churing the orbits of the scripe of the properties of the scripe of the core of the culting to the culting the culting of the culting the

Packaging
Soft of the instruments in the sterilisation tray and then pack
them in single-use sterilisation packaging (single or disuble
packaging) and/ar sterilisation container, which
complies with DIN EN 858-217/DIN EN ISO/ANSI AAMI ISO
11607

- 11607

  Is suitable for tream sterification (temperature resistant up to min. 137° C (270° F), adequate steem permeability) provides adequate protection of the instruments and significant permeability appears of the provided adequate protection of the instruments and significant period appears to be regularly serviced according to the manufacturer's instructions prefinitation contained.

Streitlandian
Method

Finactional pre-vacuum procedure
(according to ISO 178-55 or ISO 130-00), in a
unif that complex with \$N\$ 125 C 130-00), in a
unif that complex with \$N\$ 125 C 130-00), in a
unif that complex with \$N\$ 125 C 130-00), in a
unif that complex with \$N\$ 125 C 130-00), in a
unif that complex yet with yet.

Head to IS2\* C max, IS2\* C 130-00
Pressore:

Fressore:

Fressor

Storage
After stermington the instruments must be stored dry and dust-free in the sterilisation pockaging. The instruments should also be profested against sunlight and heat. The maximum torage bestile (surery date) depends or revereit factors and must be determined and vollacited by the user.

Intermalian an handling multi-part instruments Multi-part Multi-part

# i Read lostractions Expiration date: STERILE R Y Gamma terilized (2)Only use once Dio not restantite noncalente LOT LOI Charge number Keep in a dry place a Store lightly knep closers Do not use if packing is aamaged Manufacturer

CE1936

Legend

Warnings
Wards not knowled any warnings, provided the instructions for use are followed for the products to be used as well as the corresponding disinfection and cleaning agent.

onewayblamed GmbN reserves the right to change the de-sign of the products and components or their packaging; adopt instructions for use as well as renegotists prices and delivery conditions, (abbility is initiad to the use of defective products. Any further claims are explained.)

Further information about the preparation of medical products a available in the internet at www.rki.de or www.a-k-).

Date at the latest revision: 2021-03



Inde Dentel AG Dortplott: (1) CH-6737 Gommisweld SWITZERLAND Tel. -41 (0)\$5 293 293 29

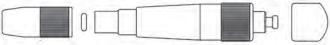
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123056, Росоня, г. Москво ул. Б.Грузинское 60, стр./ +7 747 018 12 82 www.бисмва.pdp

#### Schematic diagram of the handle REF 311430 (can be disassembled)



Pre-clean the individual parts under running cold water using a saft bruth. Do not allow blood residuates only on the components, the nandle thould be autoclaved in the disassembled state and ofely before the components.

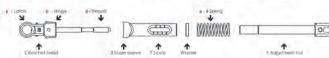
#### Schemalic diagram of the handle REF 311431 (cannot be disassembled)



- Fin-clean the instrument under running cold water using a soft brush. Do not allow blood residue and other adhering deposits
  to dry on the handle. The handle should be thoroughly cleaned manually using an ultrasonic cleaner before mechanical
  cleaning.
   Manual cleaning including ultrasonic cleaner (see above) and mechanical cleaning should be performed in reasurable.

#### Schematic diagram of the TW/TW2 forque wrench

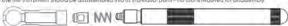
mbled into its individual parts - no tool is required for disassembly



Pre-clean the Individual parts under running cald water using a soft brush. Do not allow blood residue and other adhering deposits to dry on the components.

#### Schematic diagram of the RA12 ratchet

· After use the instrument should be disassembled into its individual parts—no tool is required for disassembly





We are certified according to DIN EN ISO 13485 and Annex II of Directive 93/42 EEC. The product dimensions shown in this brochure may differ from reality for technical reasons.  $GCS^{\circ}$  is a registered trademark. Pat. Pend.

If implants are reprocessed, there is a risk of the development of infections, because no validated method for processing exists. Implants therefore may not be reprocessed.

(The products of this catalogue are CE marked (class I) and CE 1936 marked (class IIa and IIb) according to 93/42/EC Directive).

Commercial products that are not monitored by our notified body are declared as third-party products.

#### Compilation and explanation of symbols on the packaging:



STERILE R











Expiry date

Batch No.

Sterilized by radiation

Non-sterile













Store tightly keep closed



Do not use if packing is damaged



Do not resterilize



Manufacturer

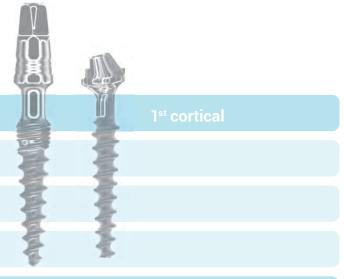


Production date

Catalogue number

#### **COMPRESSION SCREWS**

GCS® GCS® MU



2<sup>nd</sup> cortica





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