

B. AXIOM® REG/PX COMMON SURGICAL KIT NEW!

→ **COMPACT AND COMMON AXIOM® SURGICAL KIT**

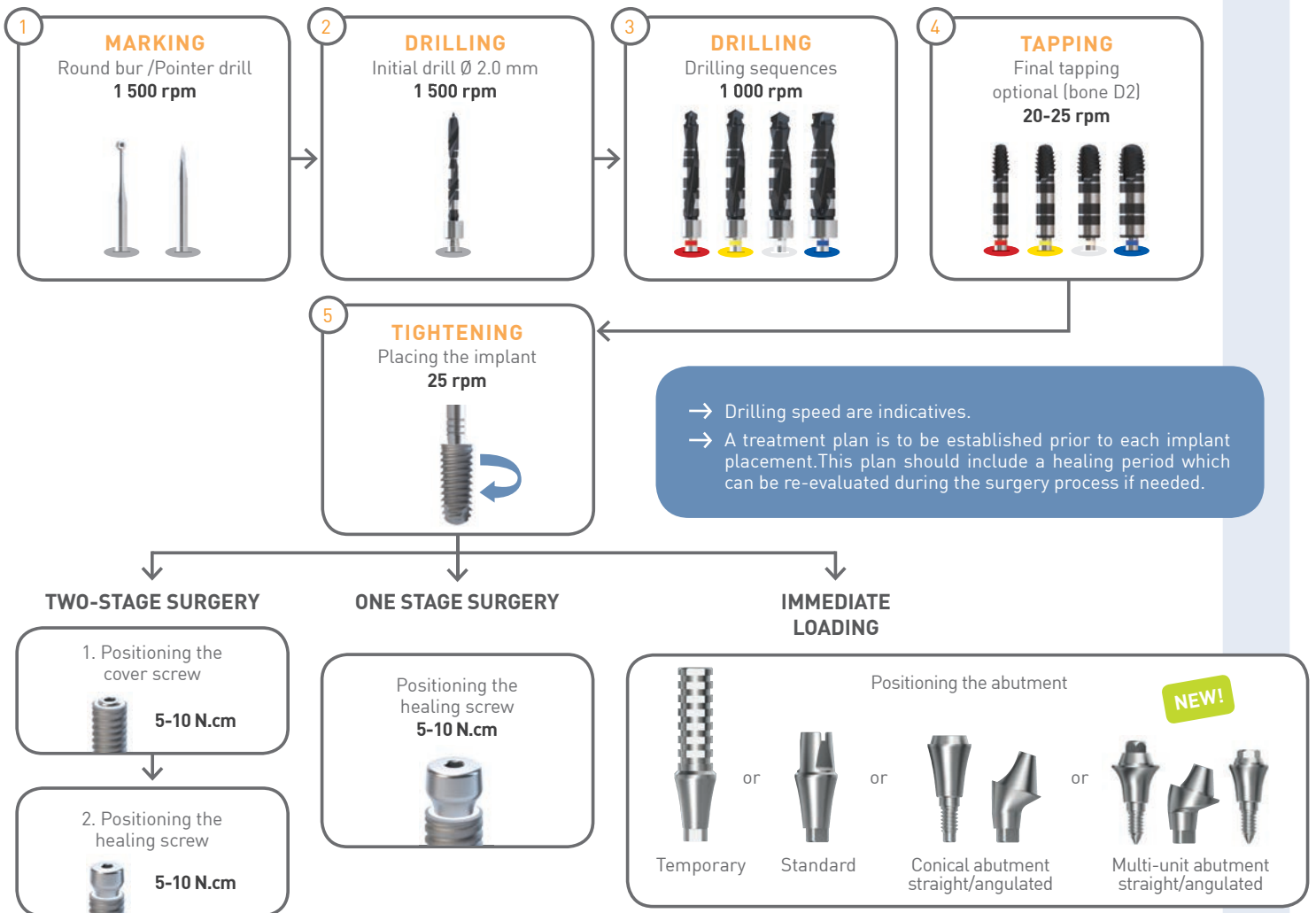
Axiom® REG and Axiom® PX = **SIMPLICITY** and **MODULARITY**

A reversible ratchet wrench is available in the surgical kit Axiom® REG / PX Ref. **IN MOD OPS2**.
In addition, a surgical dynamometric ratchet wrench Ref. **INCCDC** can be used as an option.



C. SURGICAL PROTOCOL OF THE AXIOM® REG IMPLANTS

1. Surgical phases



2. Axiom® REG range of implants

- Short lg. 6.5 and 8.0 mm implant : ideal in limited bone crest height.
- Thread = 0.8 mm.

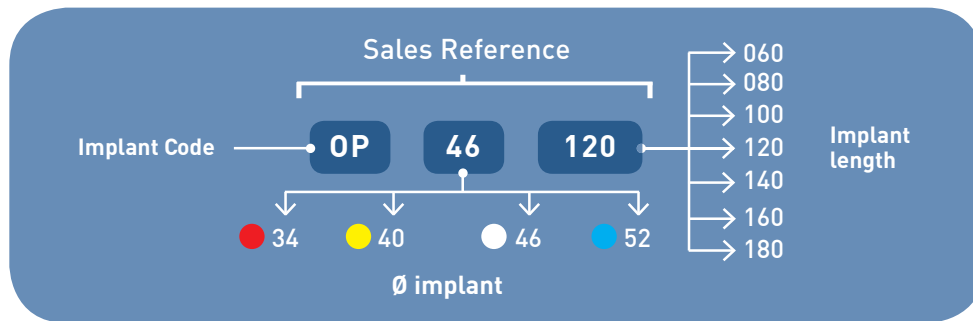
! The implant diameter and length must be determined beforehand by the dental practitioner, depending on the clinical situation. The placement of implants of Ø 3.4 mm is contraindicated in the molar area.

Ø 3.4 mm	Ø 4.0 mm	Ø 4.6 mm	Ø 5.2 mm
● ⁽¹⁾	● ⁽¹⁾	○ ⁽¹⁾	● ⁽¹⁾
8 mm	6.5 mm	6.5 mm	6.5 mm
10 mm	8 mm	8 mm	8 mm
12 mm	10 mm	10 mm	10 mm
14 mm	12 mm	12 mm	12 mm
16 mm	14 mm	14 mm	14 mm
18 mm	16 mm	18 mm	18 mm

(1) Identification color code for implant types repeated on the ancillary instruments and packaging.

3. Axiom® REG technical specifications

a. Implant coding



b. Drilling depths

The Axiom® REG placement protocol provides for a « **subcrestal positioning of the implant** ».

The surface of the implant's shoulder is **BCP®** treated in order to favour peripheral bone healing in this region.

The Axiom® REG surgery protocol takes into account an **apical overdrilling of 0.5 mm**.

The practitioner can proceed with a deeper « **subcrestal positioning** » in order to optimise soft tissue aesthetics.

WARNING!

The size(s) of the implant(s) shall be pre-defined in the treatment plan. A radiographic template calibrating* film is provided to select the implant diameter and length according to the bone available.

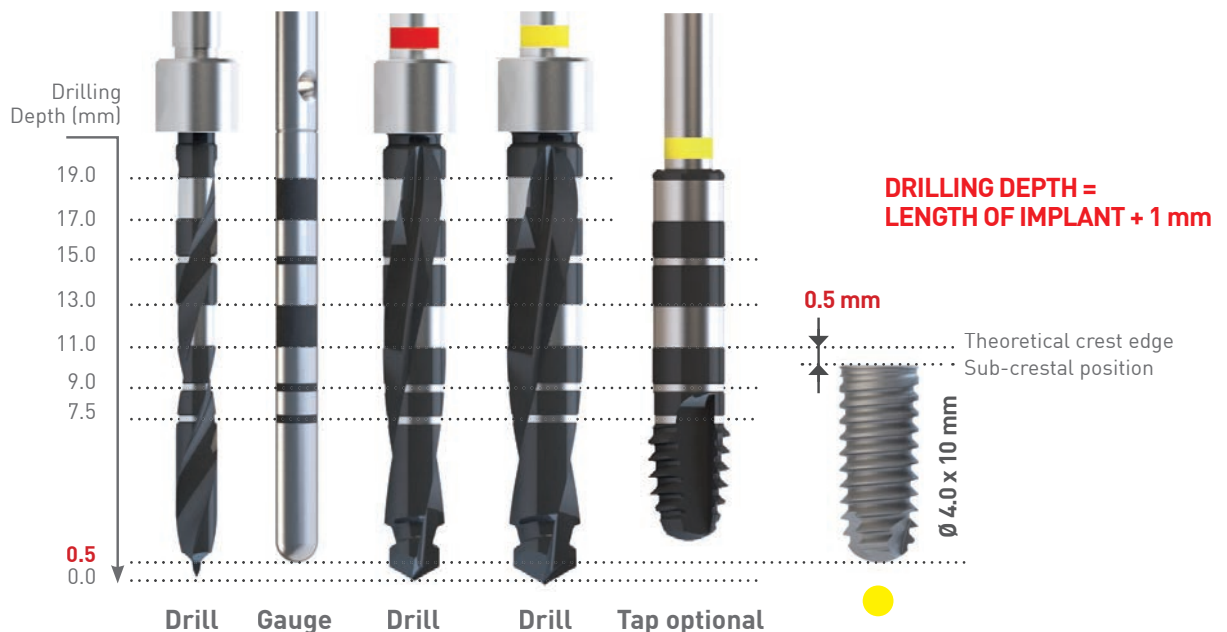
*The film also takes into consideration the length of the associated drilling.

When selecting the implant, take into consideration the length of the drill +0.5 to 0.6 mm at the tip, added to 0.5 mm in sub-crestal position. This additional lengths are indicated on the calibrating film.

They allow bone chips to be collected during the self-tapping of the implant and they avoid apical over-compression.

Precision of the calibrating film: +/- 2%.

Do not use the calibration film if it is damaged (poor print quality, tear...).



→ **ALT. 1 : FLAP TECHNIQUE**

Allows to see the alveolar bone and anatomical obstacles.

Direct reading of the drilling depth according to the bone crest ridge.

Allows to evaluate the 0.5 mm sub-crestal positioning of the implant.

Use of removable stops that secure the drilling and reaming stage (see p. 20).

→ **ALT. 2 : FLAPLESS TECHNIQUE :**

Periost preservation.

Radiographic evaluation of the bone volume and recommended measurements.

Bone crest limit not visible: need for soft tissue thickness pre-measurement.

Report the soft tissue thickness onto the drilling instrument in order to prepare the site and to place the implant.

4. Axiom® REG drilling sequences



Before first use and after each surgery, all components must be decontaminated and sterilised scrupulously following the manufacturer's recommendations. For high performance and optimal clinical results, we recommend that all cutting instruments (drills, taps, reamers...) are limited to **20 uses** and should be used under external irrigation. They are used under external irrigation.

*Comply with cleaning, decontamination and sterilization procedures by referring to corresponding section.

Prior to surgery

Each terminal instrument specific to an Axiom® REG implant diameter can be identified by the identification colour code. The instruments must be used in the chronological order shown below.

All the drills and reamers are available in 2 lengths (S and L). Taps are available in length L.

They have been designed for axial drilling (not transversal drilling), especially drill Ø 2.0..

Drills	Ø 2.0	Ø 2.4 / 3.0	Ø 3.0 / 3.6	Ø 3.6 / 4.2	Ø 4.2 / 4.8
Implants					
Axiom® REG Ø 3.4 mm	x → x				
Axiom® REG Ø 4.0 mm	x → x → x				
Axiom® REG Ø 4.6 mm	x → x → x → x				
Axiom® REG Ø 5.2 mm	x → x → x → x → x				



Optional tapping.
Recommended if D1-type bone.

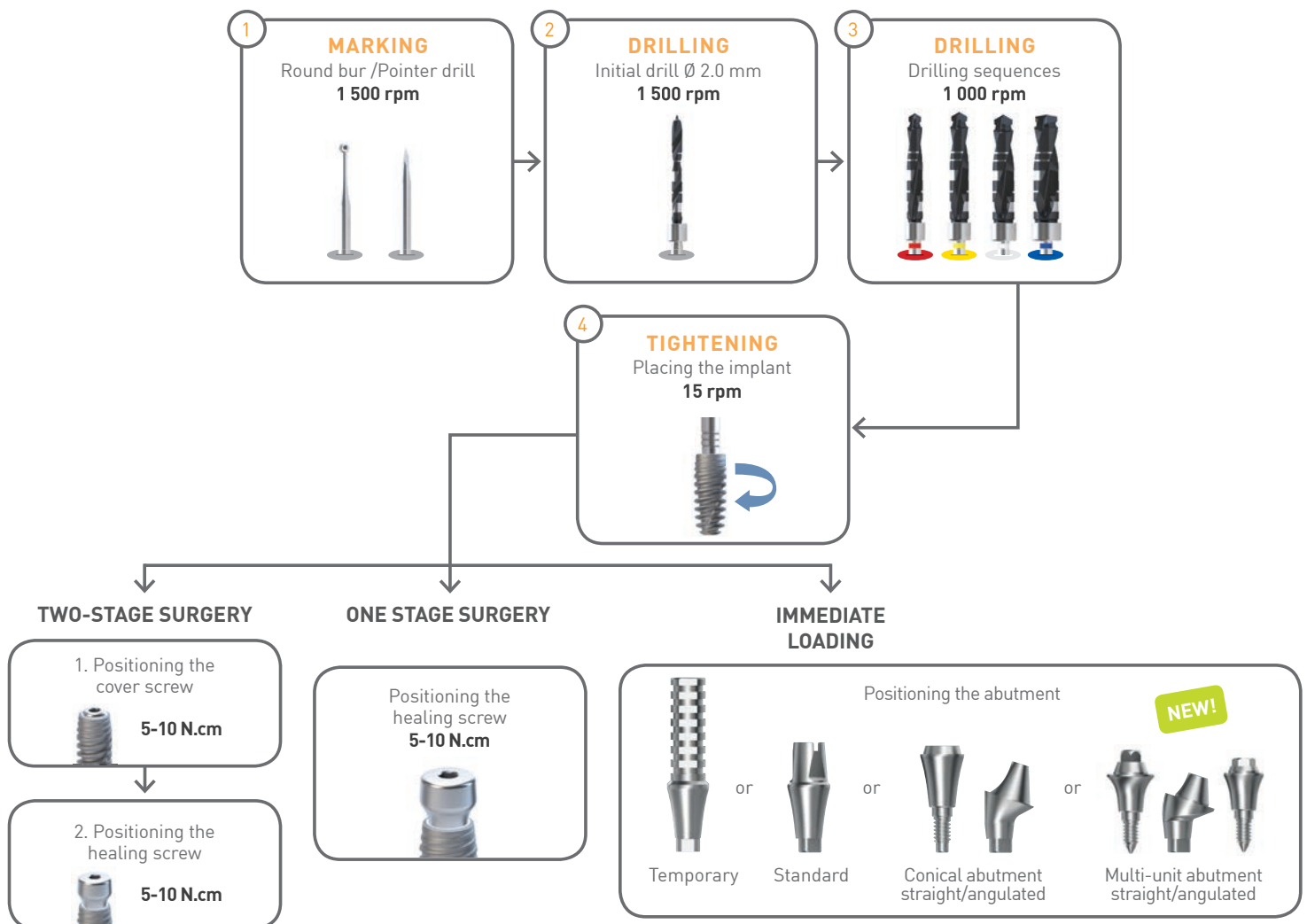
D. AXIOM® PX IMPLANT SURGICAL PROTOCOL

Axiom® PX implants are intended for indications of immediate post-extraction implant placement and low-density bone.

Placement of the Axiom® PX implant is contraindicated in D1-type bone.

The Axiom® PX implant placement protocol requires expertise in implantology.

1. Surgical phases



→ Drilling speed are indicatives.

→ A treatment plan is to be established prior to each implant placement. This plan should include a healing period which can be re-evaluated during the surgery process if needed.

2. Axiom® PX range of implants

- Short lg. 6.5 and 8.0 mm implant : ideal in limited bone crest height.
- Thread = 2.0 mm.



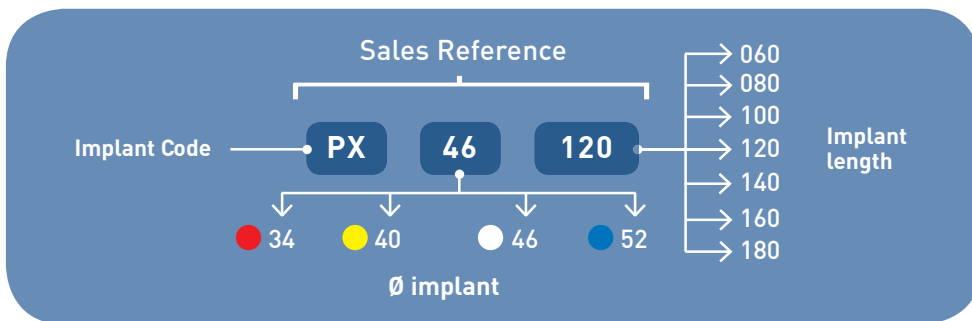
The implant diameter and length must be determined beforehand by the dental practitioner, depending on the clinical situation. The placement of implants of Ø 3.4 mm is contra-indicated in the molar area.

Ø 3.4 mm	Ø 4.0 mm	Ø 4.6 mm	Ø 5.2 mm
8 mm	8 mm	6,5 mm	6,5 mm
10 mm	10 mm	8 mm	8 mm
12 mm	12 mm	10 mm	10 mm
14 mm	14 mm	12 mm	12 mm
16 mm	16 mm	14 mm	
18 mm	18 mm		

(1) Identification color code for implant types repeated on the ancillary instruments and packaging.

3. Axiom® PX technical specifications

a. Implant coding



b. Drilling depths

The Axiom® PX placement protocol provides for a « **subcrestal positioning of the implant** ».

The surface of the implant's shoulder is **BCP®** treated in order to favour peripheral bone healing in this region.

The Axiom® PX surgery protocol takes into account an **apical overdrilling of 0.5 mm**.

The practitioner can proceed with a deeper « **subcrestal positioning** » in order to optimise soft tissue aesthetics.

WARNING!

The size(s) of the implant(s) shall be pre-defined in the treatment plan. A radiographic template film is provided to select to the implant diameter and length according to the bone available.

The film also takes into consideration the length of the associated drilling.

When selecting the implant, take into consideration the length of the drill +0.5 to 0.6 mm at the tip, added to 0.5 mm in sub-crestal position. The over-drilling is indicated with a triangle on the calibrating film.

They allow bone chips to be collected during the self-tapping of the implant and they avoid apical over-compression.

Precision of the calibrating film : +/- 2%.

Do not use the calibration film if it is damaged (poor print quality, tear...).



4. Axiom® PX drilling sequences



Before first use and after each surgery, all components must be decontaminated and sterilised scrupulously following the manufacturer's recommendations*. For high performance and optimal clinical results, we recommend that all cutting instruments (drills, taps, reamers...) be limited to **20 uses** and should be used under external irrigation. They are used under external irrigation.

*Comply with cleaning, decontamination and sterilization procedures by referring to corresponding section.

Drills	Ø 2.0	Ø 2.0 / 2.4	Ø 2.4 / 3.0	Ø 3.0 / 3.6	Ø 3.6 / 4.2
Axiom® PX Ø 3.4 mm ●	x → x				
Axiom® PX Ø 4.0 mm ●	x → x → x				
Axiom® PX Ø 4.6 mm ●	x → x → x → x				
Axiom® PX Ø 5.2 mm ●	x → x → x → x → x				

For the placement of Axiom® PX implant in low-density or medium-density bone, we recommend a sub-drilling in diameter.

Each terminal instrument specific to an Axiom® PX implant diameter can be identified by the identification colour code.

All the drills and reamers are available in 2 lengths (S and L).

The instruments are arranged in the chronological order.

They have been designed for axial drilling (not transversal drilling), especially drill Ø 2.0

The drilling sequence can be adapted by the practitioner according to the clinical situation.

RECOMMENDATIONS

Axiom® PX implant placement is contraindicated in D1-type bone.

Tapping devices must not be used during the placement of Axiom® implants.