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EL - ESTHETIC LINE IMPLANT

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All of the materials produced by C-TECH follow a validated procedure, which includes surface treatment and packing as well, in conformity with European and international directives EN ISO 13485:2003/AC:207 and 93/42/EEC relative to medical devices.



PRECISION DENTAL SOLUTIONS

C-Tech Implant is a dynamic company with aggressive growth, producing components and product lines primarily for dental implantology.

INTERNATIONAL PRESENCE

With production and management based in Italy, C-Tech Implant is active in all major world markets and is distributed in over 20 countries.

SCIENTIFIC RESEARCH, ADVANCED TECHNOLOGY, SIMPLIFICATION

C-Tech Implant differentiates itself with attention to research and the application of high technology to its products, all while maintaining a simplicity of insertion and ease of use.

C-Tech Implant incorporates the latest trends in implantology but provides very practical surgical and prosthetic solutions aimed at offering the practitioner and the patient optimal results.

HIGH QUALITY STANDARDS KEPT WITHIN REACH

C-Tech Implant products are made to the highest standards governing the manufacturing and management of European medical and dental components.

Up to date audits and certification assure that these standards are vigilantly maintained.

TRAINING & ADVICE

Dental professionals are assisted by the rich knowledge and experience of C-Tech Implant personnel and through C-Tech courses and training sessions.

During these courses the professional is able to learn the latest methods of implant placement and reconstruction.

MISSION STATEMENT

The goal of C-Tech Implant is to provide the highest level of quality for technologically advanced products at reasonable prices in order to allow the dental practitioner to find solutions for the broadest range of patients.





BEVELLED SHOULDER

- Facilitates bone growth above the shoulder
- Long term implant stability
- Biological repartition of the forces in cortical bone

MICRO GROOVING

- Softens forces to the cortical bone during insertion
- Cortical bone maintenance

GRIT BLASTED AND ACID ETCHED SURFACE TOPOGRAPHY

- Best surface for osseo integration and bone to implant contact

AGGRESSIVE APICAL DESIGN

- Ideal for immediate implant placement
- Primary stability

ROUNDED APEX

- Protection of the sinus floor, nerve canal and other important anatomical structures during insertion

CONCAVE ESTHETIC CONCEPT

- Non surgical thickening of the peri-implantary tissue
- Facilitation of the papilla reconstruction-technique
- PLATFORM SWITCHING
- Reduces bone loss
- Better representation of the biological width
- Long term esthetic stability
- ONE CONNECTION FOR ALL 3 DIAMETERS
- Simplifies the system
- Reduces inventory
- Ease of use

COLD WELD SEAL

- Hinders bacterial infiltration and consequent bone loss MORSE LOCKING CONICAL CONNECTION
- Elimination of micro-movements
- Elimination of screw loosenings

INDEXING HEX

- Antirotational security

BONE LEVEL IMPLANT SUBCRESTAL SEATING

- Hinders exposure of the implant through bone resorption
- Ideal for the esthetic zone
- Long term esthetic stability

THREE DIFFERENT THREADING PROFILES

- Thread designs adapted to different bone structures that occur along the depth of the implant
- Enhanced surface
- Round but cutting apex design

DOUBLE LEAD THREAD

- Insertion rate of 1,5mm per rotation
- Primary stability
- Increased bone to implant contact
- Faster and even insertion while protecting bone structure

THREAD IN THREAD / GROOVE IN GROOVE

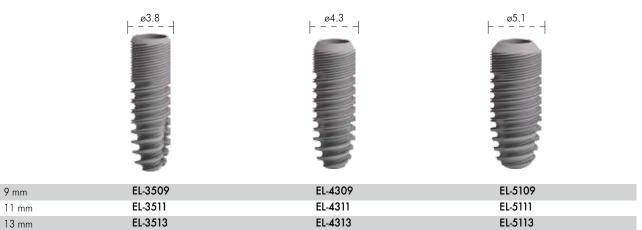
- Increased bone to implant contact

- / (IIII Old IIOI

DENTAL IMPLANT

15 mm

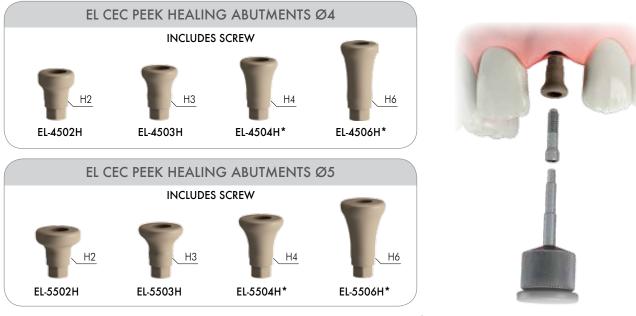
EL-3515



EL-4315

EL-5115





Please Note: the extractor screw (BL-6060 or BL-6061) is required to remove the healing abutment from the implant. *Uses the long screw EL-5052HXL

CLOSED TRAY IMPRESSION TRANSFER



BL-4546 Peek Impression Cap



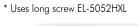
EL-4502P EL-5502P EL-4503P EL-5503P EL-4504P* EL-5504P* EL-4506P* EL-5506P*



EL PEEK abutments together with the snap on BL-4546 cap function as impression transfers

EL-5502F EL-4502F EL-4503F EL-5504F* EL-4504F* EL-5506F* EL-4506F* EL Titanium Abutments

together with the snap on BL-4546 cap function as impression transfers







BL-5052HX

Short Screw

EL-5052HXL

Long Screw

BL-5143

Analog









INTENDED USE

Closed tray impression technique.

CHARACTERISTICS

- Simple;
- Slender emergence profile to accommodate space limitations;
- No additional preparation (i.e. perforation) of tray required;
- High precision impression components give an exact replica of the intraoral situation;
- Clear-cut tactile response from the prosthetic connection verifies proper seating of components.

NOTE

Impression posts ensure optimal fit and precise impression taking for each patient.

STEP 1

Place the impression post accurately into the implant and hand-tighten the guide screw.

STEP 2

Push the impression cap at the top of the impression transfer.

STEP 3

Take the impression using an elastomeric impression material (polyvinyl siloxane or polyether rubber).

STEP 4

Use a standard impression tray.

STEP 5

Mount the impression transfer on the analog using the screw (ref. BL-5052HX -EL-5052HXL).

STEP 6

Reposition the impression transfer in the tray.

Push the impression transfer until you feel the complete engagement firmly seated on the impression cap.

OPEN TRAY IMPRESSION TRANSFER





EL-4544 Open tray Impression post includes the BL-5050L guide screw





BL-5050L Guide screw for open tray impression post



INTENDED USE

Open tray impression technique.

CHARACTERISTICS

- Simple;
- Slender emergence profile accommodates space limitations;
- Guide screw can be tightened either by hand or with the SCS screwdriver;
- High precision impression components give an exact replica of the intraoral situation;
- Clear-cut tactile response from the prosthetic connection verifies proper seating of components.

NOTE

Open tray impression procedure requires a custom-made tray with perforations. Impression posts are intended for single use only to ensure optimal fit and precise impression taking for each patient.

STEP 1

Place the impression post accurately into the implant and hand-tighten the guide screw.

STEP 2

Make perforations in the custom-made impression tray (light cured resin) according to the individual situation so that the positioning screw of the impression post sticks out.

STEP 3

Take the impression using an elastomeric impression material (polyvinyl siloxane or polyether rubber).

STEP 4

Reposition and fix the analog in the impression using the screw.

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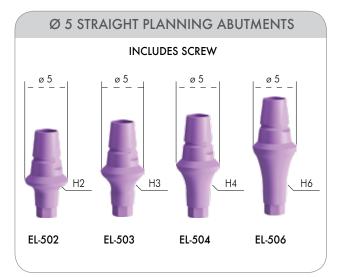


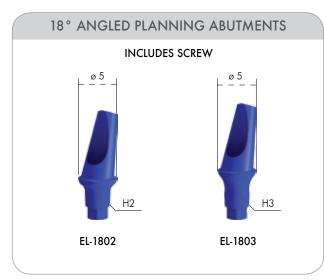




TECHNICAL PLANNING ABUTMENTS







INTENDED USE

Intra & extra-oral planning of prosthetic restoration.

CHARACTERISTICS

- Simple;
- Color-coded PLANNING abutments;
- Comprehensive PLANNING set containing all PLANNING abutments arranged clearly;
- Proper seating of PLANNING abutments verified through the clear-cut response from, the prosthetic connection;
- PLANNING abutments fabricated of sterilizable polymer material.

NOTE

Be sure to clean and sterilize the planning abutments following intra-oral use. Do not sterilize the PLANNING abutment cassette.

STEP 1

Place the PLANNING abutment into the technical lab model situation in order to plan and choose the appropriate titanium abutment in cost effective manner.

STEP 2

Place the titanium abutment and hand-tighten the screw.

STEP 3

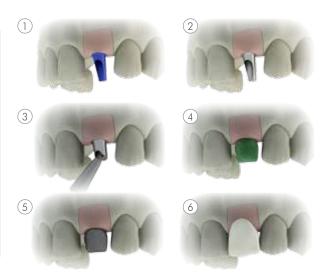
Prepare the titanium abutment, modify as required.

STEP 4

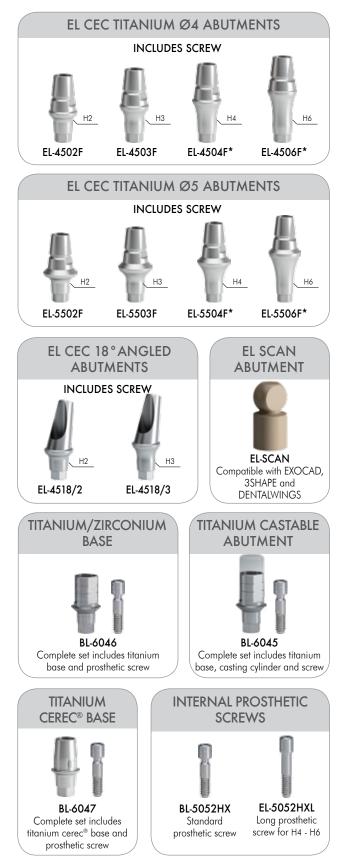
Fabricate the superstructure on the modified abutment using the standard modelling, casting and veneering methods.

STEP 5 - Cast the framework using the standard casting methods.

STEP 6 - Veneer the superstructure.



TITANIUM ABUTMENTS



INTENDED USE

Cement-retained restorations.

with torque ratchet 30 N=Ncm

TIGHTENING:

B. Bullet

- CHARACTERISTICS - Simple;
- Less grinding necessary due to prepared mucosa margins;
- Adaptation to natural soft tissue contour due to prepared mucosa margins in different heights (H2, H3, H4, H6);
- Reliable;
- Tapered connection (pure cone). Abutment and implant are linked so as to form a one-piece unit;
- Extractor system allows easy abutment removal from the implant or the analog.

NOTE

The cement margin must not be more than 2 mm below the mucosa. Use a new basal screw for the final insertion of the abutment.





ABUTMENT EXTRACTOR SCREW

As the ABUTMENT EXTRACTOR SCREW is driven in, it will push the abutment out of the analog or implant.



Finger/Ratchet

adapter for latch

drivers



BL-6060 BL-6061 Prosthetic extractor Latch driver prosthetic extractor

*Uses the long screw EL-5052HXL

TEMPORARY ABUTMENTS



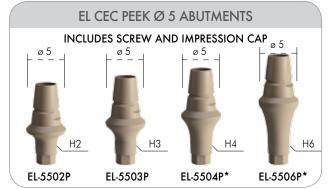
NOTE

Together with the BL-4546 Impression Cap, the EL temporary PEEK abutments can be used as closed tray impression transfers.

BL-4546

Peek Impression Cap





*Uses the long screw EL-5052HXL

NOTE

Together with the EL-4543 Temp-Cap, the EL temporary PEEK abutments can be used to temporarily stabilize a prosthesis.

> **EL-4543** Peek Temp-Cap





ZIRCONIUM ABUTMENTS

All zirconium abutment packagings include screw.



Please Note: prostethic screw for zirconium abutment reference is EL-5052HXL



SCREW-RETAINED RESTORATIONS

BL-7012 Transfer Screw



Screw

BL-7000 Healing Cap



transfer

BL-7011

complete set

includes tran-

sfer + screw



BL-5146 Multi-unit Analog



BL-0600 Straight Multi-unit Driver



BL-4526

Temporary

Titanium

Abutment

bridge screw

include



Castable

Abutment

bridge screw

include



BL-7013 Metal holder

STRAIGHT ABUTMENTS H2 H3 Η1 BL-4750/1 BL-4750/2 BL-4750/3



17° ANGLED ABUTMENTS

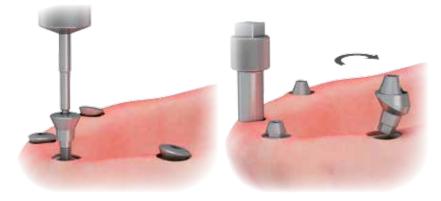
BL-1750/1 Complete set



BL-1750/2 Complete set



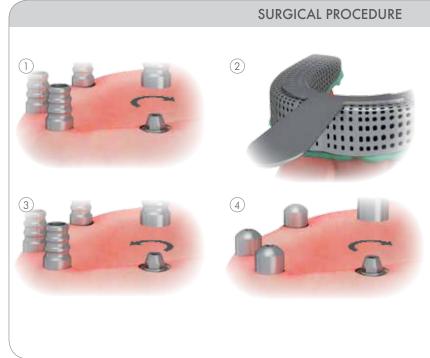
CLOSED TRAY TECHNIQUE



STEP 1 Remove the healing abutments.

STEP 2 Screw the straight abutment into the implant using the torque ratchet (30 Ncm) and the Multiunit Driver.





STEP 1 Screw each closed tray transfer onto the protruding abutments.

STEP 2 Take the impression using an elastomeric impression material (polyvinyl siloxan or polyether rubber).

STEP 3 Remove the closed tray transfer from the abutment.

STEP 4 Screw onto the abutments the healing cap screws so as to keep the soft tissue in place until the final prosthesis is completed.

LABORATORY PROCEDURE



STEP 1 Screw the closed tray transfer onto the analog.

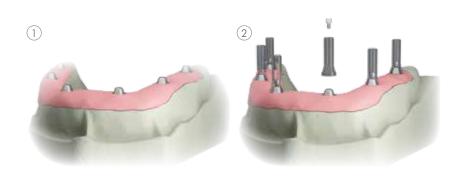
STEP 2 Reposition the transfer into the previously taken impression material being sure that the transfers are properly seated.

STEP 3 Master model.

(1)

3

SCREW RETAINED RESTORATION





STEP 1

Fabricate the stone model including analogs and gingival mask.

STEP 2

Place and screw the castable abutments onto the protruding multiunit analogs.

STEP 3

Shorten the cylinders down to the height of the occlusal plane.

STEP 4

Remove the gingiva modeling material to permit easy access for submucosal contouring and verification of component seating. Wax-up the bridge framework to appropriate dimensions. The layer of wax must have sufficient thickness to avoid the wrong coefficient of thermal expansion and a negative effect on porcelain firing.

STEP 5

Prepare the wax-up for investing and casting procedures.

STEP 6

Attach the resulting framework to the models and create final prosthesis.

STEP 7

Passively fit the resulting prosthesis onto the abutments.

5





BAR





BL-5146 Multi-unit Analog

0220BB OT-Bar (2 pcs.)



027CRR Clip pink: soft (4 pcs.)



027CRG Clip yellow: medium (4 pcs.)



Castable

Abutment

includes screw

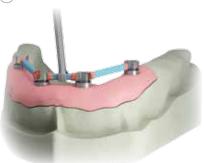


BL-6051 Bridge screw





3





STEP 1 Place the castable Multi-unit abutments on the analogs and tighten the Multi-unit internal screws.

STEP 2 Make height adaptations according to the individual situation.

STEP 3 Use a residue-free burn-out plastic to fix the bar segments to the castable abutments.

STEP 4 The yellow clips (027CRG) are fixed into the prosthesis.

O-BALL ATTACHMENT SYSTEM

O-ball Abutment Driver







BL-0600

BL-5642 Complete set

H2

BL-5643 Complete set

BL-5144

O-Ball Analog



BL-5641

Complete set







Removable dentures retained by implants in the mandible and maxilla.

CHARACTERISTICS

- Simple;
- The clinical process for the ball attachment is quick and easy;
- Functional;
- The O-ring attachment is designed to virtually eliminate wear on the Ball Abutment and minimize the need for maintenance;
- 3 different gingival heights;
- 3 different O-ring resistances offering optimal retention for every individual situation.

RELIABLE

Dual retention for optimal abutmentdenture connection. Excellent long-term performance due to wear resistant components.

STEP 1

Screw the spherical abutment into the implant using the torque ratchet (30 Ncm) and the driver (ref. BL-0600).

STEP 2

Rebase the overdenture according to standard procedure.

STEP 3 Use a laboratory burr to relieve the denture base in the indicated areas.

METAL HOUSING $\overrightarrow{MCH-1}$ $\overrightarrow{MCH-2}$ $\overrightarrow{MCH-3}$ Soft Retention $\overrightarrow{MCH-3}$ Hard Retention $\overrightarrow{MC-3005B}$ $\overrightarrow{MC-3005}$ $\overrightarrow{MC-3005}$ O-ring (5 pieces) $\overrightarrow{O-ring}$ (5 pieces)



ANCHOR ABUTMENT SYSTEM



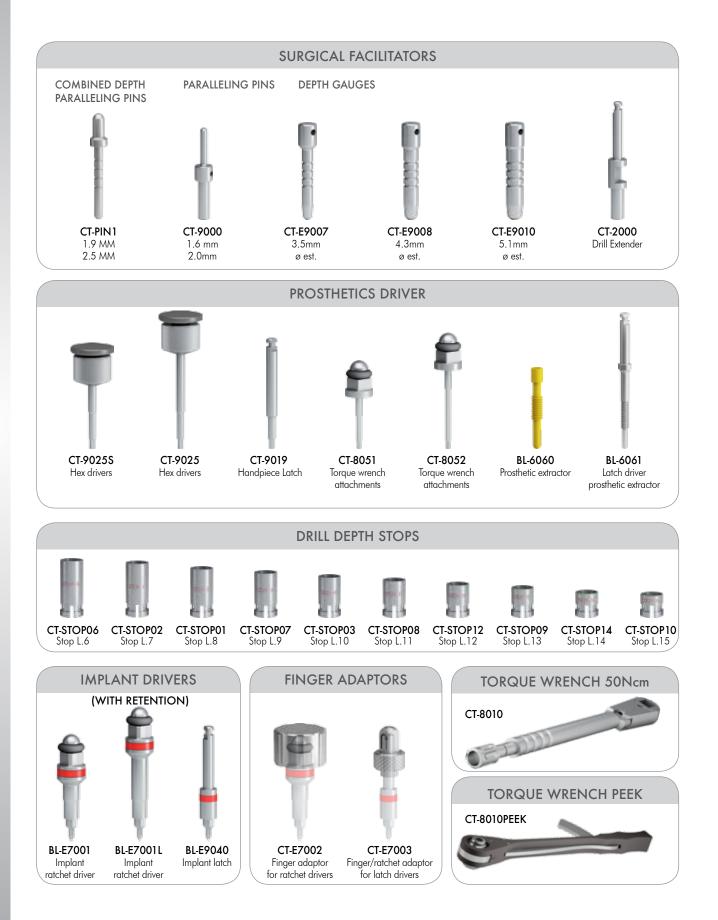
DELUXE SURGICAL KIT

DELUXE SURGICAL KIT INCLUDES:

Locator drill CT-2020 2.0 external irrigation drill (Ø 2.0) CT-1720E 3.5 external irrigation drill (Ø 3.0) CT-1735E 4.3 external irrigation drill (Ø 3.6) CT-1743E 5.1 external irrigation drill (Ø 4.6) CT-1751E Hard Bone Drill 3.5 mm EL-1735N Hard Bone Drill 4.3 mm EL-1743N Hard Bone Drill 5.1 mm EL-1751N Drill Extender CT-2000 Manual Hex Driver Short CT-9025S 1.25mm Hextool Torque Wrench Attachments CT-8051 1.25mm Hextool Torque Wrench Attachments (Long) CT-8052 Torque Wrench (50 Ncm) CT-8010 Depth Gauge (3.5 mm) CT-E9007 Depth Gauge (4.3 mm) CT-E9008 Depth Gauge (5.1 mm) CT-E9010 Paralleling Pins, qty. 2 (1.6 mm & 2.0 mm) CT-9000 Set metal stopper (L.9/11/13/15) CT-Stop07/08/09/10 Implant Latch Driver BL-E9040 Implant Ratchet Driver Short BL-E7001 Implant Ratchet Driver Long BL-E7001 Implant Ratchet Driver Long BL-E7001 Extractor BL-6060 Implant ratchet driver (short) ND-E7001 Implant ratchet driver (LONG) ND-E7001L 3.0 external irrigation drill ND-1726E



SURGICAL KIT COMPONENTS



DRILLS & BONE TAPS



*IMPORTANT:

0.8 mm must be added to the lenght of the drill considering for the angled cutting tip



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