CHAMPIONS® (R) EVOLUTION

STEP-BY-STEP USER GUIDE (MINIMALLY INVASIVE PROCEDURE)



Cavity Preparation

Implant Placement

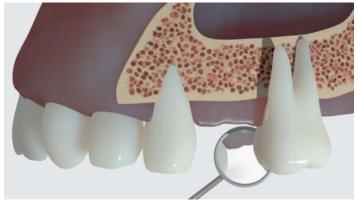
Impression

Restoration in Dental Laboratory

Prosthodontic Restoration



CAVITY PREPARATION



Initial situation



The mucosa thickness is measured with the yellow drill. In this case: 4 mm.



The bone cavity is prepared.



Bone cavity with a depth of 10 mm



Depending on the bone density (D1–D2), the following drills are used: yellow, white, blue, brown.

Please note: primary stability should be achieved exclusively in the D1–D2 bone through the spongy bone!



For placing a ø 3.5 mm implant, the crestal D1-/D2-bone is prepared with a ø 3.25 mm brown drill and a ø 3.7 mm orange drill. Before placing a ø 4.0 mm implant, the bone cavity is crestally widened to ø 4.5 mm.



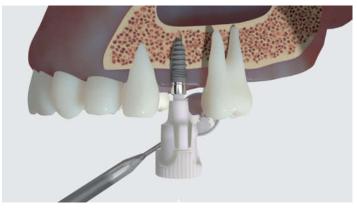
After each first and last drilling respectively, the Bone Cavity is checked by performing the "BCC" (Bone Cavity Check).



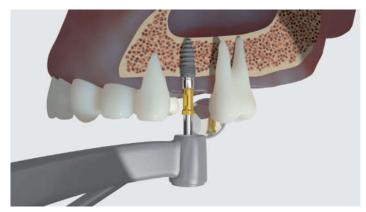
For "soft" bone and/ or thick gingiva > 4 mm, the ø 2.4 mm and ø 3.0 mm Condensers are used to check whether primary stability at a torque of at least 30/40 Ncm by hand-tightening can be achieved.



The Bone Cavity Check ("BCC") must also be performed each time after using the first and last Condensers respectively!



After taking the implant out of the sterile package – without touching the implant with your hands, start inserting the implant with the plastic Insertion Aid until you can't get any further.



There are two ways to implant: you can insert the Champions® implant with a handpiece...



12 ...or with the Torque Wrench (with an Adapter).

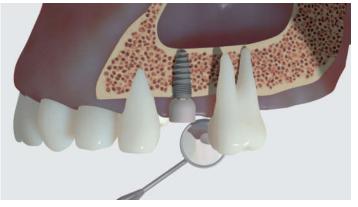
For both insertions methods, a final torque of 40 Ncm in the spongy bone is considered as optimal (see images 5 & 6).



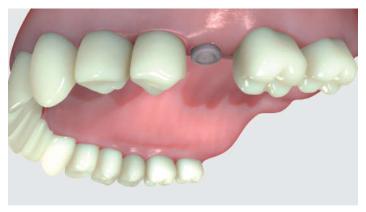
Platform switching: the Champions® implant is inserted equicrestally or 1 mm subcrestally. In order to check the position of the implant, a small X-ray picture is taken!



You can check whether the implant is securely anchored into bone by means of a percussion sound, a periotest, or an Ostell device.



A suitable Gingiva-Clix is chosen and securely fixed on the Shuttle for at least 7 weeks.



The Gingiva-Clix serves as "healing cap" to contour the gingiva around the implant.



After 7 weeks at the earliest, the Gingiva-Clix is...

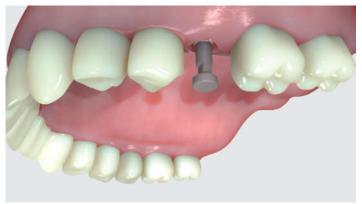


18 ...removed with a tool.





For the impression, there are two possibilities: without removing the small Fixation Screw (Ref. 3085), ...



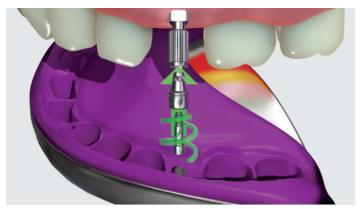
...fix/click the WIN!® PEEK-Impression Post (Ref. 3122) in the Shuttle.



The Impression Post is moulded with an impression compound, e.g. Impregum...

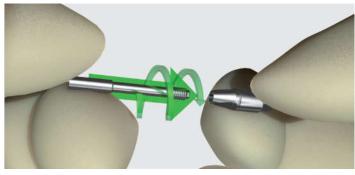


...An impression of the whole jaw is made with a closed impression tray.



The Laboratory Analog is screwed with the Shuttle (Ref. 3100). Then, click both of them in the WIN!® PEEK Impression Post of the impression.





You can make a more precise impression with a screwable metal Impression Post (Ref. 31221).



With the Prosthetic Driver (Ref. 3086 or 30861), ... **25**



...remove the small Fixation Screw (Ref. 3085) from the Shuttle/implant manually. The Shuttle remains in the implant.



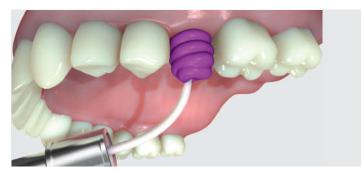
Then, set the metal Impression Post with the long Fixation Screw in the Shuttle. Care is to be taken that the Hexadapter is engaged in the hexagon piece.



Fix the long Fixation Screw (Ref. 30850) manually. 28



Place an Impression Coping (disposable article!) on the metal Impression Post.





Mould the Impression Post and Impression Coping with an impression compound and make an impression with a closed impression tray.

4 RESTORATION IN DENTAL LABORATORY

The dentist will provide you with an impression, including a metal Impression Post (Ref. 31220) and a long Fixation Screw (Ref. 30850).

You also need a Laboratory Analog Set (Ref. 31218), which you can reuse several times.



In the laboratory the Laboratory Analog Set (Laboratory Analog + Gingiva-Shuttle-Ref. 31218) and the metal Impression Post (Ref. 31220) are assembled with the long Fixation Screw (Ref. 30850).



With the long Fixation Screw (Ref. 30850), manually screw the Laboratory Analog + Shuttle + metal Impression Post and...



3...correcty position this assembly in the white Impression Coping in the impression.

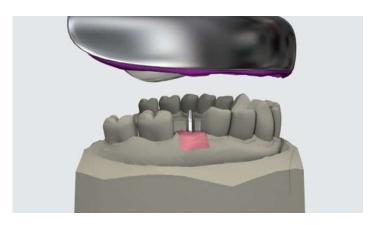


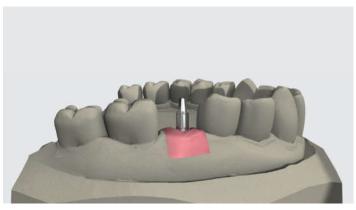
With a gingival mask, mould around the Shuttle and 1 mm from the Laboratory Analog...



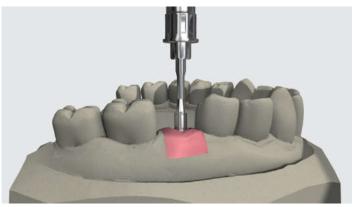
36 + 37

...and make the cast model.

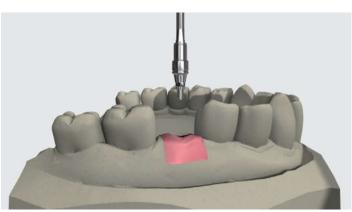




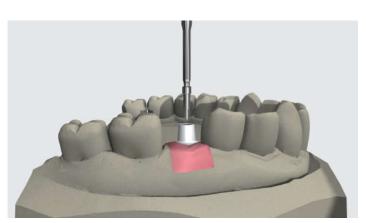
The long Fixation Screw (Ref. 30850)...



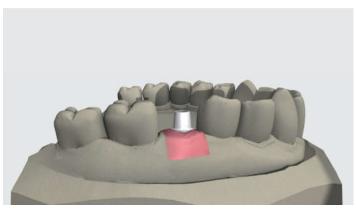
39 ...can be manually removed with the Prosthetic Driver.



The metal Impression Post and the Shuttle can be removed,...

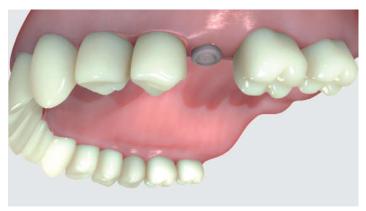


...and an Abutment can be fixed with a small Fixation Screw (Ref. 3085).



The denture can be fitted on the Abutment.

5 PROSTHODONTIC RESTORATION



In order to fit a framework or restoration,...



...the Gingiva-Clix...



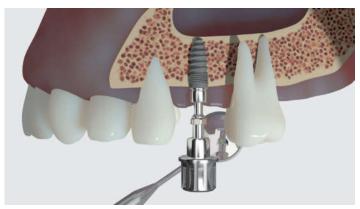
45 ...is removed.



The small Fixation Screw (Ref. 3085) is removed from...



47 ...the Champions® implant with Shuttle.



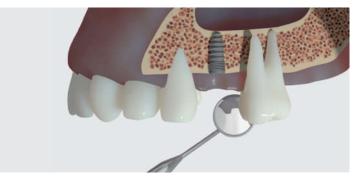
With the Shuttle-Extractor, the Shuttle is manually removed clockwise (rotation on the right).



Use a Torque Wrench only when the Shuttle cannot be removed manually!



50 Implant with Shuttle in cross-section



By screwing the Shuttle-Extractor on the bottom of the implant, the Shuttle can be carefully removed.



With a small Fixation Screw (Ref. 3085), set the Abutment...



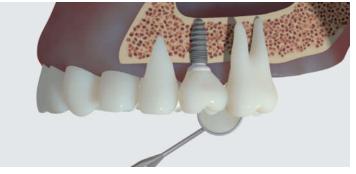
 $\bf 53$...in the "Hexadapter" of the Champions $^{\circ}$ implant.



Screw the fixation screw at 30 Ncm while holding it with the forceps.



Fixed Abutment.



56 Conventionally cemented crown.



More information about our products: www.champions-implants.com

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