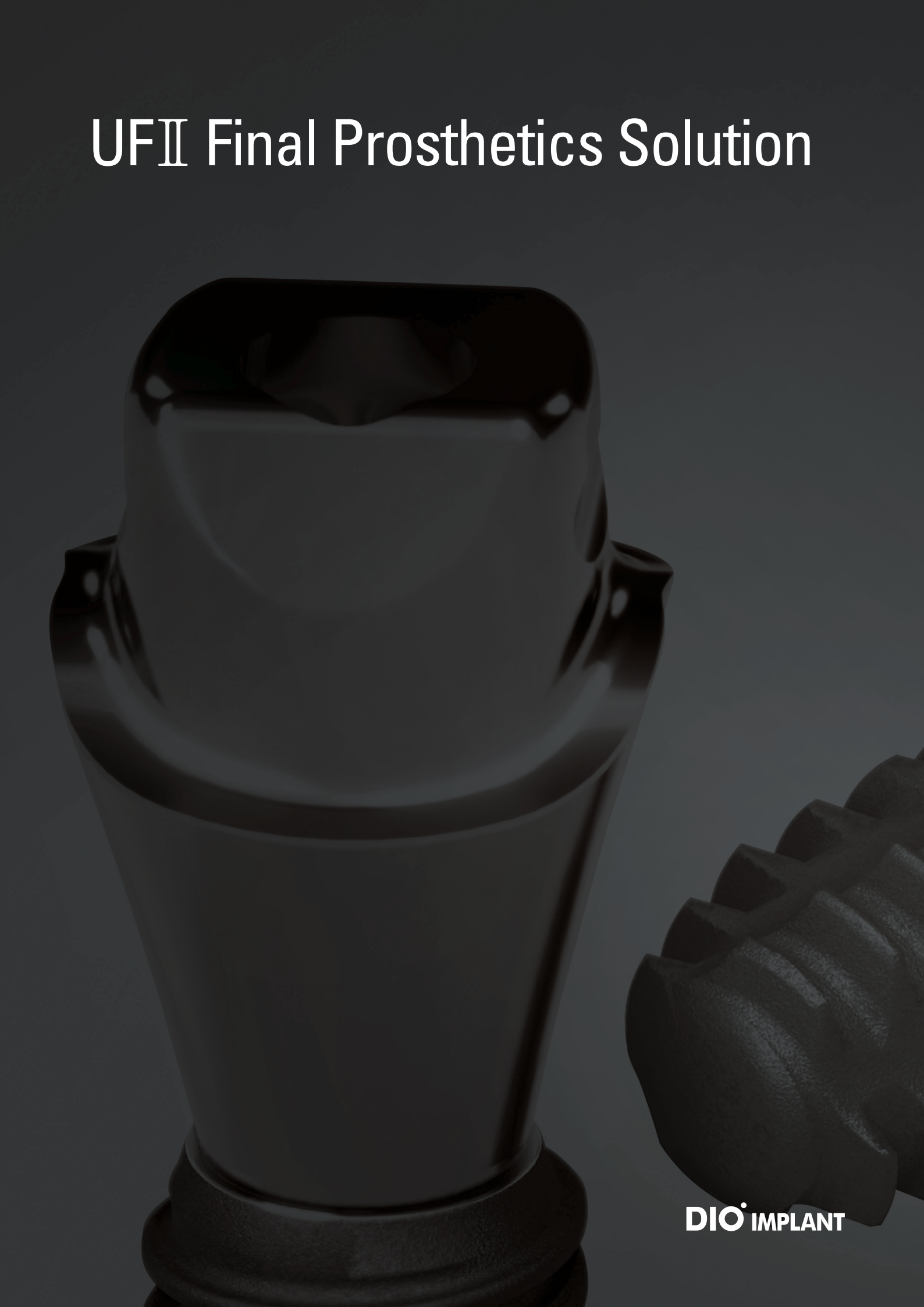
UFⅡ Final Prosthetics Solution



DIO IMPLANT



UFⅡ
FINAL PROSTHETICS
SOLUTION

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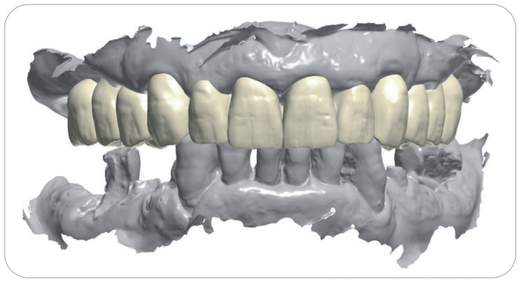
01

Advantage of DIO final prosthetics solution



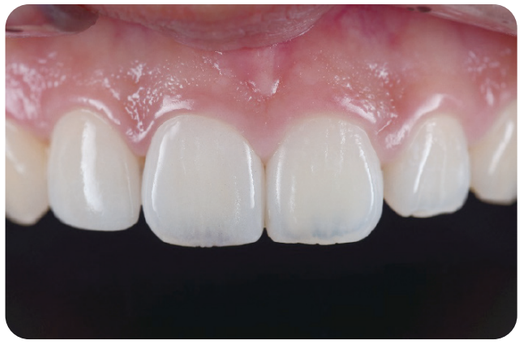
Optimized prosthetics in accurate DIOnavi. diagnostics





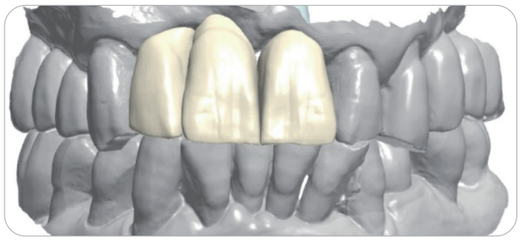
High-end prosthetics made by top technicians

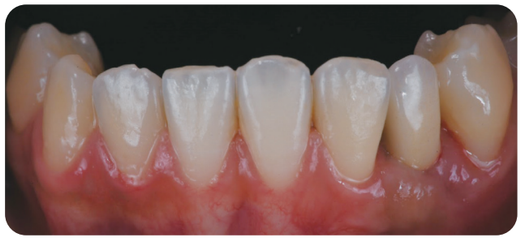




Accurate prosthetics through a full digital workflow









Premium equipments for the production of high-quality prosthetics

Datron

Datron D5 LS



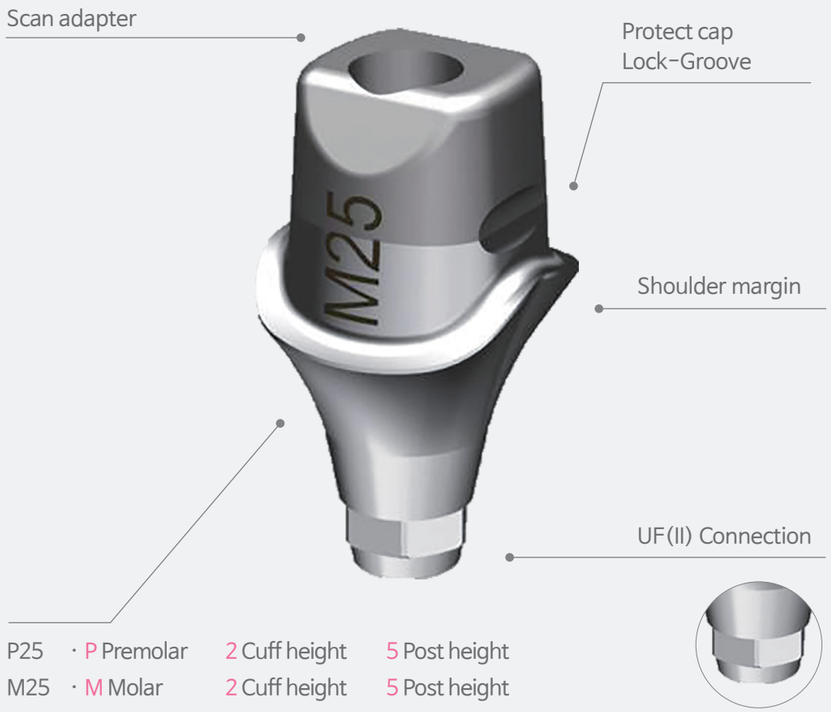
Dekema sintering furnace

AUSTROMAT μSiC



Anatomic abutment

Evolved than a stock abutment, it makes up for the shortcomings of customized abutment and makes anatomic abutment easier.

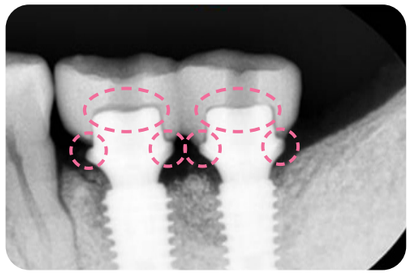


P25 · P Premolar 2 Cuff height 5 Post height
M25 · M Molar 2 Cuff height 5 Post height

NOTE 0.5 unit scale excludes marking phase.
ex) Cuff 2.5=2 / Post 5.5=5

Digital prosthetics process

Anatomic abutment with precise 3D CAD completely transforms the analog prosthetic manufacturing process.



VS



Analog prosthetics procedure

If the abutment margin is subgingival,
it is difficult to obtain accurate impressions,
so making precise prosthetics is difficult.

Digital prosthetics process

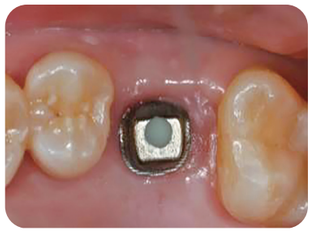
If margins are located subgingivally,
precise prosthetics production is possible
without the use of gingi cord.

From the gum healing stage to prosthetics at once!





» By using anatomic abutment dedicated healing cap, oral scan is easy and simple by inducing healthy gingival.





» The anatomic abutment-only healing cap keeps the margin of the abutment while the gum heals, eliminating the need for a gingi cord.



Final prosthetics

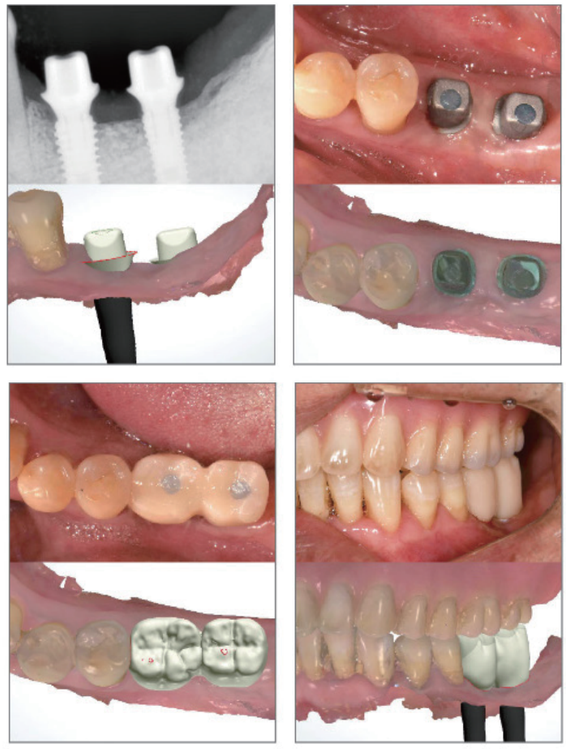
TIP

With one fastening (Tightening) it is possible to have such function as healing abutment, scanbody and final Prosthetics.

In addition, it is economical and save the chair time.

Don't you worry about choosing the abutment!

When using with the DIOnavi. surgical guide, you will be informed of the appropriate anatomic abutment size prior to surgery.



Prosthetics fabrication process using anatomic abutment in DIOnavi. surgery

» When creating a DIOnavi. surgical guide, the patient's gum height can be measured to determine the appropriate anatomic abutment size.

» In case of immediate prosthetics case, surgical guide + Anatomic abutment + Abutment jig can be made before surgery.

» When a new impression is required due to changes in the gums after surgery, the abutment can be easily changed to another size using the anatomic abutment library without the need for the patient to revisit.

Premolar

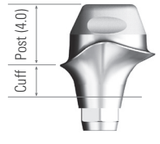
No.	Cuff	Post
1	1.5	4.0
2	2.5	
3	3.5	
4	4.5	
5	1.5	5.5
6	2.5	
7	3.5	
8	4.5	

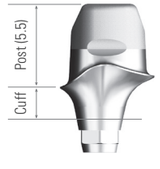


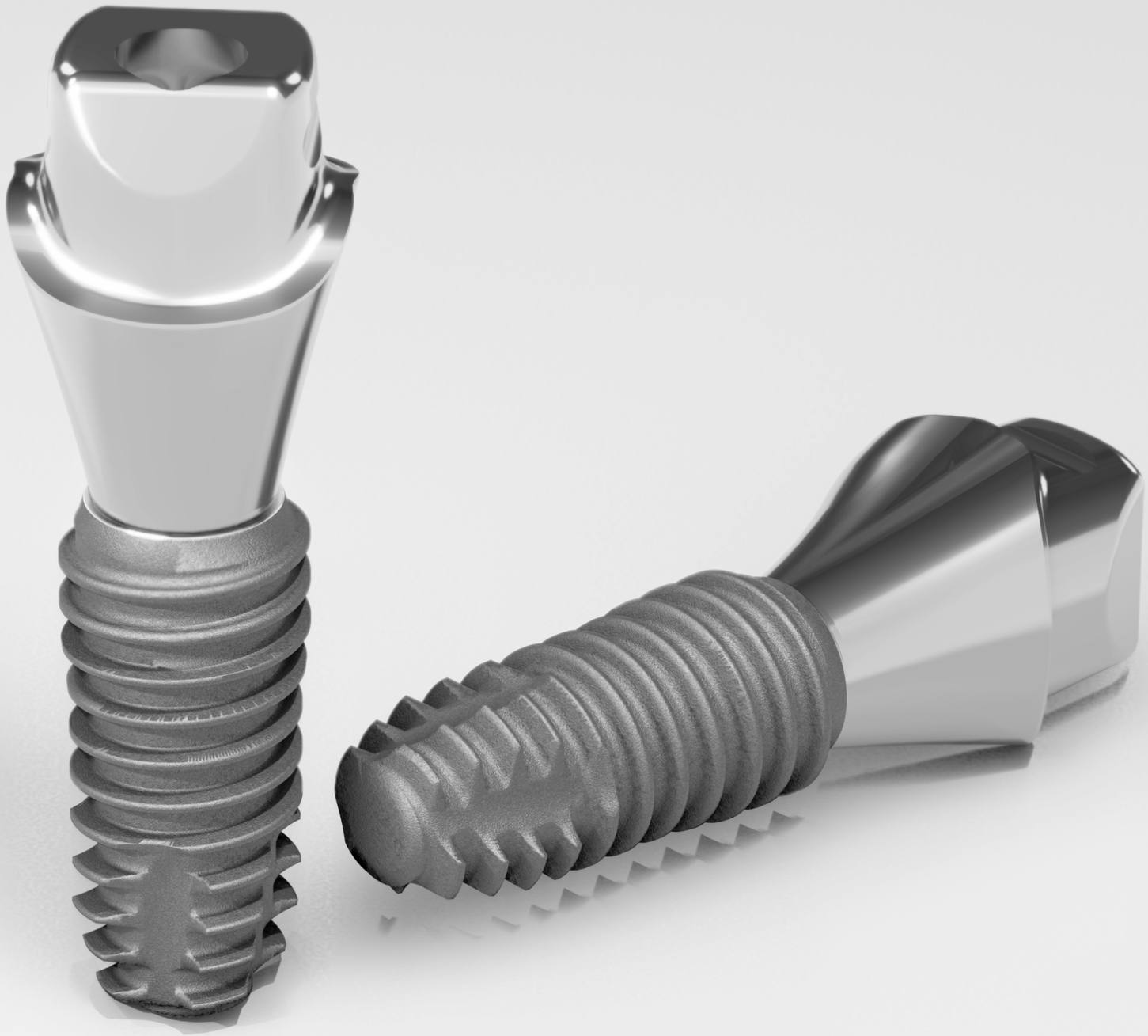


Molar

No.	Cuff	Post
1	1.5	4.0
2	2.5	
3	3.5	
4	4.5	
5	1.5	5.5
6	2.5	
7	3.5	
8	4.5	







WHY?

Anatomic abutment

Avantages of stock abutment

- Prosthetics production period is short.
- Low cost.
- Precise prosthetics is available.

Advantage of customized abutment

- It is advantageous in preventing rotation compared to stock abutment.
- It is made to fit the patient's gum condition.
- Because of the large post area, there is little concern about prosthetics dropout.

Convenience of stock abutment and patient-specific system of customized abutment.

All these advantages in one!
Anatomic abutment

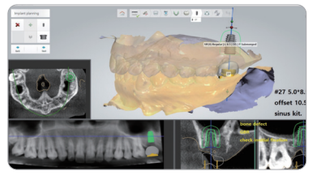
02

Introduction of digitalized prosthetics workflow



Workflow

Anatomic abutment + Modelless full zirconia crown



Planning

DIOnavi. center DIOnavi. guide fabrication after implant planning.



Fixture placement

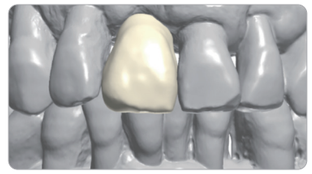
Dental clinic Implant placement according to the DIOnavi. system.



Anatomic abutment setting

Dental clinic Oral scan preparation after setting of anatomic abutment and temporary teeth.

01 → 02 → 03



Prosthetic design

DIOnavi. center Proceed to modelless prosthetic design from acquired oral scan data.



Acquire scanning and other information

Dental clinic After removal of temporary crown, proceed oral scan. Acquire the necessary shade and bite information.

05 ← 04



Prosthetics fabrication and post-processing

DIOnavi. center Completion of designed prosthetics after post processing.

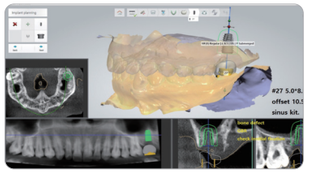


Prosthetics setting

Dental clinic Setting the completed prosthetics in the mouth.

07 → 06

Customized abutment + Modelless full zirconia crown



Planning

DIOnavi. center DIOnavi. guide fabrication after implant planning.

01



Fixture placement

Dental clinic Implant placement according to the DIOnavi. system.

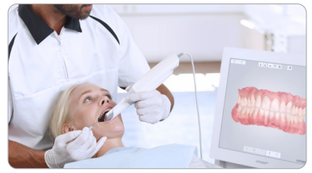
02



H-Scanbody

Dental clinic Fastening the H-Scanbody for healing on the fixture.

03



Obtaining oral scans and other information

Dental clinic To make temporary teeth and CA, need to get oral scan, tooth shade and bites information.

04



Temporary prosthetics design

DIOnavi. center Proceed design of temporary crown and customized abutment.

05





Temporary prosthetics fabrication and post-processing

DIOnavi. center Completion of temporary prosthetics after post processing.

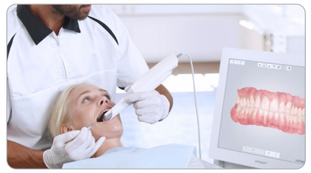
06



Temporary prosthetics setting

Dental clinic Customized abutment and temporary restoration setting in the mouth.

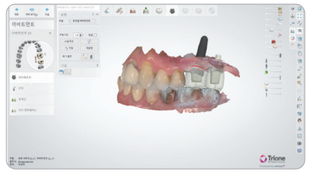
07



Obtaining oral scans and other information

Dental clinic Oral scan, tooth shade and bite information acquisition.

08



Final prosthetics design

DIOnavi. center Final prosthetics design from acquired oral scan data.

09



Prosthetics fabrication and post-processing

DIOnavi. center Completion of designed prosthetics after post processing.

10



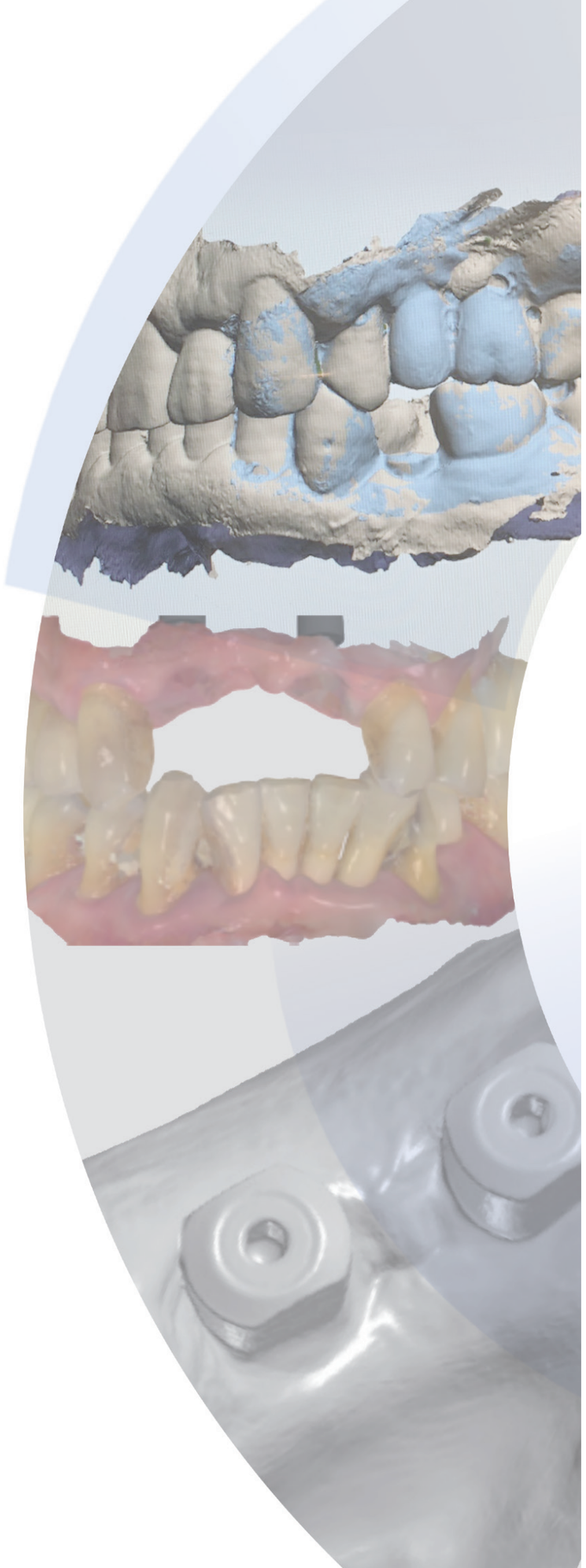
Prosthetics setting

Dental clinic Setting the completed prosthetics in the mouth.

11

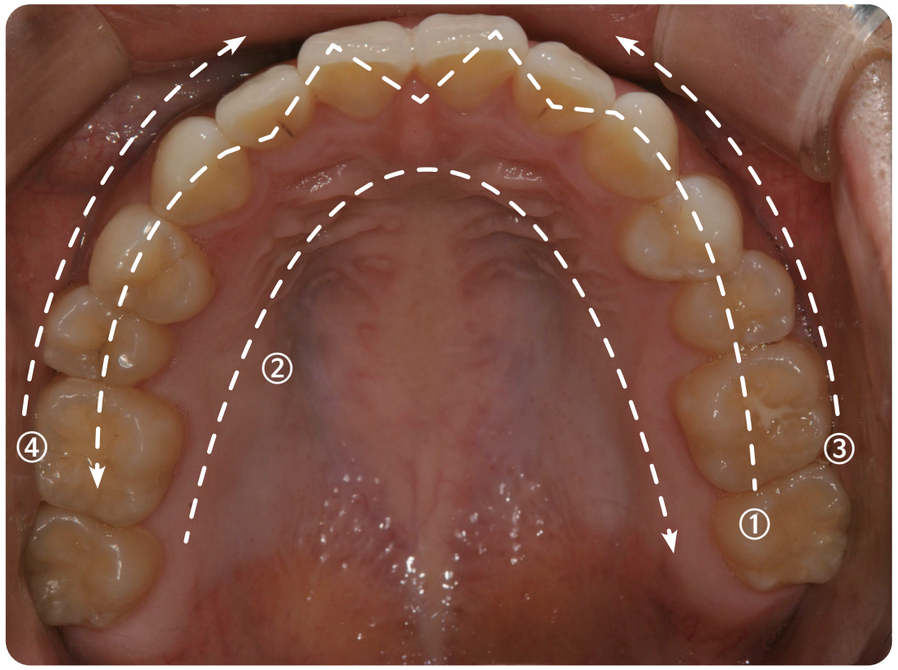
03

Oral scan method for final prosthetics



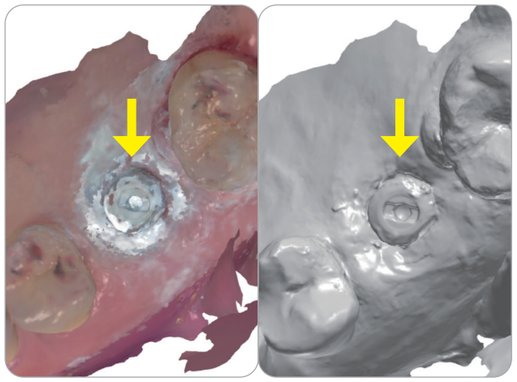
Scan direction

In order to scan without anterior overlapping and distortion, the anterior section scans through labial and palatal.

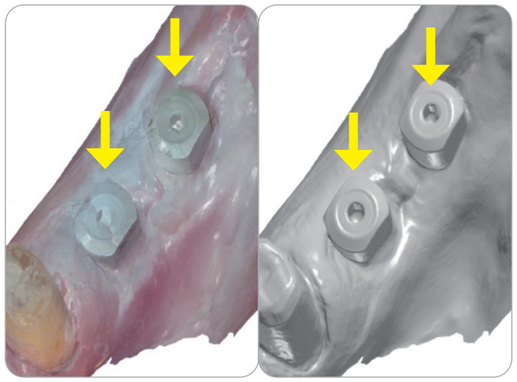


Things to check when scanning the scanbody made of metal and metal restoration

When scanning a scanbody made of metal, check any area is missing due to light reflection on the surface. Be sure to apply mono color to make sure there are no missing scans or any deformations.



When scanbody scan is not fine



When scanbody scan is fine

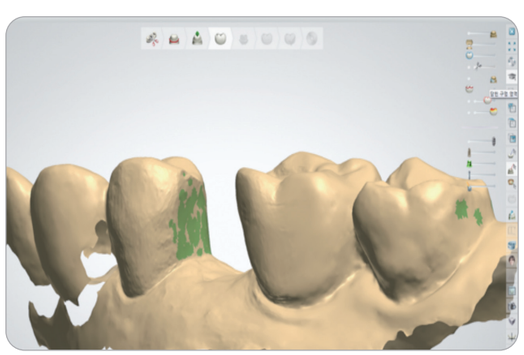
Adjacent and opposite teeth check list

When adjacent teeth or opposite teeth are prosthetics

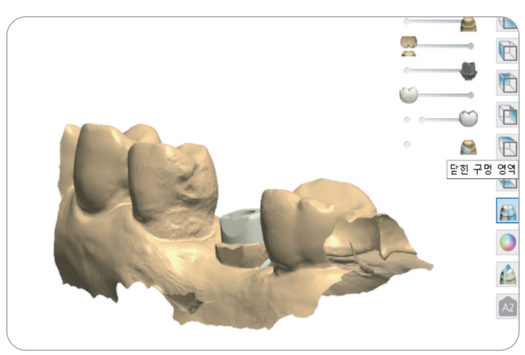
- The light reflection on the surface can make scanning difficult.
- In this case, you can easily scan by using the oral scan spray.

When the scan did not complete properly.

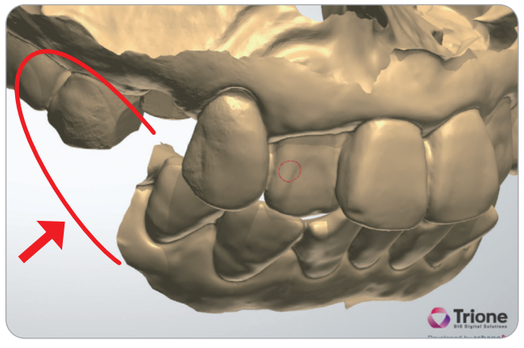
- In the S/W, the "unscan" area is automatically filled so that it is different from the actual oral condition.
- In this case, because of the randomly formed contact surface, even if the contact is designed to match the values in the design, it may not fit within the mouth.



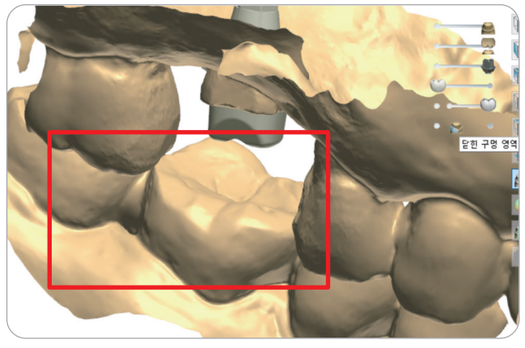
When proximal contact has not been scanned



When proximal contact is well-scanned



When opposite teeth scan is not fine



When opposite teeth scan is fine

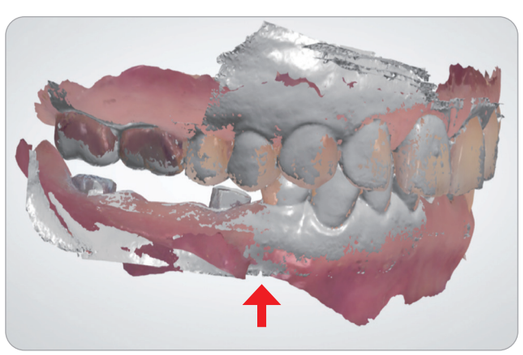
Check list for one-sided and two-sided bite scan

When the bite scan area is sufficient (4-5 teeth are includded)

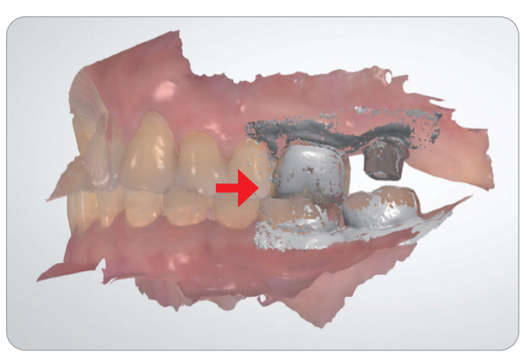
- By realigning the bite, you can obtain a more similar alignment to the patient's oral condition.

If the bite scan area is insufficient

- Even though re-alignment is proceed, bite position can be distorted.



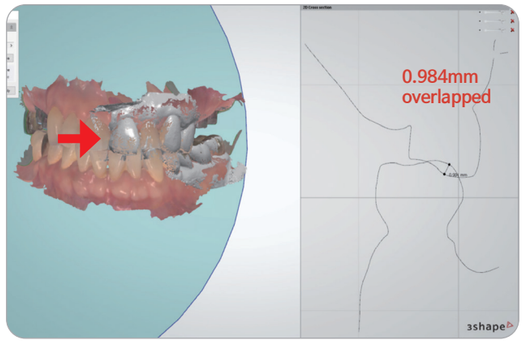
When the bite scan area is sufficient (One side)



When the bite scan area is insufficient (One side)



When the bite scan area is sufficient (Both side)



When the bite scan area is insufficient (Both side)

04

Clinical cases



Anterior

Tooth No.8 monolithic zirconia crown





Tooth No.9 and 24 monolithic zirconia crown





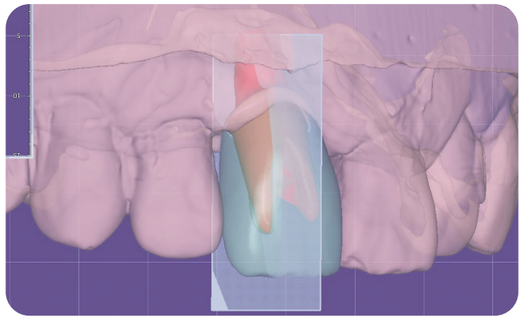
Tooth No.8 monolithic zirconia crown





Anterior

Tooth No.8 monolithic zirconia crown





Tooth No.8, 7, 9 and 10 monolithic zirconia crown





Tooth No.25 monolithic zirconia crown





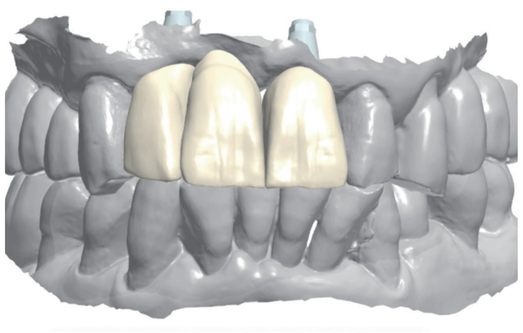
Anterior

Tooth No.8, 7, 6, 9, 10 and 11 monolithic zirconia crown





Tooth No.8, 7 and 9 monolithic zirconia crown





Tooth No.8 monolithic zirconia crown



Tooth No.8 and 9 monolithic zirconia crown



Posterior

Tooth No.31 monolithic zirconia crown



Tooth No.21 and 20 monolithic zirconia crown



Tooth No.12, 13 and 14 monolithic zirconia crown



Tooth No.5, 4 and 3 monolithic zirconia crown



Edentulous

Maxilla edentulous – Monolithic zirconia crown









Edentulous

Maxilla anterior and mandible edentulous – Monolithic zirconia crown









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