MegaGen Kit

248 AnyRidge Kit

248 I. Abutment Selection Guide Kit
249 II. Surgical Kit
255 III. Prosthetic Kit
257 IV. Bone Profiler Kit
258 V. Optional Components

260 AnyOne Surgical Kit

260 I. AnyOne Internal / External / Onestage Kit
269 II. Stopper Drill Kit
270 III. Prosthetic Kit Internal
272 IV. Prosthetic Kit External / Onestage
274 V. Bone Profiler Kit
275 VI. Optional Components

280 MiNi™ Kit

282 911 Kit

288 Root Membrane KIT

300 MEG-Align System

300 I. BonePen Kit
302 II. Meg-Align Abutment Line-up
302 1. Multi Type
306 2. Single Type

AnyRidge Kit

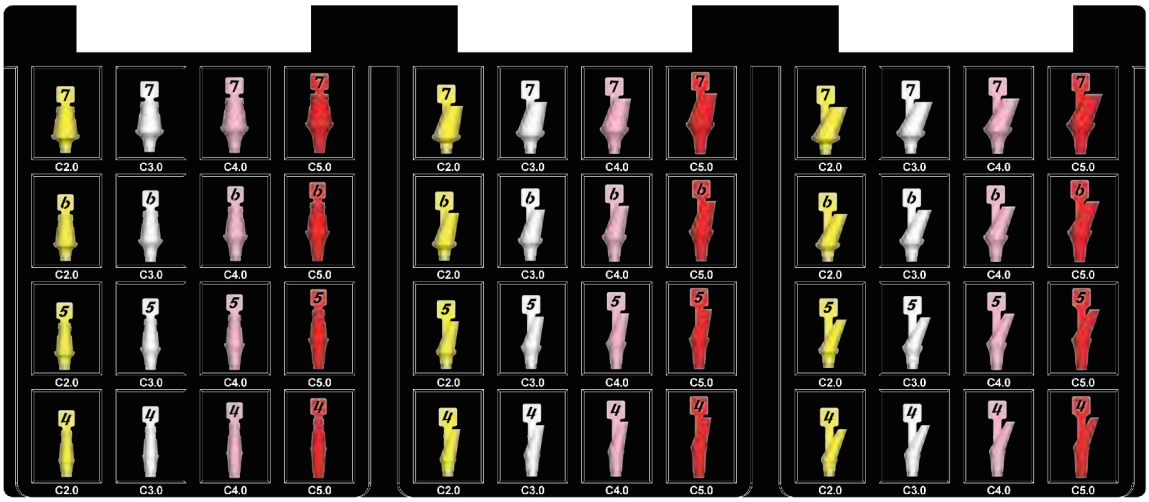
I. AnyRidge Abutment Selection Guide Kit

Ref.C

KANASG3000

For the best selection of abutments.

- Colors indicate different cuff heights (Yellow : 2mm, White : 3mm, Pink : 4mm, Red : 5mm).
- Store 2 pieces in each container.
- Autoclavable to sterilize.



Straight type
(EZ Post & Solid Abutment select)

Angle type(15°)
(Angled Abutment select)

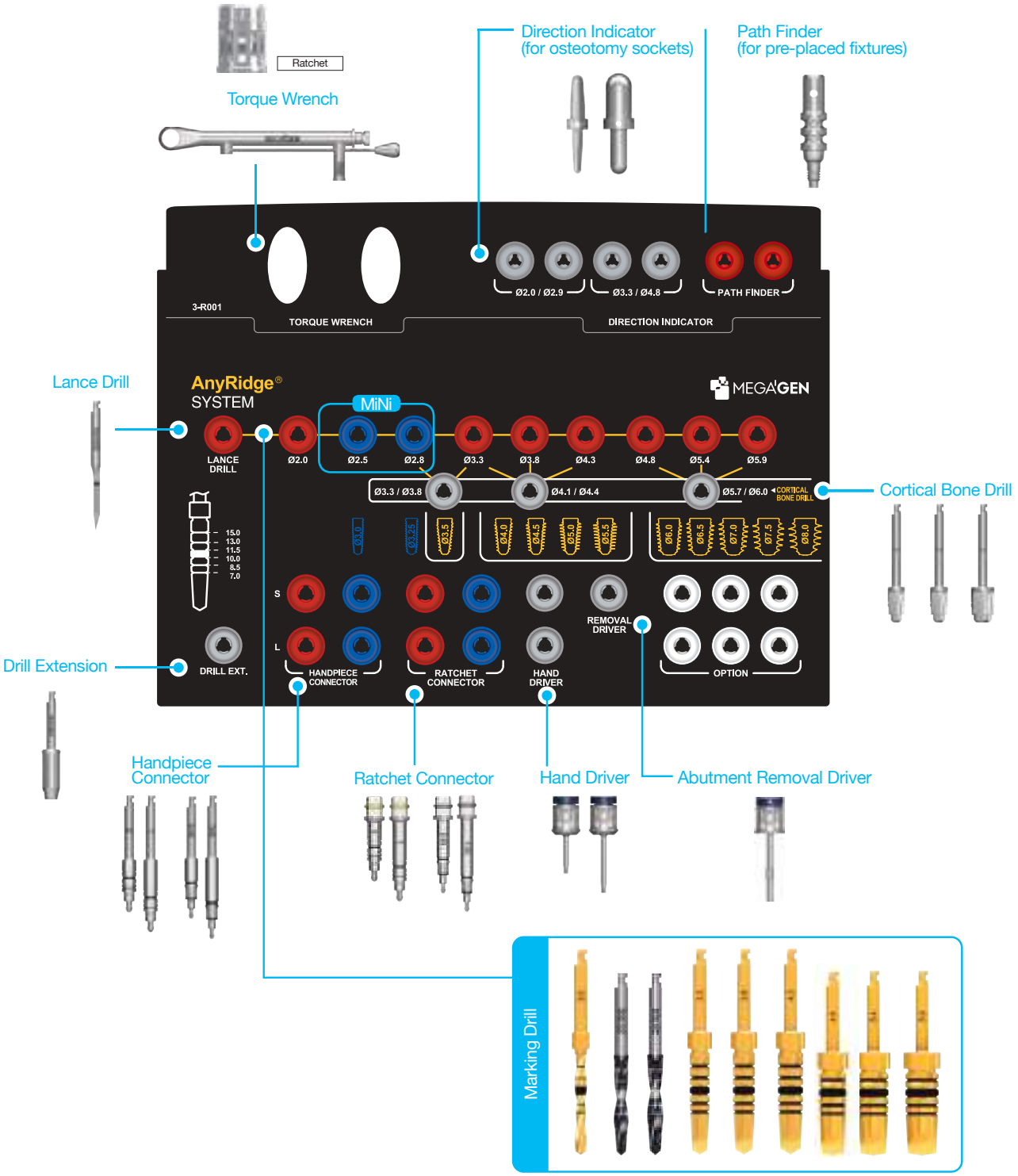
Angle type(25°)
(Angled Abutment select)

Product coodinator : Hyun Wook An, megacera@megagen.co.kr

II. AnyRidge Surgical Kit : Standard Type

Ref.C

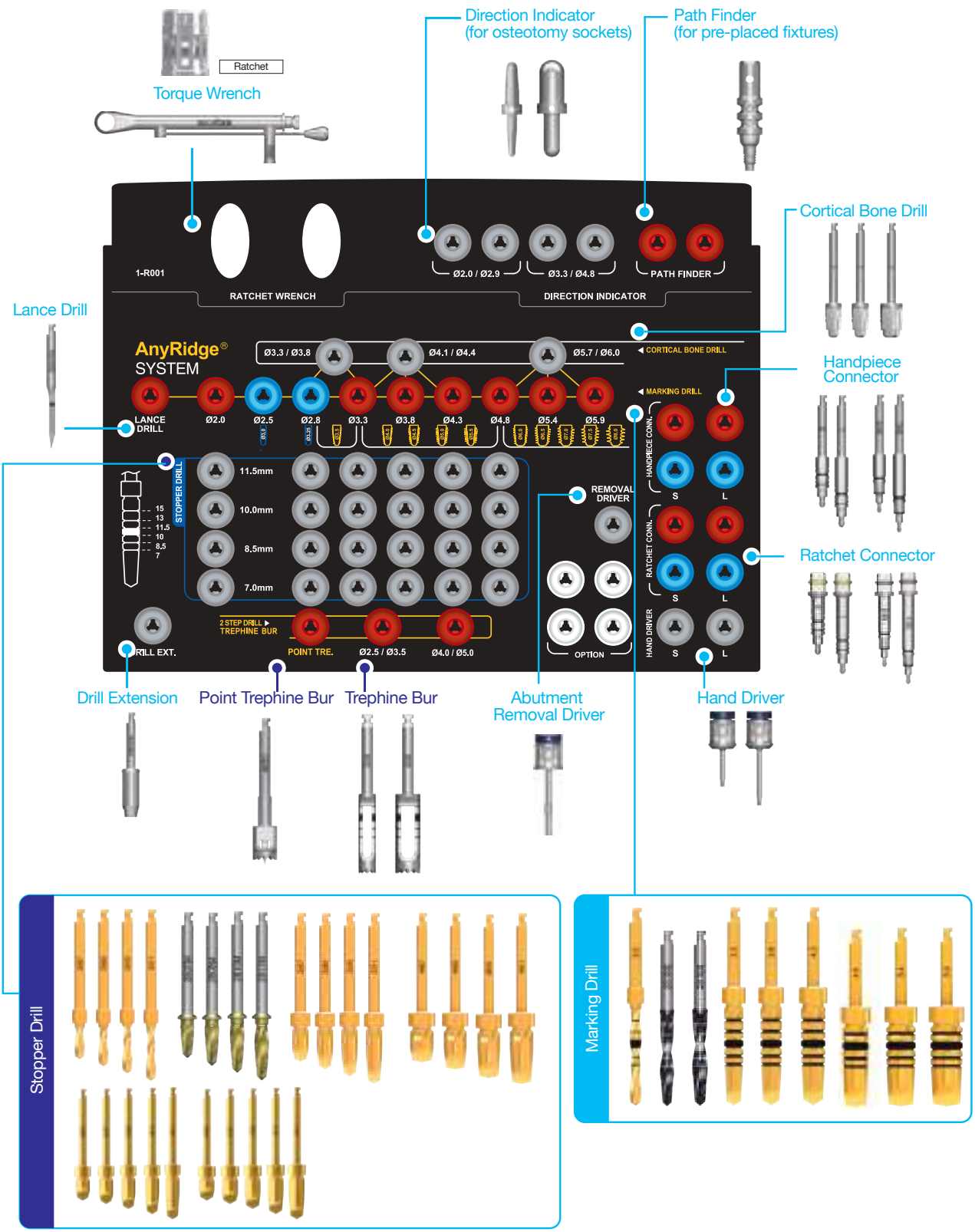
KARIN3003



II. AnyRidge Surgical Kit : Full Type

Ref.C
KARIN3001

Easier and safer to drill for the depth as you need with the stopper drills.

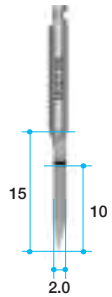


Surgical Kit Components

Lance Drill

- Useful to make an indentation on cortical bone to confirm the exact drilling location.

Diameter	Type	Ref.C
Ø2.0	Long	MGD100L



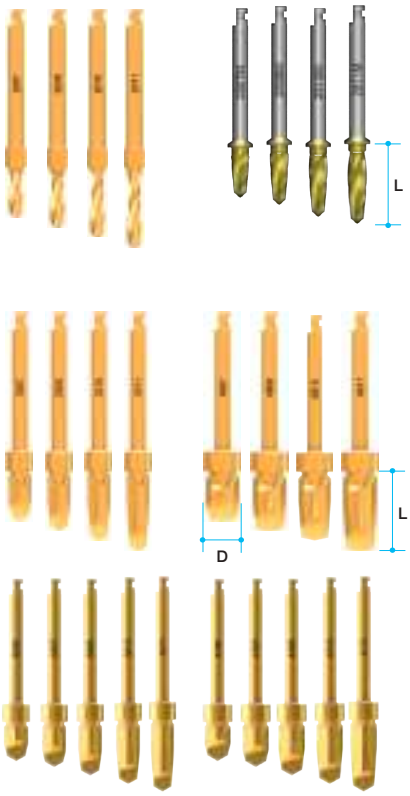
Marking Drill

- Each drill has calibrations from 7.0 to 18.0mm. (TANSDF4815, TANSDF5415, TANSDF5915 have calibrations up to 15.0mm)
- Easy to recognize by dual marking systems. (Groove and laser marking)

Diameter	Length (mm)	Ref.C
Ø2.0	18	TANTDF2018
Ø2.5		SD2518S
Ø2.8		SD2818S
Ø3.3		TANSDF3318
Ø3.8		TANSDF3818
Ø4.3		TANSDF4318
Ø4.8	15	TANSDF4815
Ø5.4		TANSDF5415
Ø5.9		TANSDF5915

Stopper Drill

Diameter	Length (mm)	Ref.C
Ø2.0	7	TANTDF2007
	8.5	TANTDF2008
	10	TANTDF2010
	11.5	TANTDF2011
Ø2.8	7	SD2807M
	8.5	SD2808M
	10	SD2810M
	11.5	SD2811M
Ø3.3	7	TANSDF3307
	8.5	TANSDF3308
	10	TANSDF3310
	11.5	TANSDF3311
Ø3.8	7	TANSDF3807
	8.5	TANSDF3808
	10	TANSDF3810
	11.5	TANSDF3811
Ø4.3	7	TANSDF4307
	8.5	TANSDF4308
	10	TANSDF4310
	11.5	TANSDF4311
Ø4.8	7	TANSDF4807
	8.5	TANSDF4808
	10	TANSDF4810
	11.5	TANSDF4811



Surgical Kit Components (Continued)

Point Trephine Bur

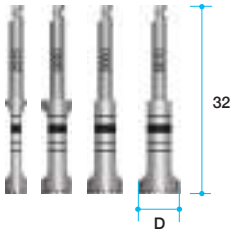
Diameter	Ref.C
Ø5.0 (In.Ø4.0)	SPTB4050

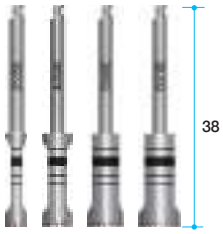
Trephine Bur

- Minimizes the drilling steps needed, especially for wider fixtures.
- Helpful for collecting autogenous bone.
- Useful for removing failed and fractured fixtures.
- Depth markings are 7, 8.5, 10, 11.5, 13mm, same depths as fixtures. (No Y dimension so markings are actual length).
- Markings on the drill shaft represent the inside / outside diameter of Trephine Burs.

Diameter	Type	Ref.C
Ø3.5 (in Ø2.5)	Short	TANTBL2535
Ø5.0 (in Ø4.0)		TANTBL4050
Ø6.0 (in Ø5.0)		*TANTBL5060
Ø7.0 (in Ø6.0)		*TANTBL6070
Ø3.5 (in Ø2.5)	Long	*TANTBE2535
Ø5.0 (in Ø4.0)		*TANTBE4050
Ø6.0 (in Ø5.0)		*TANTBE5060
Ø7.0 (in Ø6.0)		*TANTBE6070

(*) Separate sales item.
3.5, 5.0 Trephine Bur are included in Surgical kit.

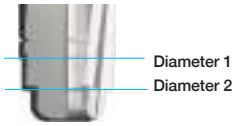




Cortical Bone Drill

- Removes cortical bone and enlarges osteotomy socket especially at hard bone.
- Similar function with countersink drill of other systems.
- Each drill has two steps of diameter for convenience.

Diameter	Ref.C
Ø3.5	TANCDL3500
Ø4.0~ Ø5.5	TANCDL4055
Ø6.0~ Ø8.0	TANCDL6080

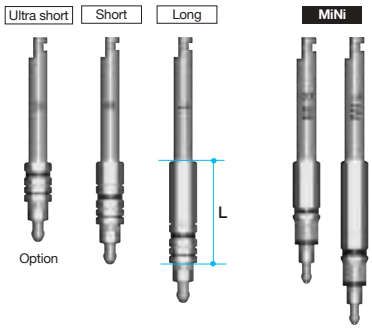


Handpiece Connector

- Delivers torque for the placement of a fixture with a handpiece.
- Easy and secure pick-up and delivery.
- Used to place an implant without a mount.
- Marks on the shaft can indicate the position of fixture platform, especially in flapless surgery.

Length (mm)	Type	Ref.C
5	*Ultra short	TANHCU
10	Short	TANHCS
15	Long	TANHCL
10	Short (MiNi)	HCS17
15	Long (MiNi)	HCL17

(*) Separate sales item.

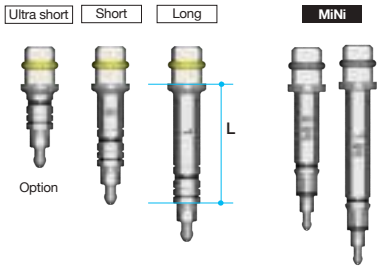


Ratchet Connector

- Delivers torque for the placement or removal of a fixture with a Ratchet Wrench.
- Secure a Ratchet Extension or Torque Wrench to a fixture before exerting force.
- Too much torque force can result a damage to the hex of a fixture.
- Marks on the shaft can indicate the position of fixture platform, especially for flapless surgery.

Length (mm)	Type	Ref.C
6	*Ultra short	TANREU
10	Short	TANRES
15	Long	TANREL
15	Short(MiNi)	RCS17
20	Long (MiNi)	RCL17

(*) Separate sales item.



Hand Driver (1.2 Hex)

- Used for all Cover Screws, all Abutment Screws and all Healing Abutments.
- Available in 4 lengths for convenience.
- Hand Driver can be directly inserted into the Torque Wrench without using an adapter.
- Hex tip can withstand 35-45Ncm of torque without distortion.

Length(mm)	Type	Ref.C
5	*Ultra-short	TCMHDU1200
10	Short	TCMHDS1200
15	Long	TCMHDL1200
20	*Extra-long	TCMHDE1200

(*) Separate sales item.

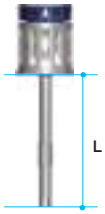
Surgical Kit Components

Abutment Removal Driver

- Used to remove final abutment ; use after removing Abutment Screw.
- Insert straight into the abutment and rotate clockwise.
- Long Abutment Removal Driver is for disconnecting an abutment with a cemented crown.

Length (mm)	Ref.C
17.5	TANMRD18
25.0	*TANMRD25

(*) Separate sales item.



Drill Extension

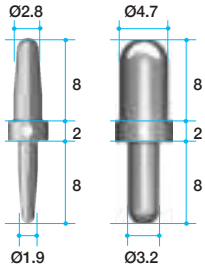
- Extends drills & other handpiece tools.
- **No more than 35Ncm torque : Can be distorted when too much force is applied.**

Ref.C
MDE150

Direction Indicator

- Confirms drilling direction and location during drilling.
- Checks drilling position.

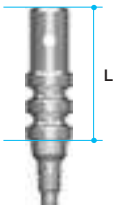
Length (mm)	Ref.C
Ø1.9 / Ø2.8	MDI100
Ø3.2 / Ø4.7	MDI3348



Path Finder

- After placing a fixture, a Path Finder can be connected to guide parallel for the next implant.
- Gingival depth can be measured with the grooves especially for flapless surgeries.

Length (mm)	Ref.C
10	TANPFF3580

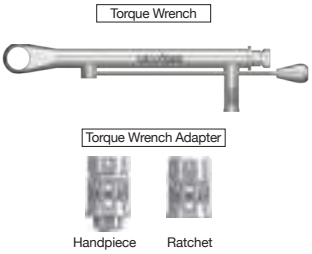


Torque Wrench & Adapter

- Torque Wrench has torque options from 15Ncm to 45Ncm and is used for the placement of an implant and final tightening of the Abutment Screw.

Type	Ref.C
Torque Wrench	MTW300AT
*Torque Wrench Adapter(Handpiece)	TTAI100
Torque Wrench Adapter(Ratchet)	TTAR100

(*) Separate sales item.

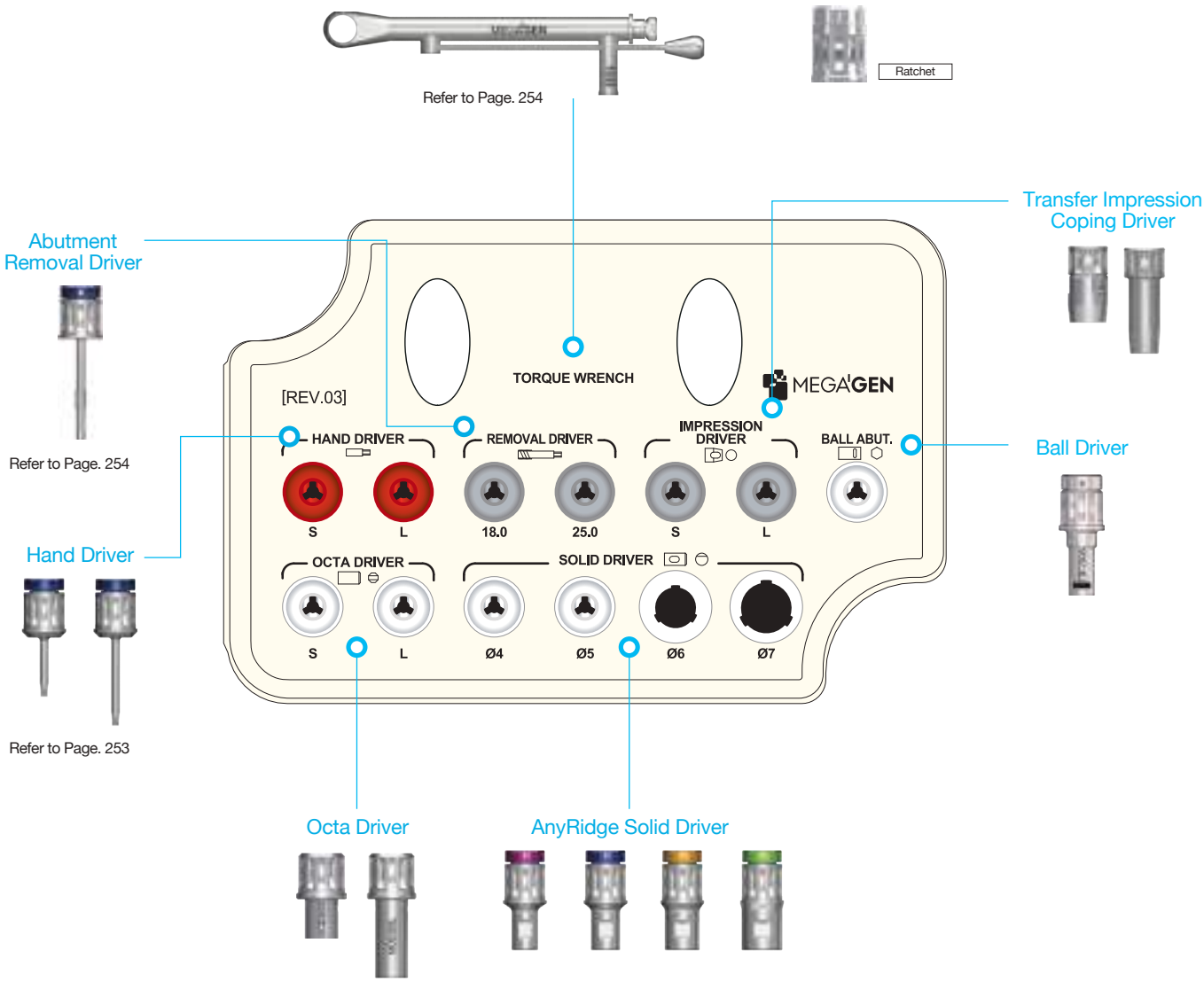


III. AnyRidge Prosthetic Kit

Ref.C

KANPK3000

A kit with all kinds of driver that are needed for prosthetics.



Prosthetic Kit Components

Solid Driver

- For the delivery of Solid Abutments.
- Color coded for different profile diameters. (Ø4-magenta, Ø5-blue, Ø6-yellow, Ø7-green)
- Two different heights. (8.5 / 13.5mm)
- Directly connectable to Torque Wrench.

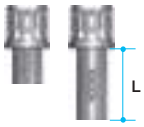
Solid Abutment Profile Diameter	Length(mm)	Ref.C
Ø4	8.5	TANSDS400
	13.5	*TANSDL400
Ø5	8.5	TANSDS500
	13.5	*TANSDL500
Ø6	8.5	TANSDS600
	13.5	*TANSDL600
Ø7	8.5	TANSDS700
	13.5	*TANSDL700

(*) Separate sales item.

Octa Driver

- For seating of the Octa Abutment into the fixture.
- Can also be connected to Torque Wrench.

Length (mm)	Ref.C
7	MOD300S
13	MOD300L

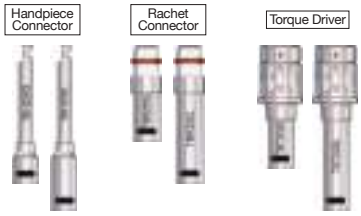


Ball Driver

- For seating of the Ball Abutment into the fixture.
- Can connect to a Handpiece, Ratchet or Torque Wrench.
- Available in long and short.

Type	Ref.c
*Handpiece Connector(Short)	TBH250S
*Handpiece Connector(Long)	TBH250L
*Ratchet Connector(Short)	TBR250S
*Ratchet Connector(Long)	TBR250L
Toque Driver(Short)	TBT250S
*Toque Driver(Long)	TBT250L

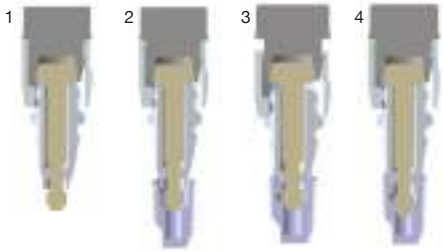
(*) Separate sales item.



Impression Coping Driver
(Transfer)

- For transfer type of Impression Coping.
- Works with friction only.
- Small but powerful grip.

Type	Ref.C
For Two piece impression Coping	TCMID
For One piece impression Coping	TCMIDE



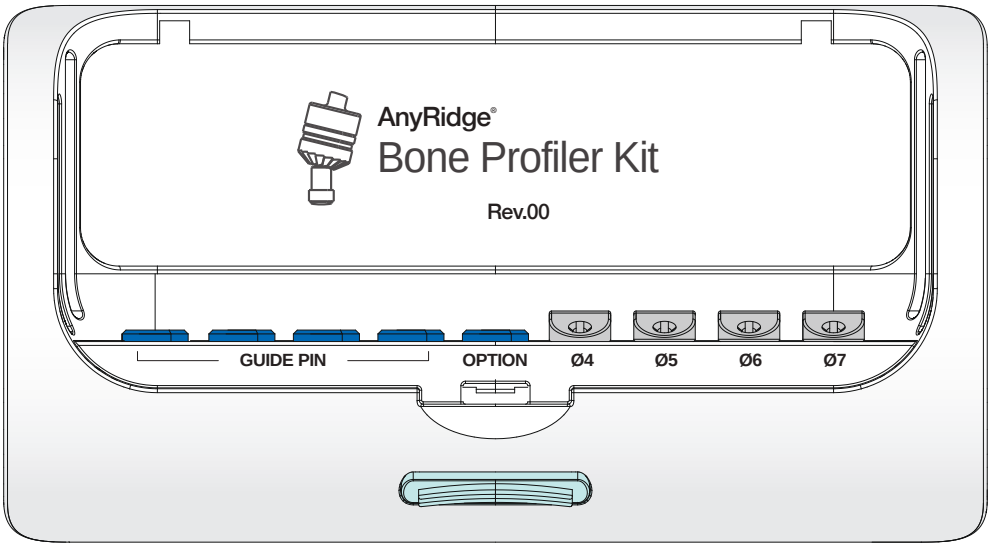
1. Connect Impression Coping and Impression Driver together
2. Adjust Connection with a Fixture by turning a Holder clockwise.
3. Push the Holder and put the Impression Coping into the Fixture.
4. Turn the Driver clockwise to ensure connection of the Impression Coping and Fixture.

IV. AnyRidge Bone Profiler Kit

Ref.C
KARBP3000

Removes the overhanged bone around a fixture to allow adequate seating of a Healing Abutment or a Prosthetic Abutment.

- Place a Guide Pin into a fixture and choose a Bone Profiler which fits with the situation.
- Four different sizes of bone profiler and four guide pins are included in the kit.

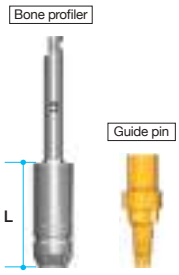


Bone Profiler

- Guide Pin(TANPGF3305) included.

- Each bone profiler can be purchased separately for refill.
- Each pakage includes a bone profiler and a guide pin.

Profile Diameter	Length (mm)	Ref.C
Ø4	13	TANBPL40G
Ø5		TANBPL50G
Ø6	8	TANBPS60G
Ø7		TANBPS70G



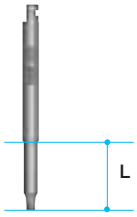
V. Optional components

- not included in the surgical kit
- can be purchased separately and placed into the 'option' spaces provided in the surgical kit

Right Angle Driver Tip

- Used for all Cover Screws, all abutment screws and all Healing Abutments.
- Hex tip can withstand 35-45Ncm of torque without distorting.

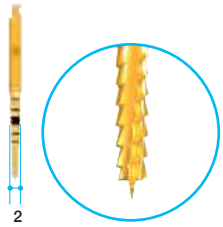
Length(mm)	Type		Ref.C
4	Ultra-short	Hex 1.2	MDR120SS
10	Short		MDR120S
15	Long		MDR120L
20	Extra Long		MDR120EL



Lindermann Drill

- Cross cut on the drill.
- Can correct the path during drilling.

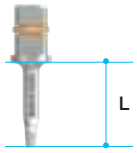
Diameter(mm)	Ref.C
2	TEEL200M



Insert Driver

- Used for all Cover Screws, all abutment screws and all Healing Abutments.
- Hex tip can withstand 35-45Ncm of torque without distorting.

Length(mm)	Type		Ref.C
10	Short	Hex 1.2	MID120S
15	Long		MID120L



Hand Tap

- Useful when the internal screw of a fixture is damaged.
- Retapping damaged threads.
- Need to be patient and force-controlled.

Type	Ref.C
M1.8	THT180L

Multi-unit Driver (2.0 Hex)
(For Multi-unit Abutment)

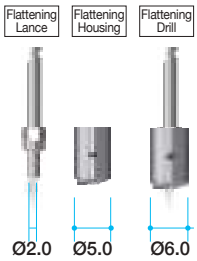
- For the seating & tightening of multi-unit Abutment (Straight type)

Length(mm)	Type	Ref.C
10	Short	TCMMUDS20
15	Long	TCMMUDL20

Flattening Drill

- In the case of irregular bone, stopper drill can be drilled in precise depth by flattening the bone.
- Flattening Lance and Housing are connected together. Two types of Housing diameters (Ø5.0 & Ø6.0) are composed in accordance with the size of final drill diameter.
- Ø5.0 = Stopper Drill Ø2.0~ Ø4.3
  Ø6.0 = Stopper Drill Ø4.8~ Ø5.4
- Formation of boundary through housing will guide the next drilling location of fixture.

Diameter	Length (mm)	Ref.C
Ø5.0 / Ø2.0	3.5	FD5020
Ø6.0 / Ø2.0		FD6020



Manual Inserter

- Specially designed for manual placement of AnyRidge fixture.
- Especially useful at immediate implant placement on maxillary anterior.
- The tip has same structure with the hand-piece connector.

Ref.C
TANMI

Reamer Drill & Center Pin

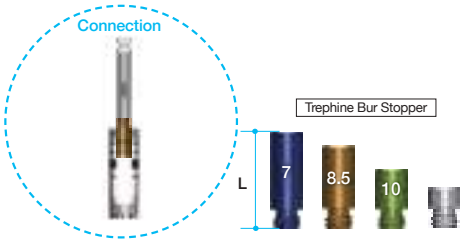
- Removes inner lip of the cast after casting Burn-out Cylinders of Solid Abutment.
- Center Pin have 4 different diameters according to the profile diameter of Solid Abutments.

Diameter	Type	Ref.C
Ø10.0	Reamer Drill	TANRD
Ø4.0	Center Pin	TANRDJ40
Ø5.0		TANRDJ50
Ø6.0		TANRDJ60
Ø7.0		TANRDJ70

Trephine Bur Stopper

- Controls the depth of trephination with a Stopper placed into the Trephine.
- Especially useful in cases with limited availabe bone from important anatomy.

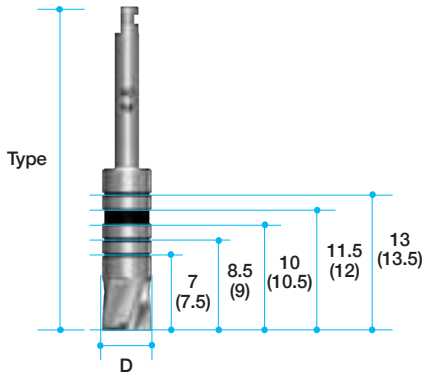
Length (mm)	Ref.C
7.0	TANTSF2307
8.5	TANTSF2308
10.0	TANTSF2310
11.5	TANTSF2311



Bottom Drill

- It removes remaining bone in osteotomy socket after trephine drilling.
- It imprints the sizes of fixtures, for example 7, 8.5, 10, 11.5 and 13mm, by laser marker.

Diameter	Type	Ref.C
Ø3.3	Short (32mm)	TCMBDS33
Ø3.8		TCMBDS38
Ø4.8		TCMBDS48
Ø5.8		TCMBDS58
Ø6.8		TCMBDS68
Ø3.3	Long (38mm)	TCMBDL33
Ø3.8		TCMBDL38
Ø4.8		TCMBDL48
Ø5.8		TCMBDL58
Ø6.8		TCMBDL68



Ratchet Wrench

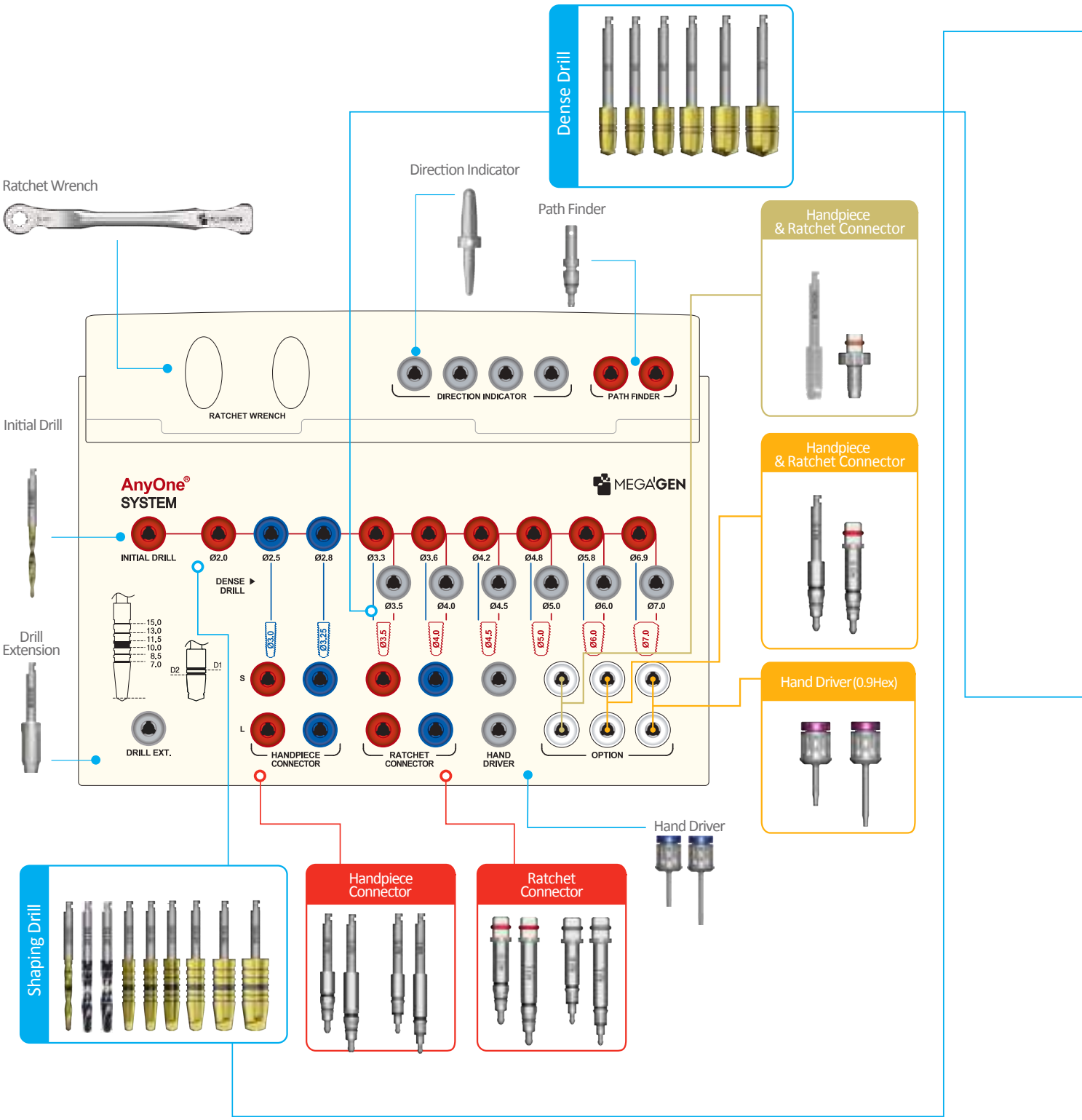
- Used to exert more force than handpiece.
- No bearing system : No breakage and corrosion problems.
- Attaches to Ratchet Extension.
- Arrow laser marking indicates direction of force.

Ref.C
MRW040S

AnyOne Surgical Kit
I. AnyOne Internal / External / OneStage Kit

Ref.C

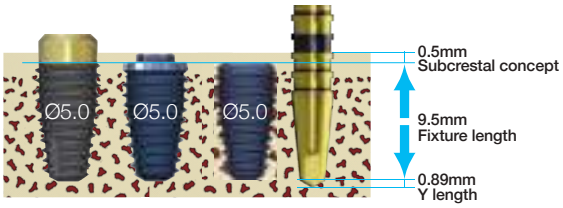
KAOIN3003



Product coodinator : Jung Ho Nam, kkangtong@megagen.co.kr

Shaping Drill

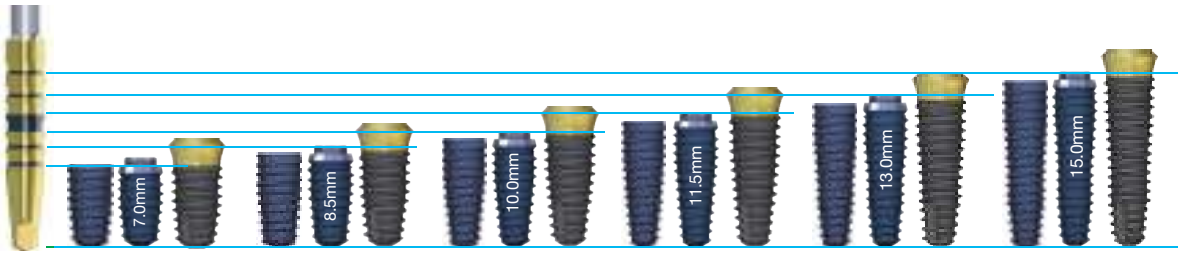
- Each drill has depth marking lines from 7.0mm to 15.0mm
- The dual marking system (grooves and laser markings) provides visual and radio graphic depth verification during surgery.



Drill Diameter	Ø2.8	Ø3.3	Ø3.6	Ø4.2	Ø4.8	Ø5.8	Ø6.9
Y length	0.58	0.59	0.68	0.85	0.89	0.94	0.94

※ Actual drill length : Drill length does not normally include the Y dimension of the drill.

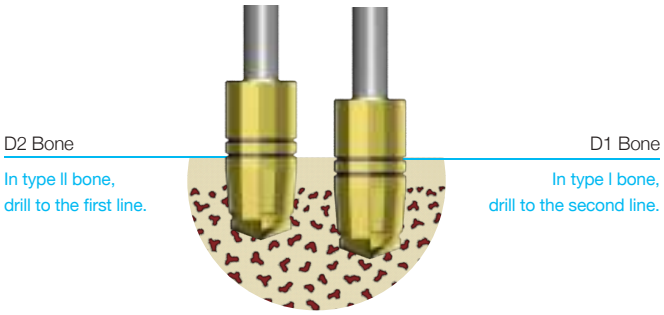
※ Markings on the Shapping Drill are 0.5mm longer than the fixture so fixtures will automatically be placed 0.5mm subcrestally if the drilling protocol is followed.



※ To place a Ø5.0 x 10mm length fixture, the required bone depth would be 10.89mm.
For example : 0.5mm(subcrestal concept) + 0.89mm(Y dimension of drill tip) + 9.5mm (fixture length)

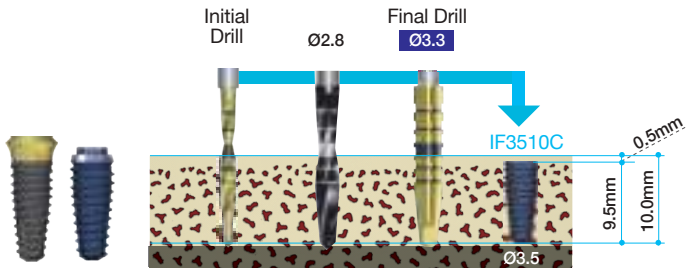
Dense Drill

- To control initial stability in dense bone (type I & II), use the Dense Drill to remove and shape the cortical bone.



Surgical drilling sequence

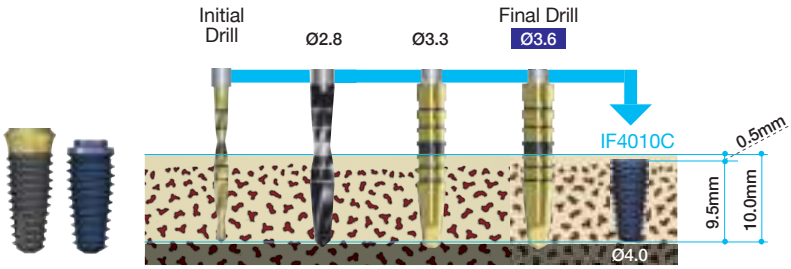
- AnyOne fixtures offer optimum initial stability when they are used with the following drill sequence guide, AnyOne implants should be placed 0.5mm subcrestally.



Ø3.5 Fixture

Ø3.5 drilling sequence

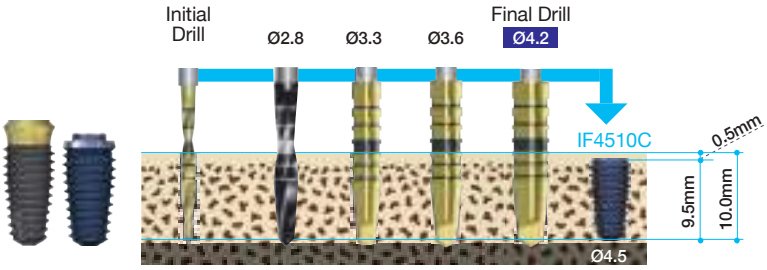
10.0mm is the fixture length, The Shaping Drills are 0.59mm longer than the fixture, so total drill depth is **10.59mm**.



Ø4.0 Fixture

Ø4.0 drilling sequence

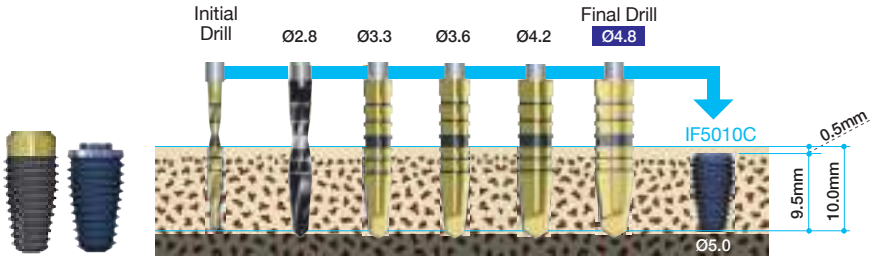
10.0mm is the fixture length, The Shaping Drills are 0.68mm longer than the fixture, so total drill depth is **10.68mm**.



Ø4.5 Fixture

Ø4.5 drilling sequence

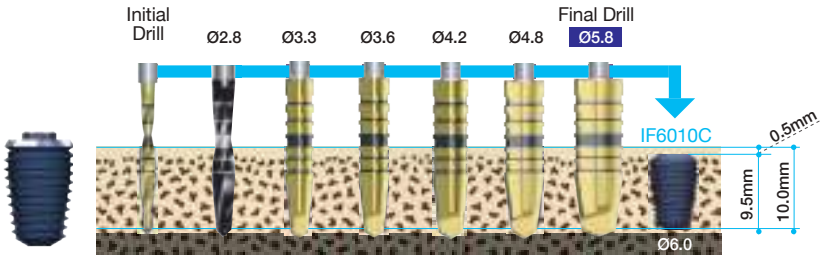
10.0mm is the fixture length, The Shaping Drills are 0.85mm longer than the fixture, so total drill depth is **10.85mm**.



Ø5.0 Fixture

Ø5.0 drilling sequence

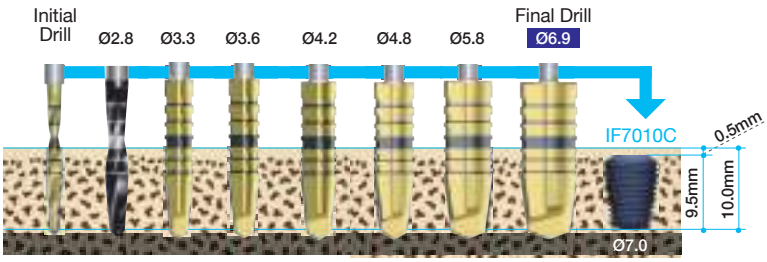
10.0mm is the fixture length, The Shaping Drills are 0.89mm longer than the fixture, so total drill depth is 10.89mm.



Ø6.0 Fixture

Ø6.0 drilling sequence

10.0mm is the fixture length, The Shaping Drills are 0.94mm longer than the fixture, so total drill depth is 10.94mm.



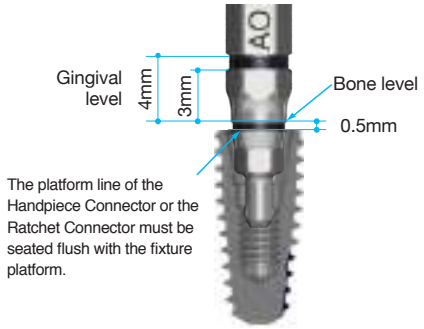
Ø7.0 Fixture

Ø7.0 drilling sequence

10.0mm is the fixture length, The Shaping Drills are 0.94mm longer than the fixture, so total drill depth is 10.94mm.

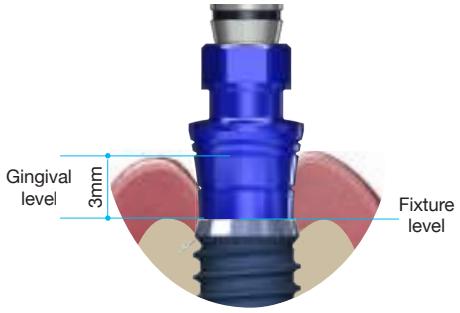
▸▸ Handpiece & Ratchet Connector

Internal



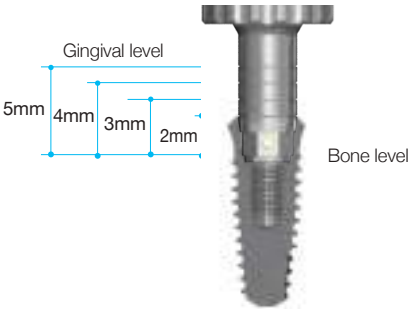
※ Fixture level : Placement should be 0.5mm subcrestal.
※ Gingival level : The line is 3mm above the bone level line and 3.5mm above the platform line

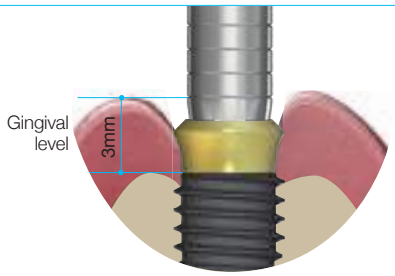
External



※ Fixture Level : Place in accordance with bone level
※ Gingival Level : Place 3mm above the bone level

OneStage





※ Fixture Level : Place in accordance with bone level
※ Gingival Level : Place 3mm above the bone level

Surgical Kit Components (Continued)

Initial Drill

- Used to pierce the cortical bone initially.
- Advisable to go into the bone to the full length of a fixture.

Diameter	Length(mm)	Ref.C
Ø1.8	33	ID1818S
	38	*ID1818M
	43	*ID1818L

(*) Separate sales item.

Shaping Drill

- Each drill has depth marking lines from 7.0mm to 15.0mm.
- The dual marking system(grooves and laser markings) provides visual and radiographic depth verification during surgery.
- TiN coating on drills : Enhanced corrosion resistance and abrasion resistance.

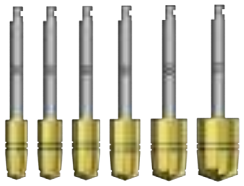
Diameter	Length(mm)	Ref.C
Ø2.0	33	SD2018S
	38	*SD2018M
	43	*SD2018L
Ø2.5	33	SD2518S
	38	*SD2518M
	43	*SD2518L
Ø2.8	33	SD2818S
	38	*SD2818M
	43	*SD2818L
Ø3.3	33	SD3318S
	38	*SD3318M
	43	*SD3318L
Ø3.6	33	SD3618S
	38	*SD3618M
	43	*SD3618L
Ø4.2	33	SD4218S
	38	*SD4218M
	43	*SD4218L
Ø4.8	33	SD4818S
	38	*SD4818M
	43	*SD4818L
Ø5.8	33	SD5818S
	38	*SD5818M
	43	*SD5818L
Ø6.9	33	SD6918S
	38	*SD6918M
	43	*SD6918L

(*) Separate sales item.

Dense Drill

- Used to remove and shape cortical bone to control initial stability in dense bone (type I & II).
- TiN coating on drills : Enhanced corrosion resistance and abrasion resistance.

Diameter	Type	Ref.C
Ø3.9	Long	DD39
Ø4.3		DD43
Ø4.8		DD48
Ø5.3		DD53
Ø6.3		DD63
Ø7.3		DD73



Surgical Kit Components (Continued)

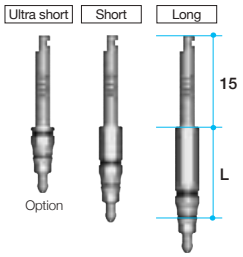
Handpiece Connector

- Used with Handpiece to remove fixture from ampule and to place the fixture.
- Spring type connection allows for easy and secure pick-up and positioning of the fixture.
- First mark on the shaft indicate the position of the fixture platform, For second mark, the bottom of the black line is 3mm and the top of the black line is 4mm(from fixture platform).
- Especially useful in flapless surgery.

AnyOne Internal& External

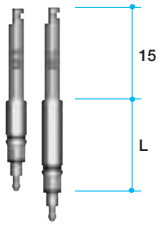
Length(mm)	Type	Connection	Ref.C
5	*Ultra-short	Hex. 2.5	HCU25
10	Short		HCS25
15	Long		HCL25

(*) Separate sales item



MiNi

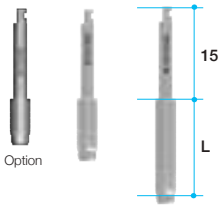
Length(mm)	Type	Connection	Ref.C
10	Short	Hex. 1.7	HCS17
15	Long		HCL17



OneStage

Length(mm)	Type	Connection	Ref.C
6	*Ultra-short	Octa. 3.1	MTHC200U
9	Short		MTHC200S
16	Long		MTHC200L

(*) Separate sales item



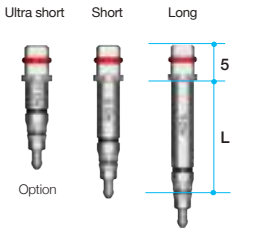
Ratchet Connector

- Used for inserting or removing a fixture with the Ratchet Wrench.
- Check to make sure the Ratchet Connector is completely seated into the Ratchet Wrench before using.
- Excessive force can cause damage to internal hex of fixture.
- Marks on the shaft indicate the position of fixture platform. Bottom of the black line is 3mm and top of black line is 4mm(from fixture platform).
- Especially useful in flapless surgery.

Internal& External

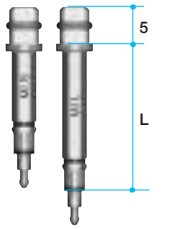
Length(mm)	Type	Connection	Ref.C
10	*Ultra-short	Hex. 2.5	RCU25
15	Short		RCS25
20	Long		RCL25

(*) Separate sales item



MiNi

Length(mm)	Type	Connection	Ref.C
15	Short	Hex. 1.7	RCS17
20	Long		RCL17

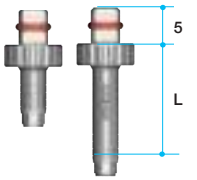


Final Driver

- Used to attach or remove the fixture by connecting to Ratchet Wrench
- Used to mount the Ratchet Connector fully on the Ratchet Wrench

OneStage

Length(mm)	Type	Connection	Ref.C
6	Short	Octa. 3.1	MOHD310S
13	Long		MOHD310



Hand Driver (1.2 Hex)

- Used for all Cover Screws, Abutment Screws, and Healing Abutments.
- Available in 4 lengths for added convenience.
- Hand Driver can be directly inserted into the Torque Wrench without using an adaptor.
- Hex tip can with stand 35-45Ncm of torque without distorting.

Length(mm)	Type	Ref.C
5	*Ultra-short	TCMHDU1200
10	Short	TCMHDS1200
15	Long	TCMHDL1200
20	*Extra-long	TCMHDE1200

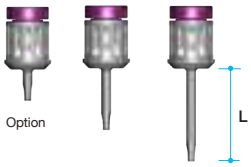
(*) Separate sales item

Hand Driver (0.9 Hex)

- Used for AnyOne External fixture cover screw.
- Available in 3 lengths for convenience.
- Hand Driver can be directly inserted in the to Torque Wrench without using an adaptor.
- Hex tip can with stand 25-35Ncm of torque without distorting.

Length(mm)	Type	Ref.C
5	*Ultra-short	TCMHDU0900
10	Short	TCMHDS0900
15	Long	TCMHDL0900

(*) Separate sales item



Drill Extension

- No more than 35Ncm torque : May distorted when excessive force is applied.
- Extends drills & other handpiece instruments.

Ref.C
MDE150

Surgical Kit Components

Direction Indicator

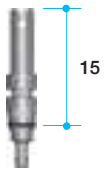
- Confirms drilling direction and functions as a parallel guide for additional osteotomies.
- Each end of the Direction Indicator has a different diameter
  - Ø2.0 and Ø2.8.

Diameter	Ref.C
Ø2.0 / Ø2.8	MDI100

Path Finder

- After the fixture is placed, a Path Finder may be connected into the fixture and function as a parallel guide for additional osteotomies.
- Grooves indicate the distance from the fixture platform.The first groove is 0.3mm and the second groove is 1mm, especially useful in flapless surgery.

Length(mm)	Ref.C
15	PF



Ratchet Wrench

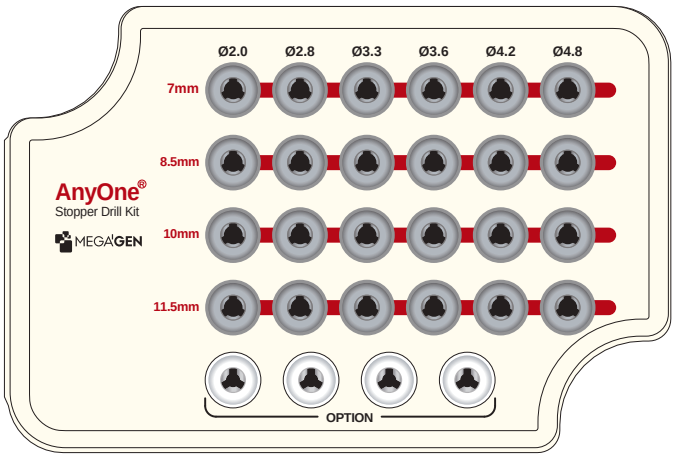
- Used to exert more force than the Handpiece.
- No bearing system : No breakage and no corrosion problems.
- Arrow laser marking indicates direction of force.

Ref.C
MRW040S

II. AnyOne Stopper Drill Kit

AnyOne Stopper Drill Kit helps to drill safely and conveniently to a desired depth.

Ref.C
KAOSS3000



Stopper Drill

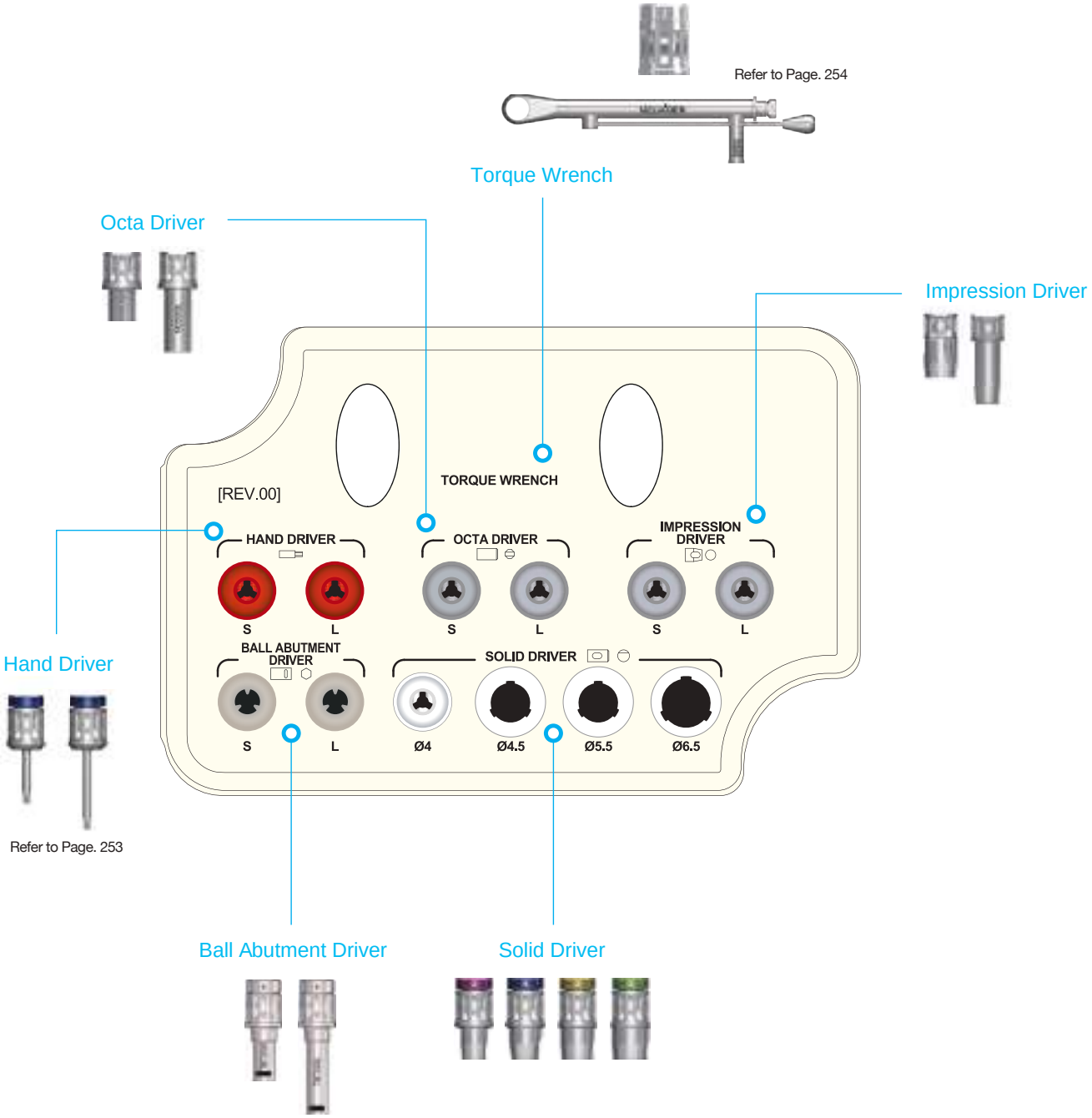
Diameter	Length(mm)	Ref.C
Ø2.0	7	SD2007M
	8.5	SD2008M
	10	SD2010M
	11.5	SD2011M
Ø2.8	7	SD2807M
	8.5	SD2808M
	10	SD2810M
	11.5	SD2811M
Ø3.3	7	SD3307M
	8.5	SD3308M
	10	SD3310M
	11.5	SD3311M
Ø3.6	7	SD3607M
	8.5	SD3608M
	10	SD3610M
	11.5	SD3611M
Ø4.2	7	SD4207M
	8.5	SD4208M
	10	SD4210M
	11.5	SD4211M
Ø4.8	7	SD4807M
	8.5	SD4808M
	10	SD4810M
	11.5	SD4811M
*Ø5.8	7	SD5807M
	8.5	SD5808M
	10	SD5810M
	11.5	SD5811M
*Ø6.9	7	SD6907M
	8.5	SD6908M
	10	SD6910M
	11.5	SD6911M

(*) Separate sales item.

III. AnyOne Prosthetic Kit
Internal

Ref.C

KAOPK3000



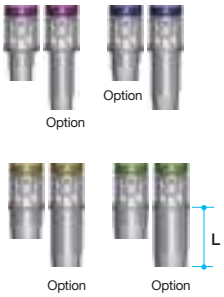
Prosthetic kit Components

Solid Driver

- For seating the Solid Abutment into the fixture.
- Connected to Torque Wrench as well.
- Color coded for different profile diameters. (Magenta : PD Ø4.0, Blue : PD Ø4.5, Yellow : PD Ø5.5, Green : PD Ø6.5)
- Two different lengths(6mm/ 12mm).

Diameter	Length(mm)	Type	Ref.C
Ø4.0	6	Short	SDS40
	12	Long	*SDL40
Ø4.5	6	Short	*SDS45
	12	Long	SDL45
Ø5.5	6	Short	SDS55
	12	Long	*SDL55
Ø6.5	6	Short	SDS65
	12	Long	*SDL65

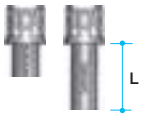
(*) Separate sales item.



Octa Driver

- For seating the Octa Abutment onto the fixture.
- Can also be connected to Torque Wrench.

Length(mm)	Ref.C
7	MOD300S
13	MOD300L

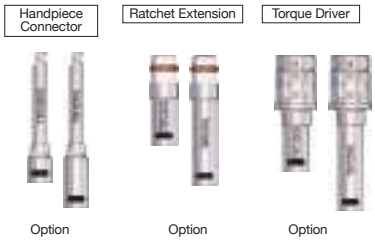


Ball Driver

- For seating the Ball Abutment into the fixture.
- Can connect to a Handpiece, Ratchet or Torque Wrench.
- Available in long or short.

Type	Ref.C
*Handpiece Connector(Short)	TBH250S
*Handpiece Connector(Long)	TBH250L
*Ratchet Extension(Short)	TBR250S
*Ratchet Extension(Long)	TBR250L
*Torque Driver(Short)	TBT250S
Torque Driver(Long)	TBT250L

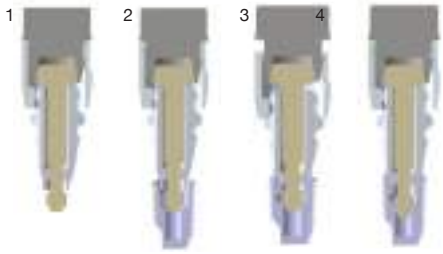
(*) Separate sales item.



Impression Coping Driver (Transfer)

- For transfer type of Impression Coping.
- Works with friction only.
- Small but powerful grip.

Type	Ref.C
For Two piece impression Coping	TCMID
For One piece impression Coping	TCMIDE

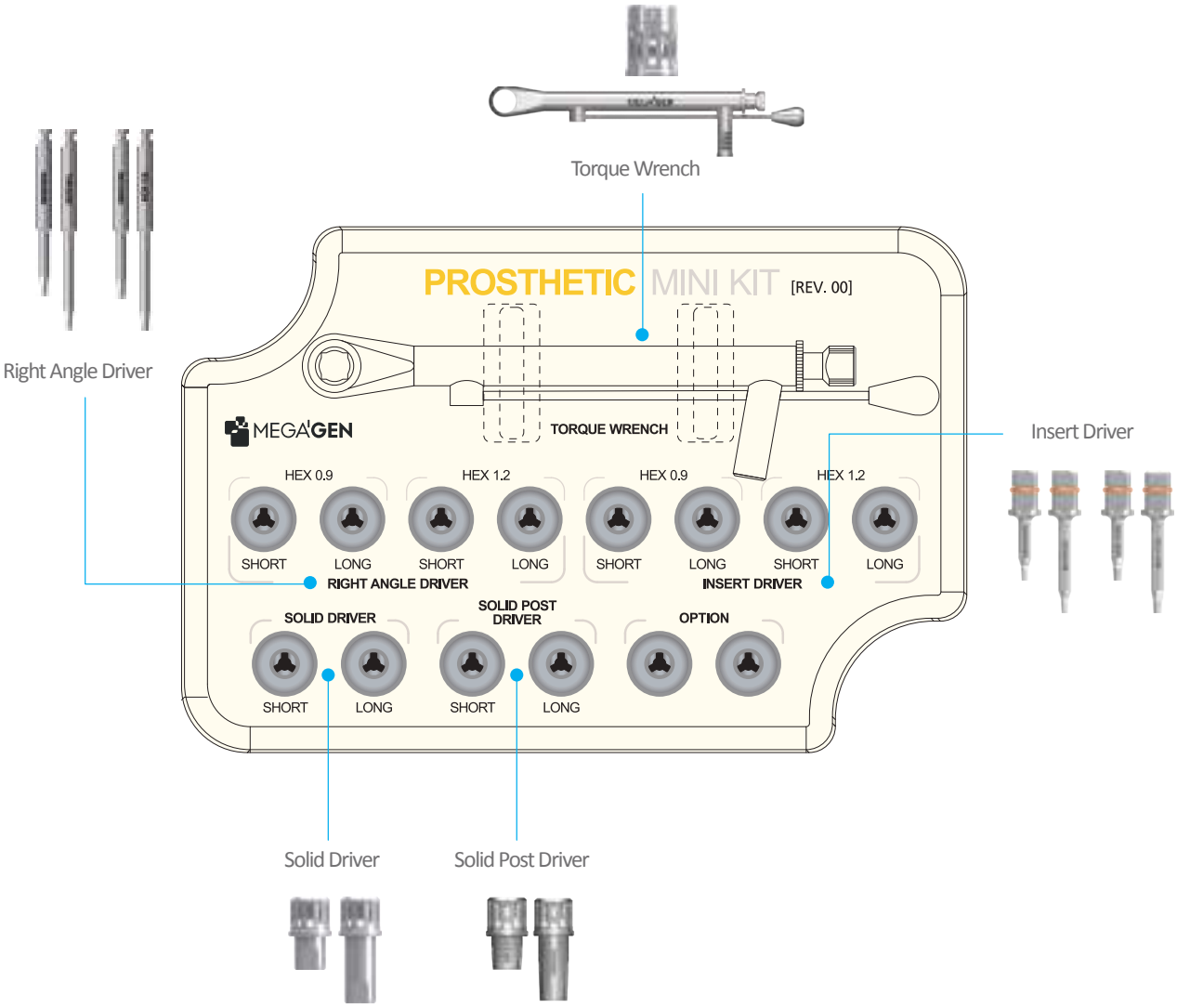


1. Connect Impression Coping and Impression Driver together
2. Adjust Connection with a Fixture by turning a Holder clockwise.
3. Push the Holder and put the Impression Coping into the Fixture.
4. Turn the Driver clockwise to ensure connection of the Impression Coping and Fixture.

IV. AnyOne Prosthetic Kit
External / Onestage

Ref.C

MPK3000

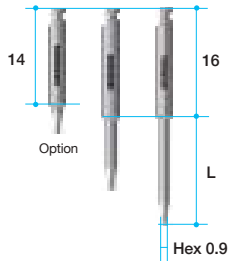


➲ Prosthetic kit Components

Right Angle Driver (hex 0.9)

- Can be engaged with Cover Screws, Abutment Screws and Healing Abutment
- Hex tip has been designed to stand Torque force of 35~45 Ncm
- Used for AnyOne External

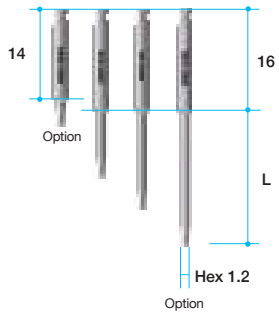
Length(mm)	Type	Ref.C
4	*Ultra-short	MDR090SS
10	Short	MDR090S
15	Long	MDR090L



Right Angle Driver (hex 1.2)

- Can be engaged with Cover Screws, Abutment Screws and Healing Abutment
- Hex tip has been designed to stand Torque force of 35~45 Ncm
- Used for AnyOne Internal & External

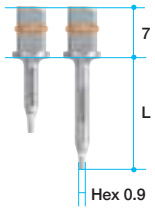
Length(mm)	Type	Ref.C
4	*Ultra-short	MDR120SS
10	Short	MDR120S
15	Long	MDR120L
20	*Extra Long	MDR120EL



Insert Driver (hex 0.9)

- Can be engaged with Cover Screws, Abutment Screws and Healing Abutment
- Hex tip has been designed to stand Torque force of 35~45 Ncm

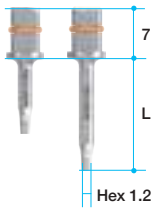
Length(mm)	Type	Ref.C
10	Short	MID090S
15	Long	MID090L



Insert Driver (hex 1.2)

- Can be engaged with Cover Screws, Abutment Screws and Healing Abutment
- Hex tip has been designed to stand Torque force of 35~45 Ncm

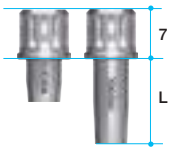
Length(mm)	Type	Ref.C
10	Short	MID120S
15	Long	MID120L



Solid Driver

- Can be engaged with Solid Abutment
- Connected to Torque Wrench as well
- Offers various options of Length (6mm / 12mm)

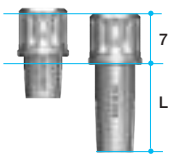
Diameter	Length(mm)	Type	Ref.C
Ø3.4	6	Short	MSD300S
	12	Long	MSD300L



Solid Post Driver

- Can be engaged with Solid Abutment
- Connected to Torque Wrench as well
- Offers various options of Length (6mm / 12mm)

Diameter	Length(mm)	Type	Ref.C
Ø4.3	6	Short	MSD430S
	12	Long	MSD430L

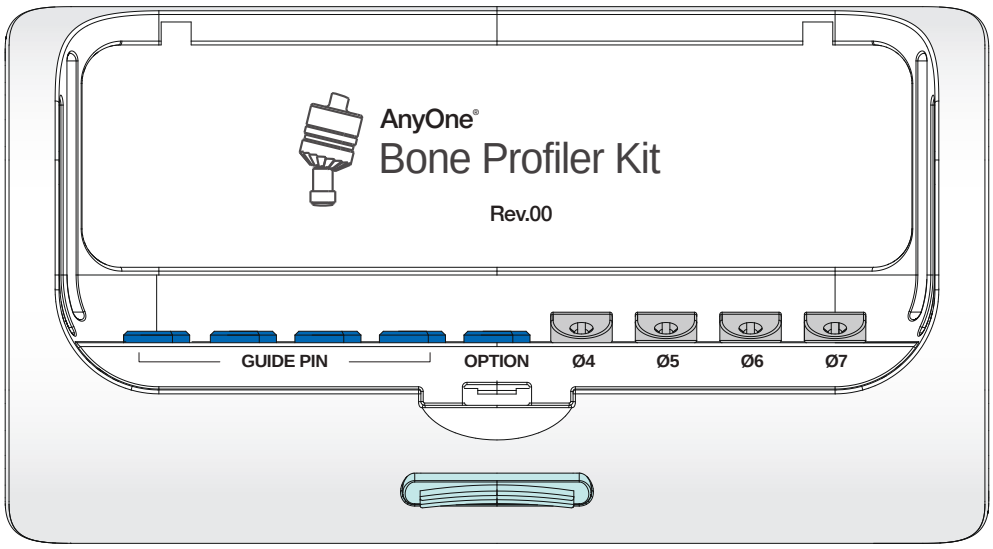


V. AnyOne Bone Profiler Kit

Ref.C
KAOBP3000

Removes the overhanged bone around a fixture to allow adequate seating of a Healing Abutment or a Prosthetic Abutment.

- Place a Guide Pin into a fixture and choose a Bone Profiler which fits with the situation.
- Four different sizes of bone profiler and four guide pins are included in the kit.

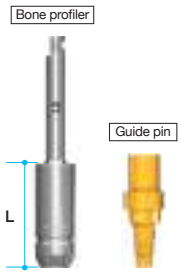


Bone Profiler

- Guide Pin(BPGP2) included.

- Each bone profiler can be purchased separately for refill.
- Each pakage includes a bone profiler and a guide pin.

Profile Diameter	Length (mm)	Ref.C
Ø4	13	AOBP40G
Ø5		AOBP50G
Ø6	8	AOBP60G
Ø7		AOBP70G



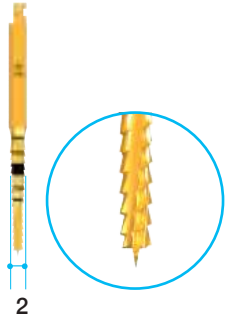
VI. Optional components (Continued)

- not included in a surgical kit
- may be purchased separately and placed in the spaces provided in the surgical kit

Lindermann Drill

- Cross cut on the drill.
- Can correct the path during drilling.

Diameter(mm)	Ref.C
2	TEEL200M



Hand Tap

- Useful when the internal screw of the Fixture has been damaged
- For Re-tapping the disabled thread
- It can even more damage the thread when excessive force is applied when Re-tapping. Therefore it is recommended to apply the force slowly and gradually
- M1.6 can be used for AnyOne's External fixtures with Small Sizes

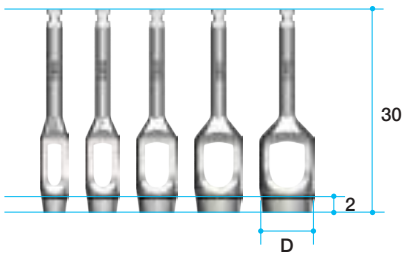
Length(mm)	Type	Ref.C
10	M1.6	THT160L
	M2.0	THT200L

VI. Optional components (Continued)

Tissue Punch

- Customized to remove soft tissue using osteotomy socket and useful for flapless surgery
- Easy to identify the thickness of soft tissue by comparing the tissue with the laser marking on the height of 2mm
- Can minimize the loss of soft tissue when conducting a flapless surgery
- Can stop from bleeding when used with Healing Abutment

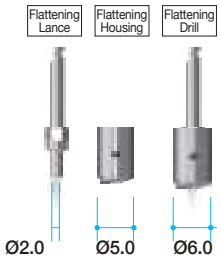
Diameter	Marking	Ref.C
In. Ø3 / Out. Ø4	2mm	TCMTPM0304
In. Ø4 / Out. Ø5		TCMTPM0405
In. Ø5 / Out. Ø6		TCMTPM0506
In. Ø6 / Out. Ø7		TCMTPM0607
In. Ø7 / Out. Ø8		TCMTPM0708



Flattening Drill

- Flattens the irregular bone and enables the stopper drill to drill the exact depth
- Designed to be engaged with Flattening Lance and Housing. There are 2 kinds of Housing to match the diameters of different final drills. (Ø5.0 & Ø6.0)
- Ø5.0 = Stopper Drill Ø2.0 ~ Ø4.3
- Ø6.0 = Stopper Drill Ø4.8 ~ Ø5.4
- By using Housing Boundary of the path is formed and it becomes the barometer of the drilling position for the next fixture

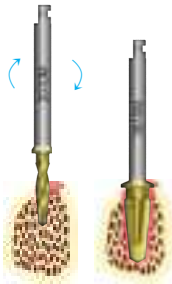
Diameter	Length(mm)	Ref.C
Ø5.0 / Ø2.0	3.5	FD5020
Ø6.0 / Ø2.0		FD6020



1

- Use Flattening Drill to make drilling on the right fixture position
  (If the Final drill's diameter is from Ø2.0~Ø4.3, use Ø5.0 Housing and in case the diameter is Ø4.8, Ø5.4 use Ø6 Housing.)

2



- Start drilling sequence below considering the size of fixtures to place and the bone density

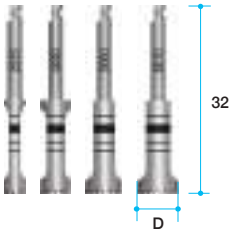
3

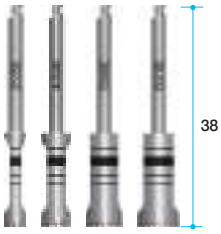
- Start placing the fixtures using Handpiece & Ratchet Connector

Trephine Bur

- Minimizes the drilling steps needed, especially for wider fixtures.
- Helpful for collecting autogenous bone.
- Useful for removing failed and fractured fixtures.
- Depth markings are 7, 8.5, 10, 11.5, 13mm, same depths as fixtures. (No Y dimension so markings are actual length).
- Markings on the drill shaft represent the inside / outside diameter of Trephine Burs.

Diameter	Type	Ref.C
Ø3.5 (in Ø2.5)	Short	TANTBL2535
Ø5.0 (in Ø4.0)		TANTBL4050
Ø6.0 (in Ø5.0)		TANTBL5060
Ø7.0 (in Ø6.0)		TANTBL6070
Ø3.5 (in Ø2.5)	Long	TANTBE2535
Ø5.0 (in Ø4.0)		TANTBE4050
Ø6.0 (in Ø5.0)		TANTBE5060
Ø7.0 (in Ø6.0)		TANTBE6070





Trephine Bur Stopper

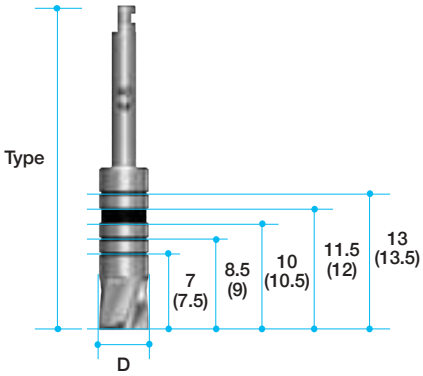
- Controls the depth of trephination with a Stopper placed into the Trephine.
- Especially useful in cases with limited availabe bone from important anatomy.

Length (mm)	Ref.C
7.0	TANTSF2307
8.5	TANTSF2308
10.0	TANTSF2310
11.5	TANTSF2311

Bottom Drill

- It removes remaining bone in osteotomy socket after trephine drilling.
- It imprints the sizes of fixtures, for example 7, 8.5, 10, 11.5 and 13mm, by laser marker.

Diameter	Type	Ref.C
Ø3.3	Short (32mm)	TCMBDS33
Ø3.8		TCMBDS38
Ø4.8		TCMBDS48
Ø5.8		TCMBDS58
Ø6.8		TCMBDS68
Ø3.3	Long (38mm)	TCMBDL33
Ø3.8		TCMBDL38
Ø4.8		TCMBDL48
Ø5.8		TCMBDL58
Ø6.8		TCMBDL68



VI. Optional components (Continued)

Reamer Drill & Center Pin

- Removes inner lip of the cast after casting Burn-out Cylinders of Solid Abutment.
- Center Pin have 4 different diameters according to the profile diameter of Solid Abutments.

Diameter	Type	Ref.C
Ø10.0	Reamer Drill	TANRD
Ø4.0	Center Pin	RDJ40
Ø4.5		RDJ45
Ø5.5		RDJ55
Ø6.5		RDJ65

Slot Driver
(Slotted type)

- Useful for the placement or removal of AnyOne Healing Abutment which has slot on the top.

Length(mm)	Type	Ref.C
10	Short	SDS06
15	Middle	SDM06
20	Long	SDL06

Multi-unit Driver (2.0 Hex)
(For Multi-unit Abutment)

- For the seating & tightening of Multi-unit Abutment (Straight type)

Length(mm)	Type	Ref.C
10	Short	TCMMUDS20
15	Long	TCMMUDL20

Tap Drill

- Can use both Handpiece(Dental implant engine) & Ratchet Wrench

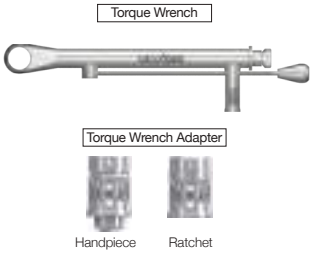
Diameter	Marking	Ref.C
Ø3.9	7/ 8.5/ 10/ 11.5/ 13/ 15	TD35
Ø4.3		TD40
Ø4.8		TD45
Ø5.3		TD50
Ø6.3		TD60
Ø7.3		TD70

Torque Wrench & Adapter

- Torque Wrench has various options to control the force from 15Ncm ~ 45Ncm and can be used for engaging with Abutment Screw

Type	Ref.C
Torque Wrench	MTW300AT
*Right Angle Adapter (Handpiece)	TTAI100
Torque Wrench Adapter (Ratchet)	TTAR100

(*) Separate sales item.



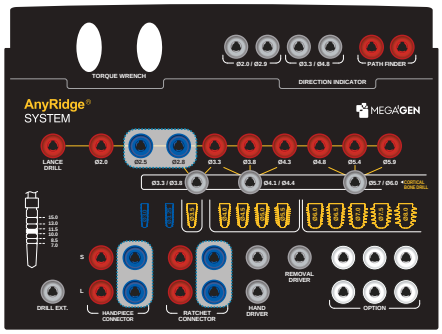
Mount Removal Driver

Length(mm)	Ref.C
19	MVD100

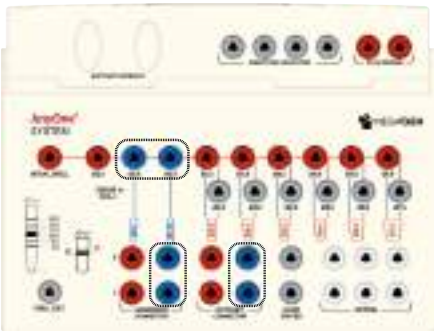
MiNi™ Kit

The instruments of MiNi Internal system are included in AnyRidge & AnyOne surgical kit.

※ Even the customers who do not use AnyRidge & AnyOne Internal System can experience MiNi System at any time by purchasing only six instruments separately.



AnyRidge Surgical Kit (KARIN3003)



AnyOne Surgical Kit (KAOIN3003)

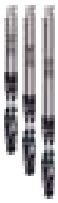
Shaping Drill

Diameter	Length(mm)	Ref.C
Ø2.5	33	SD2518S
	38	*SD2518M
	43	*SD2518L
Ø2.8	33	SD2818S
	38	*SD2818M
	43	*SD2818L

(*) Separate sales item.

Ø2.5

Ø2.8



Handpiece Connector

Type	Ref.C
Short	HCS17
Long	HCL17

Ratchet Connector

Type	Ref.C
Short	RCS17
Long	RCL17

Handpiece Connector

- Can use Overdenture Fixture

Type	Ref.C
Short	OHCS

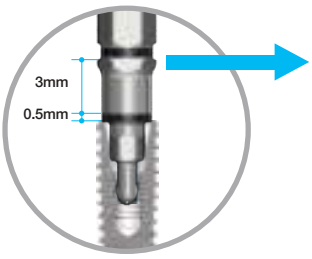
Ratchet Connector

- Can use Overdenture Fixture

Type	Length (mm)	Ref.C
Short	12	ORCS

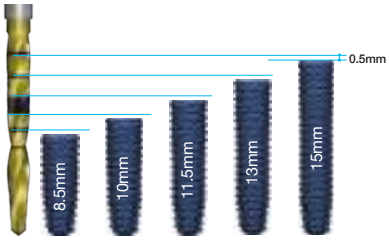
Product coodinator : jung hee Lee, junghee@megagen.co.kr

9.5 fixture length and drilling marking



The platform line of the Handpiece Connector or the Ratchet Connector must be flush with the fixture platform.

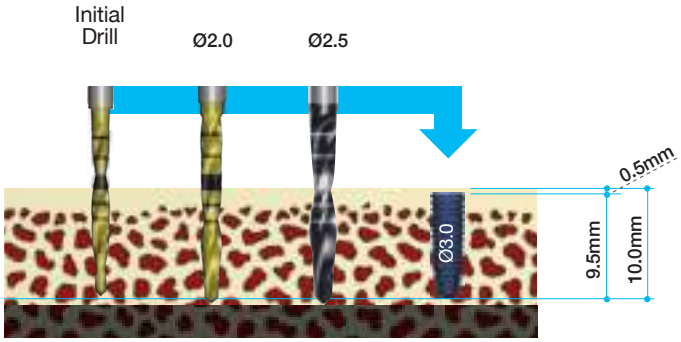
⚠ When using the Ratchet Wrench, do not use an excessive torque as it can damage of internal structure of the fixtures. It is not recommended to exceed the maximum torque of 75N·cm.



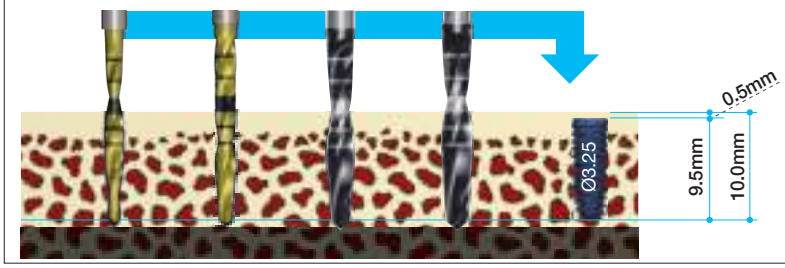
The actual lengths of MiNi™ internal fixtures are 0.5mm shorter than the depth markings of a Shaping Drill. Therefore, the fixture will be placed 0.5mm under the crest automatically.

Actual drilling depth 10.5mm = 0.5mm subcrestal + 9.5mm actual fixture length + 0.5mm Y value
* Fixture Ø3.0 (Y value = 0.5mm), Ø3.25 (Y value = 0.6mm)

➲ Surgical drilling sequence



Actual drilling depth 10.5mm= 0.5mm subcrestal + 9.5mm actual fixture length + 0.5mm Y value



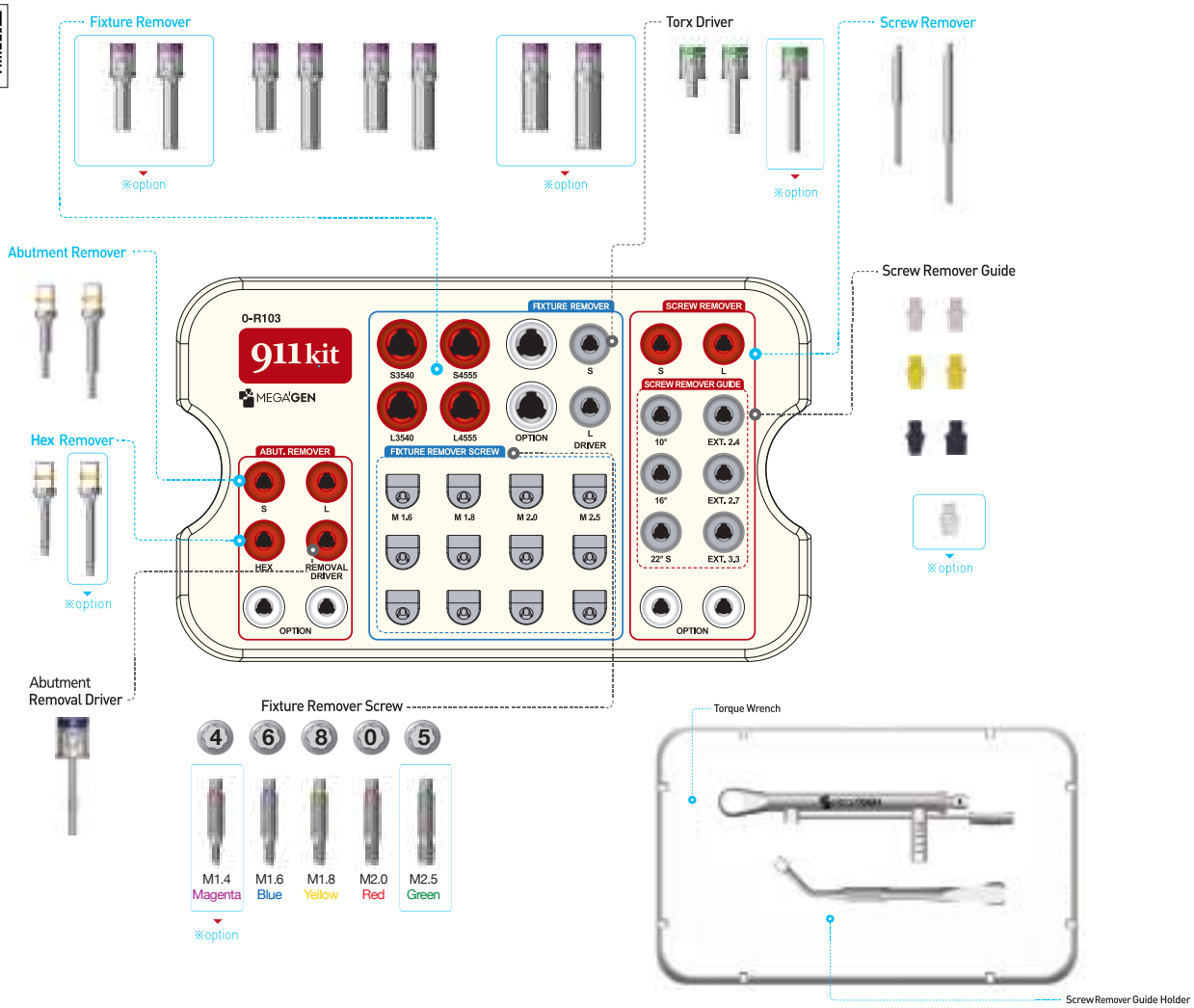
Actual drilling depth 10.6mm = 0.5mm subcrestal + 9.5mm actual fixture length + 0.6mm Y value

911 kit

The total solution kit to remove broken pieces easily when fixture, abutment or screw are fractured.

Ref.C

KPSCS3000

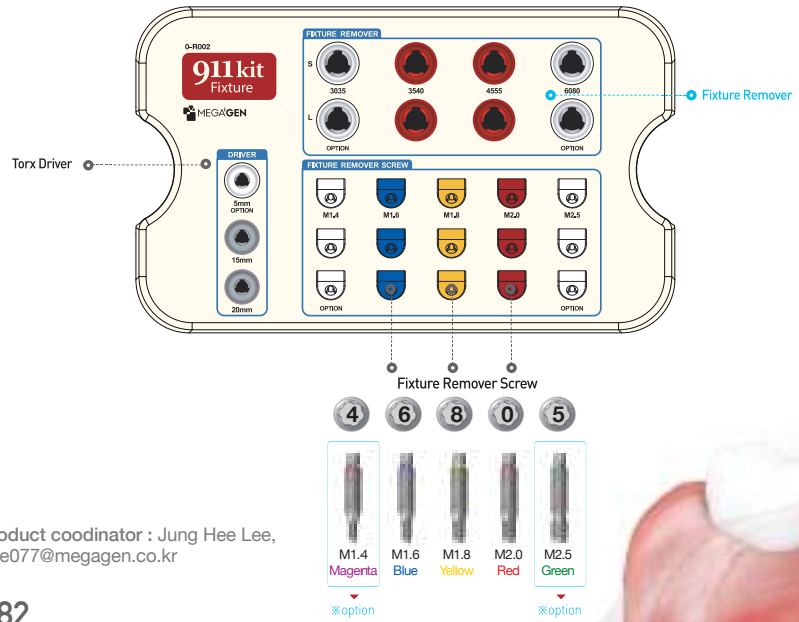


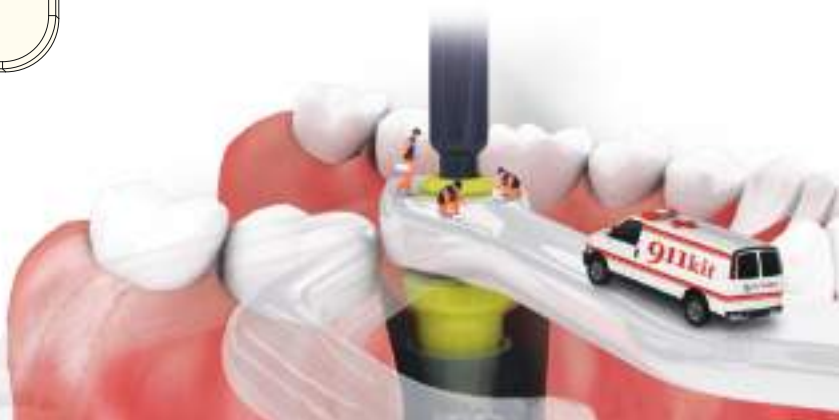
911 Fixture Removalkit

This is a simplified version of 911 kit, only to use for fixture removal.

Ref.C

KPSFS3000





Product coodinator : Jung Hee Lee,
free077@megagen.co.kr

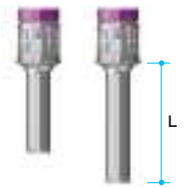
911 kit Components (Continued)

Fixture Remover

- To remove the fixture. When selecting a Fixture Remover, consider the outer diameter of a Fixture. In case of AnyRidge Fixture that the thread is formed under platform, select a Fixture Remover according to platform size

Applied Fixture Diameter	Length(mm)	Ref.C
Ø3.0~Ø3.6	15	*FSS3035
	20	*FSL3035
Ø3.7~Ø4.6	15	FSS3540
	20	FSL3540
Ø4.7~Ø5.6	15	FSS4555
	20	FSL4555
Ø5.7~Ø7.0	15	*FSS6080
	20	*FSL6080

(*) Separate sales item.



Fixture Remover Screw

- To connect fixture and Fixture Remover.
- Recommended tightening torque
  - FSS14, FSS16 : 40~50 Ncm
  - FSS18, FSS20, FSS25 : 70~80 Ncm.

Applied Fixture Thread	Color	Torque	Ref.C
M1.4 (MiNi)	Magenta	40~50 Ncm	*FSS14
M1.6 (EZ Plus, ExFeel Ø3.3)	Blue		FSS16
M1.8 (AnyRidge)	Yellow	70~80 Ncm	FSS18
M2.0 (AnyOne, MegaFix, EZ Plus, ExFeel)	Red		FSS20
M2.5 (Rescue)	Green		*FSS25

(*) Separate sales item.

Torx Driver

- To connect fixture removal screw to a fixture.

Length (mm)	Ref.C
5	TD05
15	TD15
20	*TD20

(*) Separate sales item.

Torque Wrench

- TW500 : To check torque force when removing fixture.
- TW70 : To check torque force when tightening Fixture Remover Screw.

Type	Ref.C
300Ncm	TW500
70Ncm	*TW70

(*) Separate sales item.

911kit Components

Abutment Remover

- To remove fractured abutment.
- Use screw size M1.8 & M2.0.

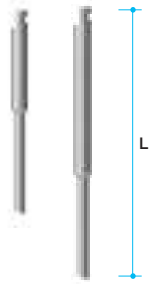
Length (mm)	Ref.C
22	ASS
27	ASL

Screw Remover

- To remove fractured screw.
- Screw size of system
  M1.4=MiNi
  M1.8=AnyRidge
  M2.0=AnyOne

Length (mm)	Type	Ref.C
30	M1.4 & M1.6	*SS1416S
45		*SS1416L
30	M1.8 & M2.0	SSS
45		SSL

(*) Separate sales item.



Screw Remover Guide

- To secure the Screw Remover from moving side to side when removing the screw.

Applied Fixture Diameter	Type	Ref.C
Internal	10°	SSIG10
	16°	SSIG16
	22°	*SSIG22S
	22°	SSIG22
	22°	*SSIG22W
External	Hex 2.4	SSEG24
	Hex 2.7	SSEG27
	Hex 3.3	SSEG33

(*) Separate sales item.

Screw Remover Guide Holder

- Tool to support the Screw Remover Guide.

Ref.C
SSGH

Hex Remover

- To remove hex-damaged Abutment Screw, Cover Screw or Healing Abutment.

Length (mm)	Ref.C
22	HSS
27	HSL

Broken Abutment Remover Set for AnyRidge

: Remover set to remove fractured AnyRidge Abutment

Ref.C
ARARS

▶ **Components**

High Speed Bur + Abutment Remover Driver + Abutment Remover Housing

▶ **How to**

grind remaining fractured abutment using a high-speed bur, and remove the residue using a housing-connected driver

▶ **Recommendations**

1. If an abutment hex is not separated even though the abutment is removed up to the stopper, remove the abutment hex with pincette.
2. Check the blade before usage. It is highly recommended to use a new bur if it is worn out.
3. Wash and sterilize immediately after every usage

※Cautions

1. Perpendicularly insert a high-speed bur into a fixture
2. Do not overload when using a high-speed bur. Adequate irrigation is highly recommend when using.
3. The given kit case is for storage only. Do not sterilize.

Grinding and Removal Bur with a Implant motor

Ref.C
ARARHB18

Abutment Remover Driver & Housing

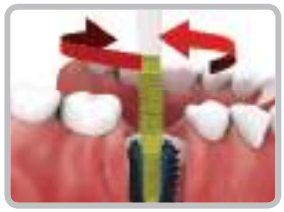
Ref.C
ARARD
ARARH

▸▸ How to use 911kit

Fixture Remover

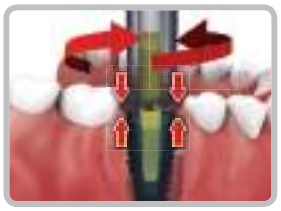
- Fixture Remover Screw: Single use only
- Do not use in case of a gap in Fixture Remover

Remove the prosthesis of the fixture to be removed, and the surrounding bone.



Select a Fixture Capture Screw of the same size as the fixture internal screw. Use the Torx Driver to turn the screw clockwise (40Ncm~70Ncm) to place in the fixture. (Use of torque less than 40Ncm for M1.6, and 60Ncm for other products may lead to loosening)

Select a Fixture Remover that fits the fixture diameter. Turn the fixed Fixture Remover Screw counterclockwise until it touches the fixture. (For a torque of greater than 300Ncm, it is recommended to use a Trephine bur)



Fixture and Fixture Remover are tightly connected as rising force and descending force are combined. (Suction is needed; debris may happen on removal of a fixture)

Using Torque Wrench, turn counterclockwise and pull out fixture and Fixture Remover. (No more than maximum torque per fixture)

Removed fixture can be pulled out, turning Fixture Remover and fixture clockwise, holding onto vice plier.

Abutment Remover

- Can use for abutments that use M1.8 & M2.0 screws.
- Cannot use for abutment that use M1.6 and M2.5

Insert the Abutment Remover in the fractured abutment hole.

Use the Ratchet Wrench to turn clockwise in order to join the abutment and the Abutment Remover as one body. (Ratchet Wrench is included in surgical kit)

Move the Abutment Remover sideways while pulling up to remove it. (Use of excessive force may traumatize the fixture or the bone)

Secure the separated abutment in a vice or vice pliers. Use the Ratchet Wrench to turn counterclockwise to separate the abutment with the Abutment Remover.

Screw Remover

Remove the broken Abutment Screw and the abutment.

Select the correct Screw Remover Guide that fits the fixture connection to join.

Secure the Screw Remover Guide and insert the Screw Holder in the Screw Remover Guide hole.

Push the Screw Remover downwards while rotating counter clockwise to separate it from the fixture internal screw.
(rpm:30~50, Torque : 30Ncm)

Remove the pieces of broken screw from the fixture internal screw using forceps.

When separating the holder from the guide, push in the direction of the arrow to separate.

Hex Remover

In cases that Abutment Screw, Cover Screw or Healing Abutment's hex is damaged.

Use the Ratchet Wrench to turn counterclockwise to join the abutment with the Abutment Remover as one body. (Use a torque of less than 40Ncm., Ratchet Wrench is included in surgical kit.)

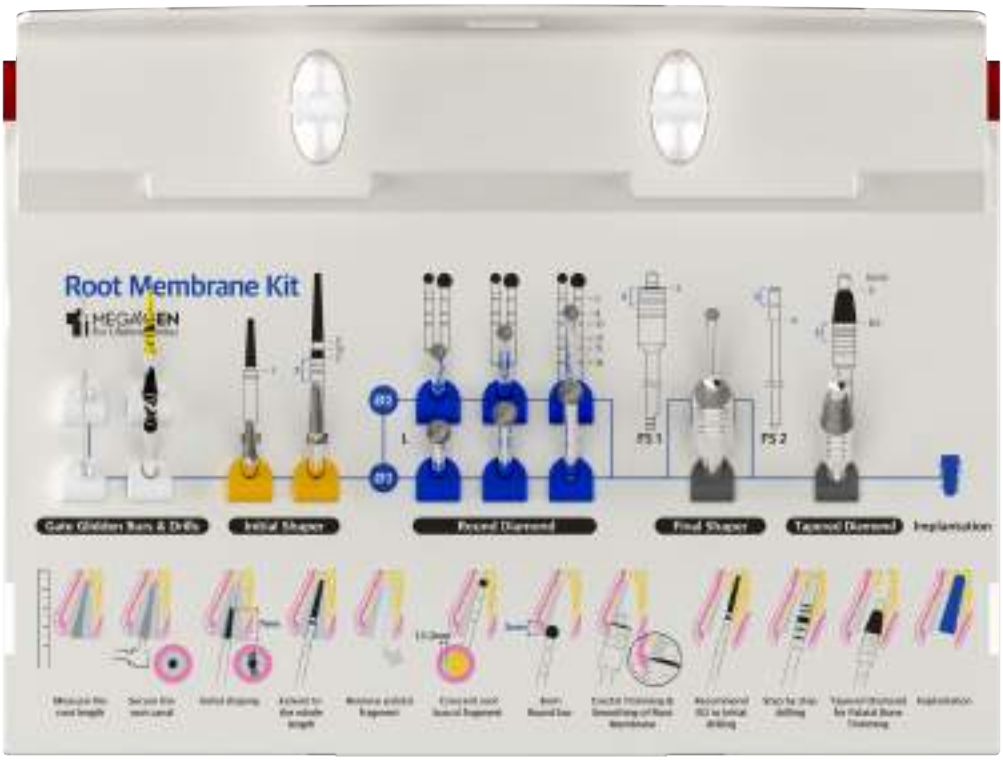
Place the removed abutment in the vice. Use the Ratchet Wrench to turn clockwise to separate the abutment with the Hex Remover.

Root Membrane Kit

I. Root Membrane Kit

The best result of Immediate Implant Placement in esthetic zone.
Save the time & See an exceptional esthetic effect.
Root Membrane KIT is the answer for you!

Ref.C
RMK3000CS
RMK3000MM
RMK3000HY
RMK3000CH
RMK3000KB



We made it !

• Dr. Yoshiharu Hayashi

- Member/Diplomate and ICOI Japan Advanced Credential
- Commission of International Congress of Oral Implantologists
- Visiting Professor, Nihon University School of Dentistry at Matsudo
- Private practice in Tokyo & Chiba Provence

• Dr. Kwang Bum Park

- AAP International Member
- Active Member - Academy of Osseointegration (AO)
- Director of Japanese Association of Dental occlusion
- Professor of Implant & Periodontic Surgery, MINEC
- Chief Director of MIR dental hospital, Daegu. South Korea.
- CEO - MegaGen Implant Co., S. Korea

• Dr. Chang Hoon Han

- Residency, oral and maxillofacial surgery, Chunnam National University Hospital
- Visiting professor, School of dentistry, Chunnam National Univisersity
- Visiting instructor, Chunnam National University
- Director of MIR dental hospital, Kyung-san. South Korea.
- Active Member of MINEC (MegaGen International Network of Education & Clinical research)

• Dr. Konstantinos D. Siormpas

- Graduated from the Dental School of Aristotle University of Thessaloniki.
- Private clinic in Larisa since 1978.
- Board member of Stomatological Society in Thessaly
- Founded a dental clinic called “Dental Care” with emphasis on surgical and prosthetic part of implantology and aesthetic dentistry in 2003
- Active member of the EDA (European Society of osseointegrated implants)
- Associate editor in the journal European Journal of Dental Science

• Dr. Mitsias E. Miltiadis

- Graduated from New York University Department of Periodontology and Implant Dentistry
- Master’s Degree in Biomaterials & Biomimetics from the Department of Biomaterials at NYU.
- Achieved Dr. Med. Dent from University of Kiel in Germany on Biomaterials.
- An adjunct Instructor position at NYU Department of Periodontology and Implant Dentistry
- Member of Young MINEC Class 2013 (MegaGen International Network of Education & Clinical Research)

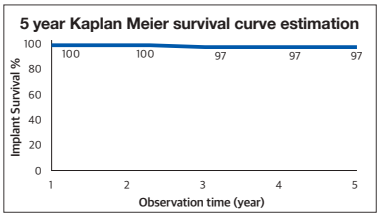
▸▸ Root Membrane Technique

- Courtesy of Dr. Siormpas & Dr. Miltiadis E. Mitsias

Root Membrane technique is a surgical procedure performed before implant placement to induce successful osseointegration as increasing the soft tissue aesthetics by minimizing the loss of the buccal bone after extraction.
It separates the root at the time of extraction and leaving the root partially in the buccal side.
Threrfore, it is possible to maintain the physiological relationship with the buccal side without deteriorating.

- The surgical procedure is currently performed using various techniques and instruments, however, since it is difficult to perform, it is considered an area that only skilled dentists can do.

- Through the step-by-step customized Diamond drill and simple guide, the tissue might entirely protected with the precise tooth modification. We released this KIT aiming to make the surgical procedures that had required intricate technique much easier.



The buccal side of Immediate implant placement in the anterior maxilla, there are Cementum, PDL, Attachment fibers, Vascularization, and Bundle bone maintained. Therefore, it leads continuous and predictable osseointegration by minimizing the loss of the buccal bones caused by socket remodeling that occurs after extraction.

According to a study published in JOMI, RMT is an alternative treatment method for Immediate placement techniques in aesthetic part. It has extremely high success rate compared to the implant placement after extraction.

As the study shows, the reason is that when the buccal root fragment is intentionally left the blood supply will be maintained smoothly and consequently the dimensions of alveolar ridge can be preserved. On the basis of this evidence, we can conclude that Root Membrane Technique is a safe treatment yields a high implant success rate.

Also, this unique technique can ensure the dimensional stability of facial and soft tissues around the implant site without using of the supplementary biomaterials such as bone grafts. Dento-gingival fibers retained in the root fragment increases soft tissue aesthetics when they are in process of esthetical Immediate implant placement.

Fig. 1 The clinical feature before surgery of the maxillary left central incisor which is planned for extraction due to significant resorption.
Fig. 2 Cone beam CT section indicates consistent loss of tooth structure with invasive cervical root resorption.
Fig. 3 Immediate implant placement on the lingual side of the root fragment.
Fig. 4 Immediate loading after fixture placement.
Fig. 5 Follow-up for 2 years, the finally restored clinical photo. (Creeping attachment)
Fig. 6 Top (Left to right)
The 24-month radiograph showed a limitation of defect size, while the resorption traces of apex did not appear radially. There was no sign of radiopacity consistent with the defect fill for 36 months. Apex resorption of root is confirmed.
Bottom (Left to right)
With 48 months of follow-up, the cross-section showed complete defect fill and about 1.5 mm root reabsorption. The reabsorption area is full of new bone cell with radiologic pattern and it leads new born growth.

10 years follow-up

> "Verify more Clinical Evidence of Root Membrane Technique which is certified a long-term clinical result"

The socket-shield technique to support the buccofacial tissues at immediate implant placement
INTERNATIONAL DENTISTRY – AFRICAN EDITION VOL. 5, NO. 3
Howard Gluckman, Jonathan Du Toit, Maurice Salama

A Step- by-Step Description of PDL-Mediated Ridge Preservation for Immediate Implant Rehabilitation in the Esthetic Region
The International Journal of Periodontics & Restorative Dentistry VOL. 35, No.6
Miltiadis E. Mitsias, Konstantions D. Siormpas, Eleni Kontsiotou-Siormpas, Hari Prasad, David Garber, Georgios A. Kotsakis

Advantages of the Root Submergence Technique for Pontic Site Development in Esthetic Implant Therapy
The International Journal of Periodontics & Restorative Dentistry VOL. 27, NO. 6
Maurice Salama, Tomohiro Ishikawa, Henry Salama, Akiyoshi Funato, David Garber

▸▸ Advantage of Root Membrane KIT

"Root Membrane technique"

"Socket Shield technique"

"Root Submergence technique"

"Partial Extraction Therapy"

Root Membrane KIT is the answer for you!

Best Diamond Drill for Root Membrane Technique

MegaGen's Root Membrane Kit is made by combining the best quality of dental diamond drill technology from 50-year-old Japanese company called "Hinatawada Precision manufacturing."
The reason why MegaGen selected Hinatawada is that it is a Japanese premium diamond drill company which has been recognized as one of the world's top class products by the philosophy of craftsmen.
Also, Hinatawada has the most advanced technology for Root Membrane technique; no wabbling , cutting power, and durability that cannot be found anywhere in the world.

Advantages of MegaGen Diamond Drill

1. It does not give excessive vibration to the teeth, and you can get a smooth formed surface.
2. 3-4mm long diamond drill does not wabble when it is used at high speed rotation. (Rotation accuracy: less than 3 microns)
3. The sharpness of the diamond drill is maintained for a long time.
4. The diamond drill, which is made with high precision by grinding process, can be treated with the same feeling always because there is no deviation per product.
5. By increasing the hardness of the diamond drill, you can avoid the risk of bending during treatment, thus making it safer.
6. It has high rotation accuracy and small shaft vibration, so it prevents abrasion of the handpiece bearing part

Perfect match with AnyRidge

The strong point of Root membrane technique is Immediate Implant Placement. Strong initial stability guarantees a high success rate. AnyRidge Implant system of MegaGen and Root membrane technique is in harmony with strong initial stability and fast osseointegration.

AnyRidge Knife Thread Design

Knife Thread® with an oblique shape is designed of round face and narrow thread. Therefore, it can obtain an optimal ISQ because it is placed without damaging the unique architecture of cancellous bone. Also, it gives even stress distribution.

AnyRidge Xpeed Surface Treatment

XPEED® surface treatment technology is that the Ca^{2+} ions which increase osseointegration rate on fixture surface can be reached through the chemical reaction with 0.5 micrometer thickness. Also, there is no problem of absorption of the coating layer after scaling deterioration, BIC and Removal Torque values are excellent.

The Root Membrane Technique: Human Histologic Evidence after Five Years of Function

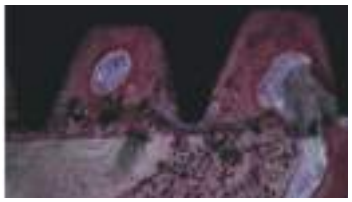
- Miltiadis E. Mitsias, Konstantinos D. SioRoot Membranepas, Gerogios A. Kotsakis, Scott D. Ganz, Carlo Mangano, Giovanna Iezzi

Our present human histologic study supports the assertion that the Root Membrane technique is effective in preventing bone resorption of the buccal bone plate of the anterior maxilla, five years after the placement of an immediate implant. This human histologic evidence that Root Membrane can preserve the buccal bone plate is of great value since it can help validate the clinical use of this surgical technique to maintain the hard and soft tissues over time and to optimize aesthetic results.

The retrieved tissue sample, which included the implant, the root membrane, the space between them, and the buccal bone plate, appeared intact. Only palatally to the fixture, and in the most coronal area, it appear evident that the trauma had detached the surface of the implant from the palatal bone; that area was of less importance for the present histologic evaluation and, therefore, the sample could be considered in perfect condition for histologic and histomorphometric analysis. The histomorphometrical evaluation showed a bone-to-implant contact of 76.2%.

Trabecular, mature bone at the interface of the implant was observed. The bone was present between the implant and the root. The root membrane and the buccal bone plate appeared intact without any signs of resorption.

Compact bone in the mediat thirds and apical portion of the implant were evident. No gaps were present at the interface.



In the apical portion of the root, it was observed that the cementum migrated from the residual root to the implant surface.
Acid fuchsin-toluidine blue 40x.

Hindawi
BioMed Research International
Volume 2017, Article ID 7269467, 8 pages
https://doi.org/10.1155/2017/7269467

Components for Root Membrane Kit

Maximum Speed (RPM) of Drill		
R1	1,200	3DD50, 4DD4005, SD2018L, SD2518L
R2	30,000	2DD2034, 2DD3034
R3	40,000	1DD1607, 1DD1911
R4	100,000	2DD2025, 2DD2029, 2DD3025, 2DD3029, 3DD20H

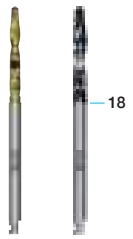
Gate Glidden Burs

- Separate purchase
- Featured product
- Dentsply | Gate Glidden Drill
- No.3 (Ø0.9) / No.4 (Ø1.1)

Shaping Drill

(Gate Glidden Drills)

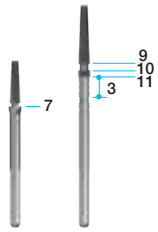
RPM	Diameter	Length(mm)	Ref.C
R1	Ø2.0	43	SD2018L
	Ø2.5	43	SD2518L



Diamond Drill

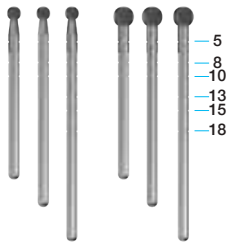
(Initial Shaper)

RPM	Diameter	Length(mm)	Ref.C
R3	Ø1.6	25	1DD1607 (IS1)
	Ø1.9	34	1DD1911 (IS2)



Diamond Drill
(Round Diamond)

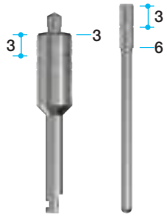
RPM	Diameter	Length(mm)	Ref.C
R4	Ø2.0	25	2DD2025
		29	2DD2029
R2		34	2DD2034
R4	Ø3.0	25	3DD3025
		29	3DD3029
R2		34	3DD3034



Diamond Drill
(Final Shaper)

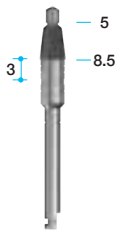
RPM	Diameter	Length(mm)	Ref.C
R1	Ø5.0	28	3DD50 (FS1)
R4	Ø2.0	29	3DD20H (FS2)

* FS1 Low Speed / FS2 High Speed



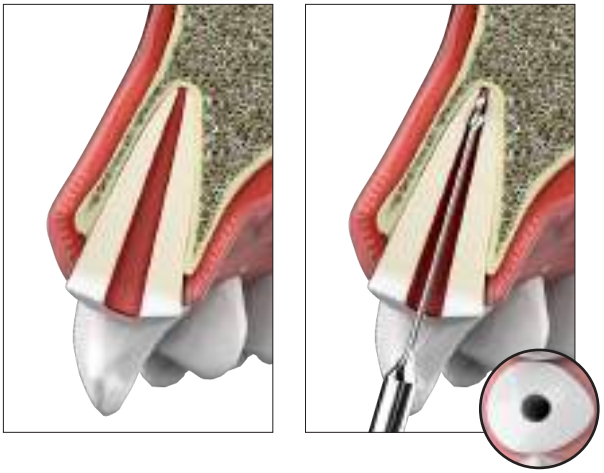
Diamond Drill
(Tapered Diamond)

RPM	Diameter	Length(mm)	Ref.C
R1	Ø4.0	32	4DD4005



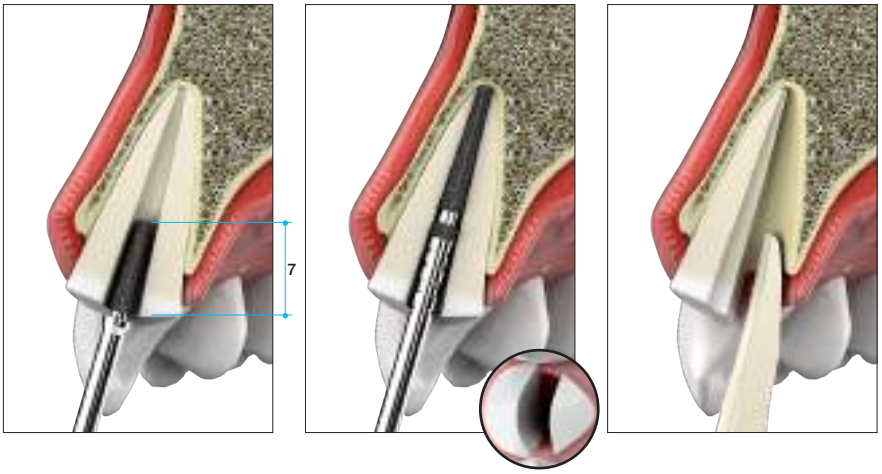
▸▸ How to use Root Membrane Kit

1. After measuring the length of root canal, secure the root canal using the Gate Glidden Drill and Bur.



2. Use Initial Shaper (IS1) to perform an initial root split about 7mm so that lingual surface becomes slightly rounded.

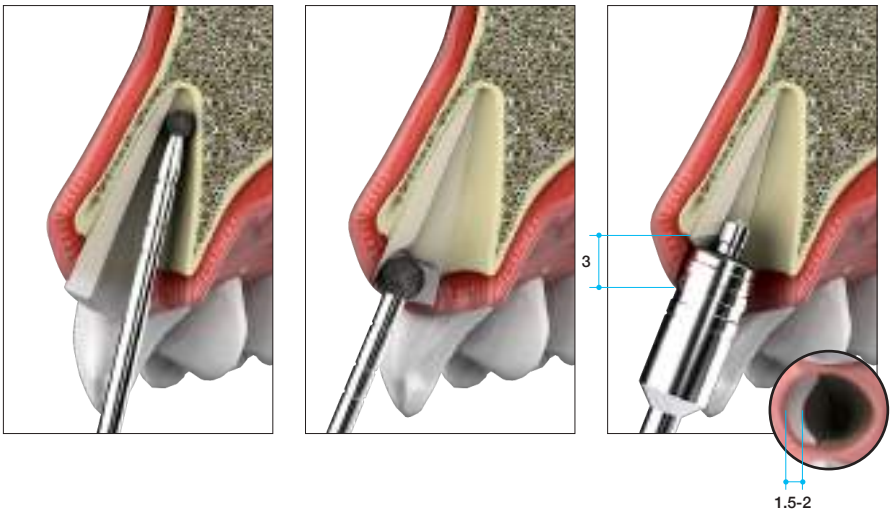
3. Then use the Initial Shaper (IS2) to expand as the length of the root and remove the palatal side fragment.



4. Use a round Diamond Drill that matches the length and size of the root fragment. Then trim the remaining roots forming a crescent moon when viewed from the occlusal surface.
The ideal thickest central part of Root fragment is 1.5-2mm when viewed from the occlusal surface.

5. Perform the initial trimming so that the crestal part of the root fragment on the gingival part descends 3mm below the tip of gingiva.

6. Use the Final Shaper (FS1: for low speed or FS2: for high speed) to trim and smoothen the root fragment (Crestal) remaining below the tip of the gingiva.



7. To prevent slip of the common drill along the slot, initial drilling should be done using an initial shaper (IS2) after matching the direction in which the fixture is to be placed.

8. After that, it needs step-by-step drilling.

9. Due to the feature of immediate placement, there is no resistance on the labial side, so labial shifting is likely to occur when the fixture is placed.
   To prevent this, trim the palatal side bone before fixture placement by using tapered diamond.
   It's kind of counter sinking drilling. You can adjust the depth of the tapered diamond according to the diameter of the fixture being placed.

10. Place the fixture without touching the remaining root fragment.
    If a gap between the root fragment and the fixture is wide, perform a little bone graft.

Root Membrane Clinical Case

➲ Clinical Case 1

- Courtesy of Dr. Yoshiharu Hayashi

Patient : 65 year old female
#7, 8, 9 on the left in maxilla have only roots remaining and #10 on the left is defective. As there were no residual tooth structure in the root region, it was highly likely the root would fracture even with new prosthesis (Figure 01, 02).
The plan was to have immediate placement after extraction with the root membrane technique for #7 on the right, delayed placement where placement is done after bone is matured for #10 on the left, and root membrane pontic for #8, 9
The sequence of the root membrane technique is to be revisited through this case.

Progress of Treatment
After cutting the roots of #7, 8, 9 on the left in maxilla mesio - distally with an ISF bur (Figure 03, 04), the palatal roots are removed.
Then, space should be created between the residual labial root fragments and the implants so that they do not touch with each other, and the surface of the root fragments facing the implants should be smoothed to facilitate bone regeneration. If it is trimmed with a round diamond bur it would be hard to make the surface smooth as bumps can be made.

Therefore, the root fragments should be trimmed using a root membrane bur that can create wide smooth surface (Figure 05). After that, the root fragments should be reduced up to the bone margin using a round diamond bur (Figure 06), and then 45 degree inclination should be made with a crestal trimming bur (Figure 07, 08).

As a result, gingiva will be inclined and the form of prosthesis can be relatively freely selected.
In summary, after forming the root fragments in 1-1.5mm thickness, the implant facing side should be trimmed smoothly followed by implant placement in a position where some space can be secured.

Fig 1
Intraoral frontal view at the first visit.

Fig 2
Intraoral occlusal view of anterior maxilla at the first visit. As only roots remained without healthy ferrule at #7, 8, 9 there was a very high risk of possible root fracture even if prosthesis were remade. Only root remained at #7, 8, 9

Fig 3
Residual root of #7, 8, 9 was divided mesiodistally using an ISF bur.

Fig 4
Residual root of mesiodistally divided #7, 8, 9.

Fig 5

After removing the divided palatal root fragment, the inner wall of the labial root fragment was trimmed smoothly in thickness of around 1.5mm using a root membrane bur.

Fig 6

With a round diamond bur, the root fragment was prepared until its height was the same as the bone margin.

Fig 7

About 45 degree inclination was given to the root fragment in the bone margin area using a crestal trimming bur. With this, gingiva would inline and the shape of prosthesis can be relatively freely chosen.

Fig 8
Completed root membrane.

Fig 9
A placement hole needs to be formed while checking the bone quality of the site because initial stability is key to Implant success. The bone quality of #7 was checked first and a hole was drilled appropriate for the bone quality.

Fig 10

Implant was placed apically and palatally with around 60 Ncm torque.

Fig 11

Implant Stability Quotient, ISQ, was over 70. ISQ can be used as an indicator to diagnose implant stability.
The device uses RFA (Resonance Frequency Analysis) to measure and numerically represent the biomechanic property of bone tissue around implant and the strength of the interface between implant and bone. In general, low ISQ values, compared with the higher values, are considered to have higher risk of failure3).

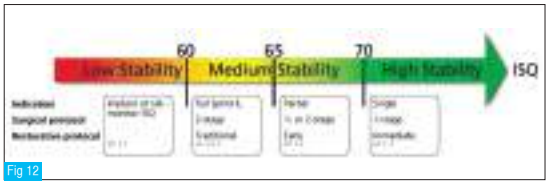


Fig 12

The relations between ISQ values and implant stability in bone.

Fig 13

Delayed implant placement was performed after waiting for the bone to mature at #10. A hole was formed by checking the bone quality at this site too. During drilling, a straight abutment was temporarily inserted on the implant already placed at #7 and was used as a guide for parallelism.

Fig 14

Implant was placed apically and palatally with about 65 Ncm torque. The depth of placement was adjusted so that the platform was set at 4 mm below the gingival margin.

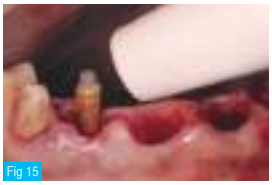


Fig 15

ISQ value was over 70.

Fig 16

Occlusal view of anterior maxilla after implant placement. The Root membrane technique was used for #7, delayed placement for #10, and the Root membrane pontic for #8, 9.

Fig 17

Intraoral frontal view immediately after surgery. Temporary restoration with contour adjusted to the patient's gingival line was delivered. As delayed placement was carried out at #10 after waiting for the bone to mature, subgingival form was Flat -contoured.

Fig 18

Intraoral frontal view #12 week post-op.

Implant is placed in a normal way but caution should be exercised during drilling as primary stability is crucial for Implant. It is important to drill the hole for implant by checking the bone quality of the site as bone quality varies depending on the location on the jaw bone. Especially in this case, as root membrane pontic installation was done for #8, 9 in the upper jaw at the same time to reduce the treatment time, immediate provisionalization would be impossible if implant primary stability is not obtained, lowering quality of life for patients during the treatment period.

In this case, after appropriate drilling is made by checking the bone quality of upper right #7 site, implant was placed palatally and slightly apically with the torgue of 60 Ncm (Figure 09~11). Next, delayed placement was done at #10 on upper left by also checking the bone quality to create the hole for placement followed by implant placement palatally and slightly apically with the torque of 65 Ncm (Figure 02~16). The implant can be placed in parallel direction based on the temporary straight abutment mounted to the implant placed first at #7 on the right. As each implant showed ISQ 70 or more, it was determined good enough for immediate provisionaliztion.

Provisional restoration contoured according to the current gingival line right after the procedure was delivered. (Figure 17).

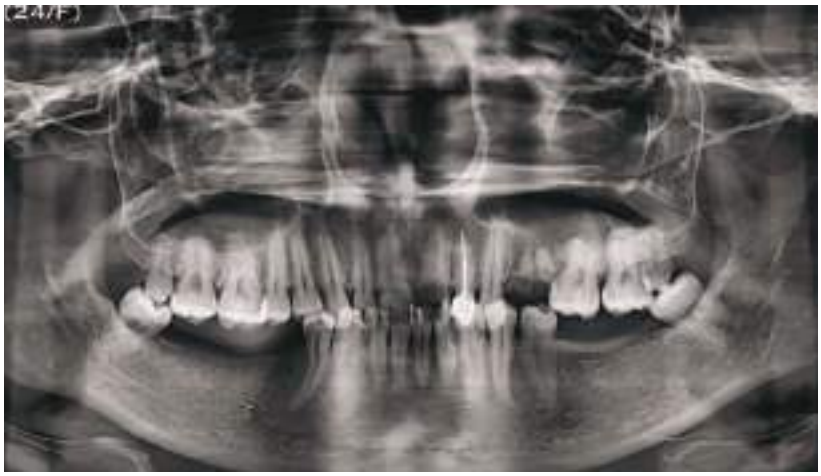
As delayed placement which awaits bone to mature was performed for #10 the subgingival form was under-contoured.
Symmetric and erengingival was maintained 12 week post-op.
(Figure 18).

Root Membrane Clinical Case

Clinical Case 2

- Courtesy of Dr. Chang Hoon Han

Case (24/F)
A 24-year-old female patient came to the office complaining severe carries in the upper left central incisor crown area, and wanted implants for the tooth, maxillary left premolar and bilateral mandibular molar region.



Clinical pre-op photo. In this case, if immediate implant placement after extraction is to be planned, firstly atraumatic extraction should be made before drilling along the lingual wall of the extraction socket. Initial stability can be obtained more easily with tapered implant. The preferred method is to place autogenous bone graft or allograft into the gap between the buccal bone fragment and implant, and xenograft which is resistant to resorption on the buccal side of the buccal bone.

The buccal bone of the root was very thin on CT and was anticipated to be lost after extraction even if it were preserved during extraction. After discussing various treatment options with the patient, the minimally invasive "Root-membrane technique" which can obtain good outcome was chosen.

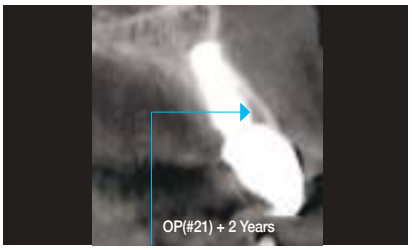
#21 : AnyRidge 4.5 x13 mm (ITV 50 N/cm, ISQ 72)
After decoronation and hemisection, lingual portion of the root fragment was removed and the remaining root fragment on the buccal side was trimmed to the crestal bone level. The lingual side of the remaining root fragment was smoothly trimmed using a diamond bur. In terms of root membrane thickness, the thickest central part should be 1.5 ~ 2 mm from the occlusal view.
As the implant was positioned 1~2 mm inferior to the bone margin, the bone margin of the root membrane was made inclined with a 45 degree angle palatally (lingually) before implant placement to enable proper formation of emergence profile for future prosthesis. Drilling was performed to place implant on the lingual side of the root membrane in a normal way. Before AnyRidge 4.5x13 mm was placed, final checking was done to see if the completed root membrane was mobile. Relatively large diameter implant was placed but a 2 mm or bigger gap existed between the implant and the root membrane remaining on the buccal side.
In general, it is recommended to fill the gap with autogenous bone graft or allograft. In this case, the top portion of the gap was simply blocked with absorbable hemostat and suturing was done minimally hoping the blood clot filling the gap would turn into bone later. The implant placement torque was 50 Ncm and the ISQ value right after the placement was 72. As the initial stability was good, pick-up impression coping was connected right after surgery for immediate provisionalization and impression was taken.

OP + 1 day
On the next day of implant placement, provisional using temporary abutment was delivered and the patient was advised not to use the anterior region during the healing period.

OP + 8 months
At 8 month post-op, the provisional crown was modified to look similar to the final prosthesis.

OP + 9 months
The area around the implant prosthesis was confirmed to remain healthy without any sign of inflammation while provisional restoration period. At 9 month post-op, screw retained type final prosthesis was delivered. After the delivery of the final prosthesis, it was confirmed that continuity of the buccal bone to the adjacent teeth was maintained on the occlusal

OP + 9 months
At 9 month post-op, prosthetic treatment was completed for implants in the upper central incisors as well as upper left premolar and bilateral mandibular posterior region.



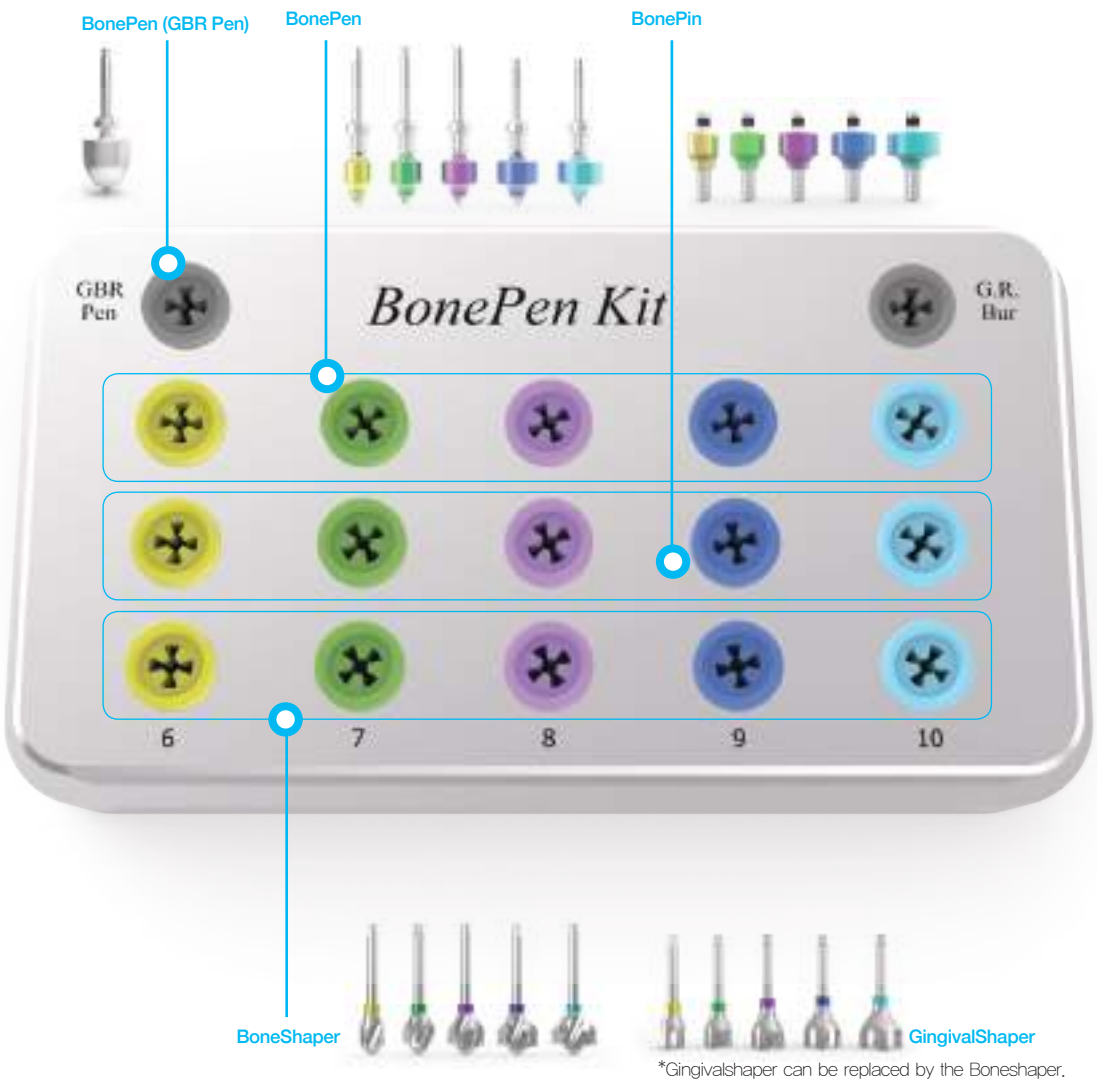
OP(#21) + 2 years
On the 2 year post-op CT, the very thin remaining buccal bone before the surgery was fused with the root membrane and resembled cortical bone (corticalization). Although the gap between the implant and the root membrane remaining on the buccal side was simply blocked with absorbable hemostat without any graft, it was filled with blood clot and was replaced by cancellous bone.

Meg-Align System

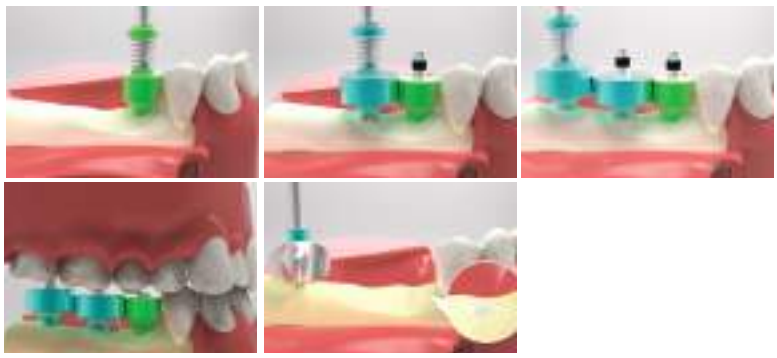
I. BonePen kit

Just follow color band, and get simplicity & accuracy for Initial Drilling/ Path Guide/ Bone Collection

Ref.C
BPPRO3



*Gingivalshaper can be replaced by the Boneshaper.



Implant surgical guide

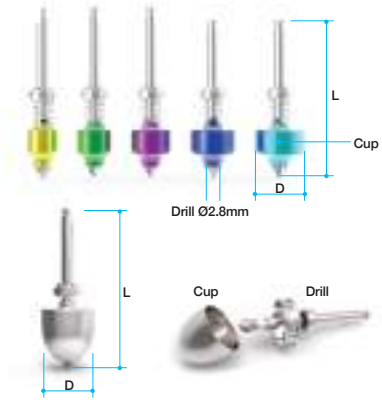
Consider BonePens and BonePins as teeth. They guide implant position with their diameters (BonePens, BonePins) and heights(BonePins). Excess alveolar bones above fixture can be trimmed out with BoneShaper.

BonePen kit Components

BonePen

- BonePen is the second brand name of Auto-Max.
- Implant surgical guide for Implant initial drilling & Bone collection.
- Decortification & Bone collection Capacity of GBR Pen is approximately 0.4cc.

Mark	Diameter	Color	Length(mm)	Ref.C
6Pen	Ø6.0	Yellow	33.0	BP6MV2
7Pen	Ø7.0	Green	33.0	BP7MV2
8Pen	Ø8.0	Violet	33.0	BP8MV2
9Pen	Ø9.0	Blue	30.5	BP9SV2
10Pen	Ø10	SkyBlue	30.5	BP10SV2
GBR Pen	Ø10.0	N/A	29.5	BPGBR



BonePin

- Excess alveolar bone above fixture can be trimmed out with BoneShaper.

Mark	Diameter	Color	Length(mm)	Ref.C
6Pin	Ø6.0	Yellow	7.0	BPP6V3
7Pin	Ø7.0	Green		BPP7V3
8Pin	Ø8.0	Violet		BPP8V3
9Pin	Ø9.0	Blue		BPP9V3
10Pin	Ø10.0	SkyBlue		BPP10V3

BoneShaper

- BoneShaper is the second brand name of Bone Profiler
- Analog of natural tooth.
  (3D positioning guide_ Bucco-lingual, Mesio-distal, Vertical dimension gauge)

Mark	Diameter	Color	Length(mm)	Ref.C
6BoneShper	Ø5.8	Yellow	28.0	BS06V3
7BoneShper	Ø6.8	Green		BS07V3
8BoneShper	Ø7.8	Violet		BS08V3
9BoneShper	Ø8.8	Blue		BS09V3
10BoneShper	Ø9.8	SkyBlue		BS10V3

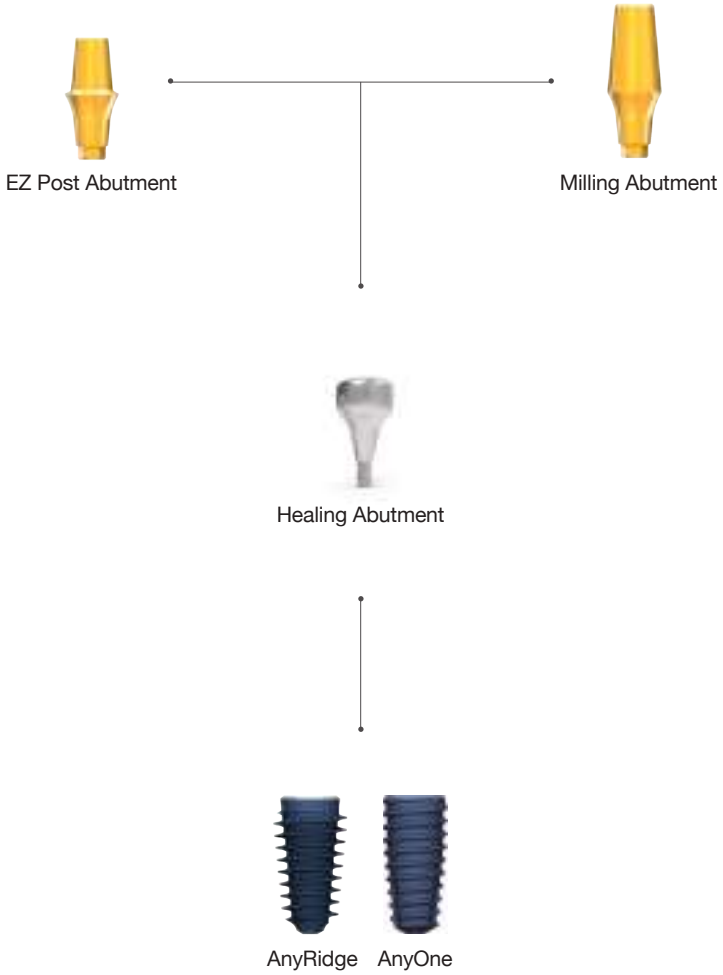
GingivalShaper

- GingivalShaper is the second brand name of Tissue Punch.
- Emergeny instrument for cutting gingiva

Mark	Diameter D1	Diameter D2	Color	Length (mm)	Ref.C
6GingivalShper	Ø4.5	Ø5.6	Yellow	28.0	GS06V1
7GingivalShper	Ø5.0	Ø6.6	Green		GS07V1
8GingivalShper	Ø6.0	Ø7.6	Violet		GS08V1
9GingivalShper	Ø7.0	Ø8.6	Blue		GS09V1
10GingivalShper	Ø8.0	Ø9.6	SkyBlue		GS10V1

II. Meg-Align Abutment line-up

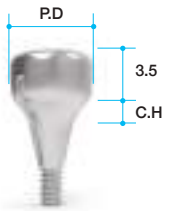
1. Multi Type



Abutment & Components (Continued)

Healing Abutment

- Recommend torque : 5 - 8Ncm(by hand).



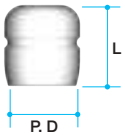
AnyRidge Internal

Mark	Profile Diameter	Cuff Height(mm)	Ref.C
6S	Ø5.4	2.0	ARAH5455
6M		3.5	ARAH5470
6L		5.0	ARAH5485
7S	Ø5.9	2.0	ARAH5955
7M		3.5	ARAH5970
7L		5.0	ARAH5985
8S	Ø6.9	2.0	ARAH6955
8M		3.5	ARAH6970
8L		5.0	ARAH6985
9S	Ø7.9	2.0	ARAH7955
9M		3.5	ARAH7970
9L		5.0	ARAH7985
10S	Ø8.9	2.0	ARAH8955
10M		3.5	ARAH8970
10L		5.0	ARAH8985

AnyOne Internal

Mark	Profile Diameter	Cuff Height(mm)	Ref.C
6S	Ø5.4	2.0	AOAH5455
6M		3.5	AOAH5470
6L		5.0	AOAH5485
7S	Ø5.9	2.0	AOAH5955
7M		3.5	AOAH5970
7L		5.0	AOAH5985
8S	Ø6.9	2.0	AOAH6955
8M		3.5	AOAH6970
8L		5.0	AOAH6985
9S	Ø7.9	2.0	AOAH7955
9M		3.5	AOAH7970
9L		5.0	AOAH7985
10S	Ø8.9	2.0	AOAH8955
10M		3.5	AOAH8970
10L		5.0	AOAH8985

Comfort Cap



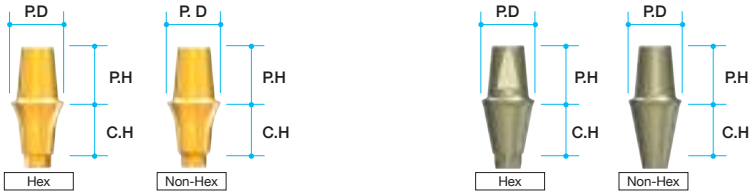
AnyRidge/AnyOne Internal

Profile Diameter	Length (mm)	Ref.C
Ø4.4	6.2	CFCP4462
Ø4.9		CFCP4962
Ø5.9		CFCP5962
Ø6.9		CFCP6962
Ø7.9		CFCP7962

Abutment Options

EZ Post Abutment

- AnyRidge: Multi Post Screw(AANMSF/ AANMST) are included.
- AnyOne : Abutment Screw(AOAS0H20) is included
- Recommend torque : 35Ncm



AnyRidge Internal

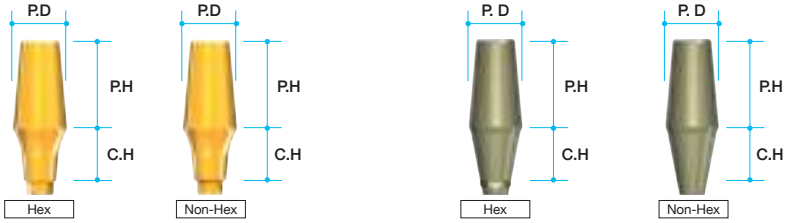
Mark	Profile Diameter	Cuff Height(mm)	Post Height(mm)	Type	Ref.C
6S	Ø4.4	2.0	5.0	Hex	ARAZ4425L
6M		3.5			ARAZ4435L
6L		5.0			ARAZ4455L
6S		2.0		Non-Hex	ARAZ4425NL
6M		3.5			ARAZ4435NL
6L		5.0			ARAZ4455NL
7S	Ø4.9	2.0		Hex	ARAZ4925L
7M		3.5			ARAZ4935L
7L		5.0			ARAZ4955L
7S		2.0		Non-Hex	ARAZ4925NL
7M		3.5			ARAZ4935NL
7L		5.0			ARAZ4955NL
8S	Ø5.9	2.0		HEX	ARAZ5925L
8M		3.5			ARAZ5935L
8L		5.0			ARAZ5955L
8S		2.0		Non-HEX	ARAZ5925NL
8M		3.5			ARAZ5935NL
8L		5.0			ARAZ5955NL
9S	Ø6.9	2.0		Hex	ARAZ6925L
9M		3.5			ARAZ6935L
9L		5.0			ARAZ6955L
9S		2.0		Non-Hex	ARAZ6925NL
9M		3.5			ARAZ6935NL
9L		5.0			ARAZ6955NL
10S	Ø7.9	2.0		Hex	ARAZ7925L
10M		3.5			ARAZ7935L
10L		5.0			ARAZ7955L
10S		2.0		Non-Hex	ARAZ7925NL
10M		3.5			ARAZ7935NL
10L		5.0			ARAZ7955NL

AnyOne Internal

Mark	Profile Diameter	Cuff Height(mm)	Post Height(mm)	Type	Ref.C
6S	Ø4.4	2.0	5.0	Hex	AOAZ4425T
6M		3.5			AOAZ4435T
6L		5.0			AOAZ4455T
6S		2.0		Non-Hex	AOAZ4425NT
6M		3.5			AOAZ4435NT
6L		5.0			AOAZ4455NT
7S	Ø4.9	2.0		Hex	AOAZ4925T
7M		3.5			AOAZ4935T
7L		5.0			AOAZ4955T
7S		2.0		Non-Hex	AOAZ4925NT
7M		3.5			AOAZ4935NT
7L		5.0			AOAZ4955NT
8S	Ø5.9	2.0		Hex	AOAZ5925T
8M		3.5			AOAZ5935T
8L		5.0			AOAZ5955T
8S		2.0		Non-Hex	AOAZ5925NT
8M		3.5			AOAZ5935NT
8L		5.0			AOAZ5955NT
9S	Ø6.9	2.0		Hex	AOAZ6925T
9M		3.5			AOAZ6935T
9L		5.0			AOAZ6955T
9S		2.0		Non-Hex	AOAZ6925NT
9M		3.5			AOAZ6935NT
9L		5.0			AOAZ6955NT
10S	Ø7.9	2.0		Hex	AOAZ7925T
10M		3.5			AOAZ7935T
10L		5.0			AOAZ7955T
10S		2.0		Non-Hex	AOAZ7925NT
10M		3.5			AOAZ7935NT
10L		5.0			AOAZ7955NT

Milling Abutment

- AnyRidge: Multi Post Screw(AANMSF/ AANMST) are included.
- AnyOne : Abutment Screw(AOAS0H20) is included
- Recommend torque : 35Ncm



AnyRidge Internal

Mark	Profile Diameter	Cuff Height(mm)	Post Height(mm)	Type	Ref.C
6S	Ø4.4	2.0	8.0	Hex	ARAM4428L
6M		3.5			ARAM4438L
6L		5.0			ARAM4458L
6S		2.0		Non-Hex	ARAM4428NL
6M		3.5			ARAM4438NL
6L		5.0			ARAM4458NL
7S	Ø4.9	2.0		Hex	ARAM4928L
7M		3.5			ARAM4938L
7L		5.0			ARAM4958L
7S		2.0		Non-Hex	ARAM4928NL
7M		3.5			ARAM4938NL
7L		5.0			ARAM4958NL
8S	Ø5.9	2.0		Hex	ARAM5928L
8M		3.5			ARAM5938L
8L		5.0			ARAM5958L
8S		2.0		Non-Hex	ARAM5928NL
8M		3.5			ARAM5938NL
8L		5.0			ARAM5958NL
9S	Ø6.9	2.0		Hex	ARAM6928L
9M		3.5			ARAM6938L
9L		5.0			ARAM6958L
9S		2.0		Non-Hex	ARAM6928NL
9M		3.5			ARAM6938NL
9L		5.0			ARAM6958NL
10S	Ø7.9	2.0		Hex	ARAM7928L
10M		3.5			ARAM7938L
10L		5.0			ARAM7958L
10S		2.0		Non-Hex	ARAM7928NL
10M		3.5			ARAM7938NL
10L		5.0			ARAM7958NL

AnyOne Internal

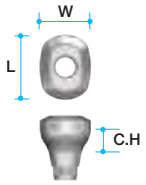
Mark	Profile Diameter	Cuff Height(mm)	Post Height(mm)	Type	Ref.C
6S	Ø4.4	2.0	8.0	Hex	AOAM4428T
6M		3.5			AOAM4438T
6L		5.0			AOAM4458T
6S		2.0		Non-Hex	AOAM4428NT
6M		3.5			AOAM4438NT
6L		5.0			AOAM4458NT
7S	Ø4.9	2.0		Hex	AOAM4928T
7M		3.5			AOAM4938T
7L		5.0			AOAM4958T
7S		2.0		Non-Hex	AOAM4928NT
7M		3.5			AOAM4938NT
7L		5.0			AOAM4958NT
8S	Ø5.9	2.0		Hex	AOAM5928T
8M		3.5			AOAM5938T
8L		5.0			AOAM5958T
8S		2.0		Non-Hex	AOAM5928NT
8M		3.5			AOAM5938NT
8L		5.0			AOAM5958NT
9S	Ø6.9	2.0		Hex	AOAM6928T
9M		3.5			AOAM6938T
9L		5.0			AOAM6958T
9S		2.0		Non-Hex	AOAM6928NT
9M		3.5			AOAM6938NT
9L		5.0			AOAM6958NT
10S	Ø7.9	2.0		Hex	AOAM7928T
10M		3.5			AOAM7938T
10L		5.0			AOAM7958T
10S		2.0		Non-Hex	AOAM7928NT
10M		3.5			AOAM7938NT
10L		5.0			AOAM7958NT

II. Meg-Align Abutment line-up

2. Single Type

Abutment Options (Continued)

Healing Abutment



- These options are able to make esthetic restorations.
- It is divided into Abutments for incisor and canine, premolar, molar sites depending on the diameter.
- 2piece type.
- AnyRidge: Multi Post Screw(AANMSF) is included.
- AnyOne : Abutment Screw(PAOAS2009) is included.
- Recommend torque : 5 - 8Ncm(by hand)

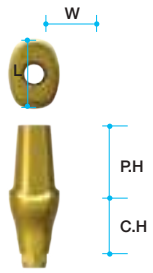
AnyRidge Internal

Mark	Diameter W	Diameter L	Cuff Height(mm)	Type	Ref.C
6S	Ø3.4	Ø4.4	2.0	Hex	PARH1R3420T
6M			3.5		PARH1R3435T
6L			5.0		PARH1R3450T
6S			2.0	Non-Hex	PARH1R3420NT
6M			3.5		PARH1R3435NT
6L			5.0		PARH1R3450NT
6S	Ø4.4	Ø4.5	2.0	Hex	PARH1R4420T
6M			3.5		PARH1R4435T
6L			5.0		PARH1R4450T
6S			2.0	Non-Hex	PARH1R4420NT
6M			3.5		PARH1R4435NT
6L			5.0		PARH1R4450NT
7S	Ø4.9	Ø5.0	2.0	Hex	PARH2R5520T
7M			3.5		PARH2R5535T
7L			5.0		PARH2R5550T
7S			2.0	Non-Hex	PARH2R5520NT
7M			3.5		PARH2R5535NT
7L			5.0		PARH2R5550NT
8S		Ø5.9	2.0	Hex	PARH3R5620T
8M			3.5		PARH3R5635T
8L			5.0		PARH3R5650T
8S			2.0	Non-Hex	PARH3R5620NT
8M			3.5		PARH3R5635NT
8L			5.0		PARH3R5650NT
9S		Ø6.9	2.0	Hex	PARH3R5720T
9M			3.5		PARH3R5735T
9L			5.0		PARH3R5750T
9S			2.0	Non-Hex	PARH3R5720NT
9M			3.5		PARH3R5735NT
9L			5.0		PARH3R5750NT
9S	Ø5.9	Ø6.9	2.0	Hex	PARH3R6720T
9M			3.5		PARH3R6735T
9L			5.0		PARH3R6750T
9S			2.0	Non-Hex	PARH3R6720NT
9M			3.5		PARH3R6735NT
9L			5.0		PARH3R6750NT
10S		Ø7.9	2.0	Hex	PARH4R6820T
10M			3.5		PARH4R6835T
10L			5.0		PARH4R6850T
10S			2.0	Non-Hex	PARH4R6820NT
10M			3.5		PARH4R6835NT
10L			5.0		PARH4R6850NT
10S	Ø6.9	Ø7.9	2.0	Hex	PARH4R7820T
10M			3.5		PARH4R7835T
10L			5.0		PARH4R7850T
10S			2.0	Non-Hex	PARH4R7820NT
10M			3.5		PARH4R7835NT
10L			5.0		PARH4R7850NT

AnyOne Internal

Mark	Diameter W	Diameter L	Cuff Height(mm)	Type	Ref.C
6S	Ø4.4	Ø3.4	2.0	Hex	PAOH1R3420T
6M			3.5		PAOH1R3435T
6L			5.0		PAOH1R3450T
6S			2.0	Non-Hex	PAOH1R3420NT
6M			3.5		PAOH1R3435NT
6L			5.0		PAOH1R3450NT
6S	Ø4.5	Ø4.4	2.0	Hex	PAOH1R4420T
6M			3.5		PAOH1R4435T
6L			5.0		PAOH1R4450T
6S			2.0	Non-Hex	PAOH1R4420NT
6M			3.5		PAOH1R4435NT
6L			5.0		PAOH1R4450NT
7S	Ø4.9	Ø5.0	2.0	Hex	PAOH2R5520T
7M			3.5		PAOH2R5535T
7L			5.0		PAOH2R5550T
7S			2.0	Non-Hex	PAOH2R5520NT
7M			3.5		PAOH2R5535NT
7L			5.0		PAOH2R5550NT
8S		Ø5.9	2.0	Hex	PAOH3R5620T
8M			3.5		PAOH3R5635T
8L			5.0		PAOH3R5650T
8S			2.0	Non-Hex	PAOH3R5620NT
8M			3.5		PAOH3R5635NT
8L			5.0		PAOH3R5650NT
9S		Ø6.9	2.0	Hex	PAOH3R5720T
9M			3.5		PAOH3R5735T
9L			5.0		PAOH3R5750T
9S			2.0	Non-Hex	PAOH3R5720NT
9M			3.5		PAOH3R5735NT
9L			5.0		PAOH3R5750NT
9S	Ø5.9	Ø6.9	2.0	Hex	PAOH3R6720T
9M			3.5		PAOH3R6735T
9L			5.0		PAOH3R6750T
9S			2.0	Non-Hex	PAOH3R6720NT
9M			3.5		PAOH3R6735NT
9L			5.0		PAOH3R6750NT
10S		Ø7.9	2.0	Hex	PAOH4R6820T
10M			3.5		PAOH4R6835T
10L			5.0		PAOH4R6850T
10S			2.0	Non-Hex	PAOH4R6820NT
10M			3.5		PAOH4R6835NT
10L			5.0		PAOH4R6850NT
10S	Ø6.9	Ø7.9	2.0	Hex	PAOH4R7820T
10M			3.5		PAOH4R7835T
10L			5.0		PAOH4R7850T
10S			2.0	Non-Hex	PAOH4R7820NT
10M			3.5		PAOH4R7835NT
10L			5.0		PAOH4R7850NT

Abutment Options



EZ Post Abutment

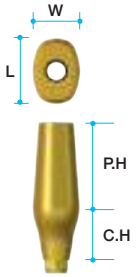
- These options are able to make esthetic restorations.
- It is divided into Abutments for incisor and canine, premolar, molar sites depending on the diameter.
- AnyRidge : Multi Post Screws(AANMSF/ AANMST) are included.
- AnyOne : Abutment Screw(PAOAS2009) is included.
- Recommend torque : 35Ncm

AnyRidge Internal

Mark	Diameter W	Diameter L	Cuff Height(mm)	Post Height(mm)	Type	Ref.C
6S	Ø4.4	Ø3.4	2.0	7.0	Hex	PARP1R3427L
6M			3.5			PARP1R3437L
6L			5.0			PARP1R3457L
6S			2.0		Non-Hex	PARP1R3427NL
6M			3.5			PARP1R3437NL
6L			5.0			PARP1R3457NL
6S		Ø4.4	2.0		Hex	PARP1R4427L
6M			3.5			PARP1R4437L
6L			5.0			PARP1R4457L
6S			2.0		Non-Hex	PARP1R4427NL
6M			3.5			PARP1R4437NL
6L			5.0			PARP1R4457NL
7S	Ø4.9	Ø4.9	2.0		Hex	PARP2R5527L
7M			3.5			PARP2R5537L
7L			5.0			PARP2R5557L
7S			2.0		Non-Hex	PARP2R5527NL
7M			3.5			PARP2R5537NL
7L			5.0			PARP2R5557NL
8S	Ø5.9		2.0		Hex	PARP3R5627L
8M			3.5			PARP3R5637L
8L			5.0			PARP3R5657L
8S			2.0		Non-Hex	PARP3R5627NL
8M			3.5			PARP3R5637NL
8L			5.0			PARP3R5657NL
9S	Ø6.9	Ø4.9	2.0		Hex	PARP3R5727L
9M			3.5			PARP3R5737L
9L			5.0			PARP3R5757L
9S			2.0		Non-Hex	PARP3R57207L
9M			3.5			PARP3R57357L
9L			5.0			PARP3R57507L
9S		Ø5.9	2.0		Hex	PARP3R6727L
9M			3.5			PARP3R6737L
9L			5.0			PARP3R6757L
9S			2.0		Non-Hex	PARP3R6727NL
9M			3.5			PARP3R6737NL
9L			5.0			PARP3R6757NL
10S	Ø7.9	Ø5.9	2.0		HEX	PARP4R6827L
10M			3.5			PARP4R6837L
10L			5.0			PARP4R6857L
10S			2.0		Non-HEX	PARP4R68207L
10M			3.5			PARP4R68357L
10L			5.0			PARP4R68507L
10S		Ø6.9	2.0		Hex	PARP4R7827L
10M			3.5			PARP4R7837L
10L			5.0			PARP4R7857L
10S			2.0		Non-Hex	PARP4R7827NL
10M			3.5			PARP4R7837NL
10L			5.0			PARP4R7857NL

AnyOne Internal

Mark	Diameter W	Diameter L	Cuff Height(mm)	Post Height(mm)	Type	Ref.C
6S	Ø4.4	Ø3.4	2.0	7.0	Hex	PAOP1R3427T
6M			3.5			PAOP1R3437T
6L			5.0			PAOP1R3457T
6S			2.0		Non-Hex	PAOP1R3427NT
6M			3.5			PAOP1R3437NT
6L			5.0			PAOP1R3457NT
6S		Ø4.4	2.0		Hex	PAOP1R4427T
6M			3.5			PAOP1R4437T
6L			5.0			PAOP1R4457T
6S			2.0		Non-Hex	PAOP1R4427NT
6M			3.5			PAOP1R4437NT
6L			5.0			PAOP1R4457NT
7S	Ø4.9	Ø4.9	2.0		Hex	PAOP2R5527T
7M			3.5			PAOP2R5537T
7L			5.0			PAOP2R5557T
7S			2.0		Non-HEX	PAOP2R5527NT
7M			3.5			PAOP2R5537NT
7L			5.0			PAOP2R5557NT
8S	Ø5.9		2.0		Hex	PAOP3R5627T
8M			3.5			PAOP3R5637T
8L			5.0			PAOP3R5657T
8S			2.0		Non-Hex	PAOP3R5627NT
8M			3.5			PAOP3R5637NT
8L			5.0			PAOP3R5657NT
9S	Ø6.9	Ø4.9	2.0		Hex	PAOP3R5727T
9M			3.5			PAOP3R5737T
9L			5.0			PAOP3R5757T
9S			2.0		Non-Hex	PAOP3R5727NT
9M			3.5			PAOP3R5737NT
9L			5.0			PAOP3R5757NT
9S		Ø5.9	2.0		Hex	PAOP3R6727T
9M			3.5			PAOP3R6737T
9L			5.0			PAOP3R6757T
9S			2.0		Non-Hex	PAOP3R6727NT
9M			3.5			PAOP3R6737NT
9L			5.0			PAOP3R6757NT
10S	Ø7.9	Ø5.9	2.0		Hex	PAOP4R6827T
10M			3.5			PAOP4R6837T
10L			5.0			PAOP4R6857T
10S			2.0		Non-Hex	PAOP4R6827NT
10M			3.5			PAOP4R6837NT
10L			5.0			PAOP4R6857NT
10S		Ø6.9	2.0		Hex	PAOP4R7827T
10M			3.5			PAOP4R7837T
10L			5.0			PAOP4R7857T
10S			2.0		Non-Hex	PAOP4R7827NT
10M			3.5			PAOP4R7837NT
10L			5.0			PAOP4R7857NT



Milling Abutment

- These options are able to make esthetic restorations.
- It is divided into Abutments for incisor and canine, premolar, molar sites depending on the diameter.
- AnyRidge : Multi Post Screws(AANMSF/ AANMST) are included.
- AnyOne : Abutment Screw(PAOAS2009) is included.
- Recommend torque : 35Ncm

AnyRidge Internal

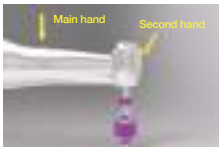
Mark	Diameter W	Diameter L	Cuff Height(mm)	Post Height(mm)	Type	Ref.C
6S	Ø4.4	Ø3.4	2.0	9.0	Hex	PARM1R3429L
6M			3.5			PARM1R3439L
6L			5.0			PARM1R3459L
6S			2.0		Non-Hex	PARM1R3429NL
6M			3.5			PARM1R3439NL
6L			5.0			PARM1R3459NL
6S		Ø4.4	2.0		Hex	PARM1R4429L
6M			3.5			PARM1R4439L
6L			5.0			PARM1R4459L
6S			2.0		Non-Hex	PARM1R4429NL
6M			3.5			PARM1R4439NL
6L			5.0			PARM1R4459NL
7S	Ø4.9	Ø4.9	2.0		Hex	PARM2R5529L
7M			3.5			PARM2R5539L
7L			5.0			PARM2R5559L
7S			2.0		Non-Hex	PARM2R5529NL
7M			3.5			PARM2R5539NL
7L			5.0			PARM2R5559NL
8S	Ø5.9		2.0		Hex	PARM3R5629L
8M			3.5			PARM3R5639L
8L			5.0			PARM3R5659L
8S			2.0		Non-Hex	PARM3R5629NL
8M			3.5			PARM3R5639NL
8L			5.0			PARM3R5659NL
9S	Ø6.9	Ø4.9	2.0		Hex	PARM3R5729L
9M			3.5			PARM3R5739L
9L			5.0			PARM3R5759L
9S			2.0		Non-Hex	PARM3R5729NL
9M			3.5			PARM3R5739NL
9L			5.0			PARM3R5759NL
9S		Ø5.9	2.0		Hex	PARM3R6729L
9M			3.5			PARM3R6739L
9L			5.0			PARM3R6759L
9S			2.0		Non-Hex	PARM3R6729NL
9M			3.5			PARM3R6739NL
9L			5.0			PARM3R6759NL
10S	Ø7.9	Ø5.9	2.0		HEX	PARM4R6829L
10M			3.5			PARM4R6839L
10L			5.0			PARM4R6859L
10S			2.0		Non-Hex	PARM4R6829NL
10M			3.5			PARM4R6839NL
10L			5.0			PARM4R6859NL
10S		Ø6.9	2.0		HEX	PARM4R7829L
10M			3.5			PARM4R7839L
10L			5.0			PARM4R7859L
10S			2.0		Non-Hex	PARM4R7829NL
10M			3.5			PARM4R7839NL
10L			5.0			PARM4R7859NL

AnyOne Internal

Mark	Diameter W	Diameter L	Cuff Height(mm)	Post Height(mm)	Type	Ref.C
6S	Ø4.4	Ø3.4	2.0	9.0	Hex	PAOM1R3429T
6M			3.5			PAOM1R3439T
6L			5.0			PAOM1R3459T
6S			2.0		Non-Hex	PAOM1R3429NT
6M			3.5			PAOM1R3439NT
6L			5.0			PAOM1R3459NT
6S		Ø4.4	2.0		Hex	PAOM1R4429T
6M			3.5			PAOM1R4439T
6L			5.0			PAOM1R4459T
6S			2.0		Non-Hex	PAOM1R4429NT
6M			3.5			PAOM1R4439NT
6L			5.0			PAOM1R4459NT
7S	Ø4.9	Ø4.9	2.0		Hex	PAOM2R5529T
7M			3.5			PAOM2R5539T
7L			5.0			PAOM2R5559T
7S			2.0		Non-Hex	PAOM2R5529NT
7M			3.5			PAOM2R5539NT
7L			5.0			PAOM2R5559NT
8S	Ø5.9		2.0		Hex	PAOM3R5629T
8M			3.5			PAOM3R5639T
8L			5.0			PAOM3R5659T
8S			2.0		Non-Hex	PAOM3R5629NT
8M			3.5			PAOM3R5639NT
8L			5.0			PAOM3R5659NT
9S	Ø6.9	Ø4.9	2.0		Hex	PAOM3R5729T
9M			3.5			PAOM3R5739T
9L			5.0			PAOM3R5759T
9S			2.0		Non-Hex	PAOM3R5729NT
9M			3.5			PAOM3R5739NT
9L			5.0			PAOM3R5759NT
9S		Ø5.9	2.0		Hex	PAOM3R6729T
9M			3.5			PAOM3R6739T
9L			5.0			PAOM3R6759T
9S			2.0		Non-Hex	PAOM3R6729NT
9M			3.5			PAOM3R6739NT
9L			5.0			PAOM3R6759NT
10S	Ø7.9	Ø5.9	2.0		Hex	PAOM4R6829T
10M			3.5			PAOM4R6839T
10L			5.0			PAOM4R6859T
10S			2.0		Non-Hex	PAOM4R6829NT
10M			3.5			PAOM4R6839NT
10L			5.0			PAOM4R6859NT
10S		Ø6.9	2.0		Hex	PAOM4R7829T
10M			3.5			PAOM4R7839T
10L			5.0			PAOM4R7859T
10S			2.0		Non-Hex	PAOM4R7829NT
10M			3.5			PAOM4R7839NT
10L			5.0			PAOM4R7859NT

▸▸ How to use

1 . BonePen

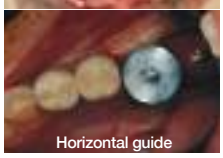


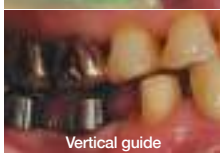
Gear rate
20:1 / 300~1,500RPM / 44-55N.cm
(Use Implant Engine)

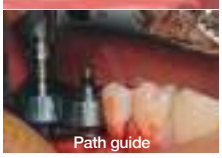
Bone Collection
(300RPM / No irrigation)

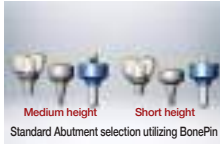
Use suitable BonePen diameter -Drill tip must reach the alveolar bone.
Check the position of the alveolar bone to be cut. Adhere product's cuff side to tooth side and use it while the saline is running.
In order to avoid the BonePen spinning beyond the cutting point, use handpiece with both hands.

2 . BonePin









Standard Abutment selection utilizing BonePin

Select a BonePin that has same numbering as BonePen used.
Insert the bottom of the product as deep as possible into the insertion hole that you have made previously.
If the bone insertion is completed, visibly assess the gap between product's external diameter and adjacent tooth, also cutting height of the alveolar bone and occlusal surfaces during occlusion.

3 . GBR Pen

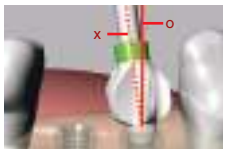
Decortification

Collected bone inside the cup
(8th drilling)

Bone graft

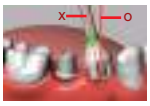
Suture

4 . BoneShaper



Select a BoneShaper that has same numbering as BonePin used.
Place BoneShaper onto the center of the fixture, and begin countersinking by pushing it downward.

5 . GingivalShaper



Select a GingivalShaper that is suitable for a diameter of the Abutment used.
Place GingivalShaper onto Abutment Shoulder, and use a begin countersinking using a hand-piece for 3~5 seconds.

Meg-Align Clinical Case

Clinical Case

- Courtesy of Dr. Jun Ho Lee

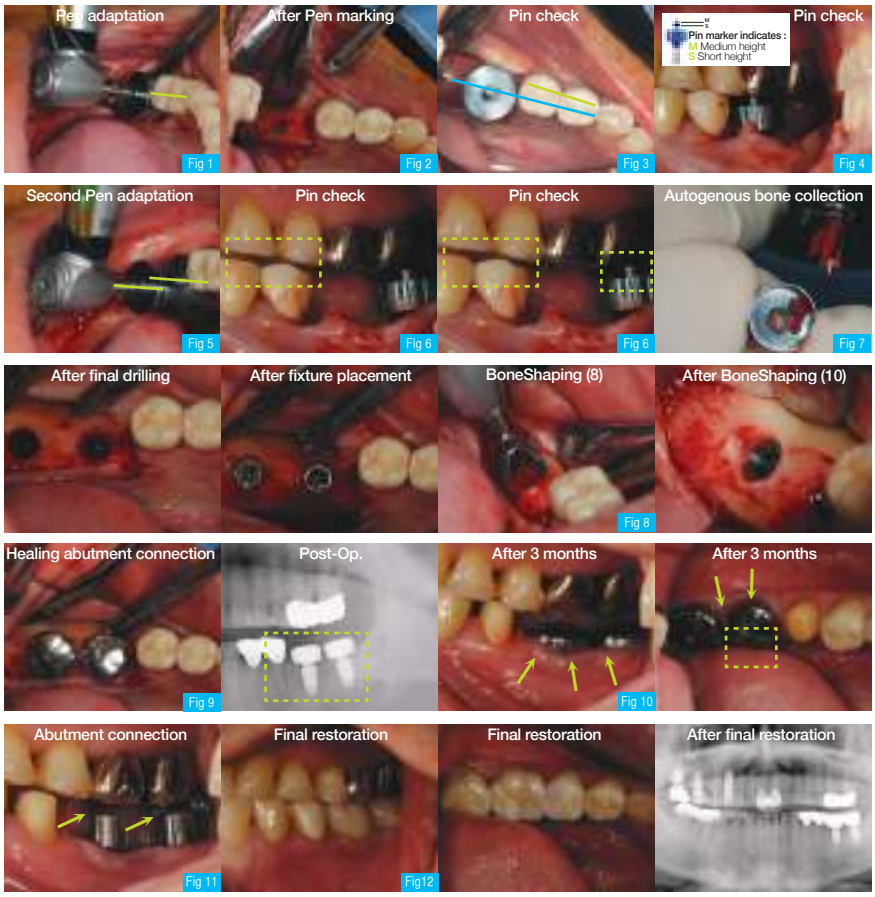


Fig 1. Mid-position bucco-lingually:
1. (Prosthetic) Imaginary adjacent line (green line)
2. (Bony) Mid-position of alveolar bone Compromise between 1 and 2.

Fig 2. D2.8mm + H8.0mm hole

Fig 3. This case, I chooce bony-mid-position rather than prosthetic mid-position.

Fig 5. Approach the Pen to the first Pin. Be careful with drill path. (green line)

Fig 6. Pin marker indicates buccal cross-bite.
To ease cross-bite, I choose to lean the path lingually slightly, while keeping emerging prosition the same.
Vertical height check.
Anterior open-bite(about 1.5mm) shows us insufficient prosthetic clearance. To use short height, we should place fixture 1.5mm deeper than crestal level.

Fig 7. (D2.8mm X H8.0mm hole) X 2sites.
Collected volume is about 0.1cc.
This case, it's useless

Fig 8. Sequential BoneShaping, starting, with BoneShaper-8 (purple band)

Fig 9. Pen-10, Short height Pin = 10S

Fig 10. Watch buccal attached gingiva.

Fig 11. Direct abutment level impression.
Watch interocclusal clearance.

Fig 12. Zirconia bridge on #36-37.
Zirconia crowns on #34, 35.

Fig 13. Zirconia bridge on #36-37.
Zirconia crowns on #34, 35.