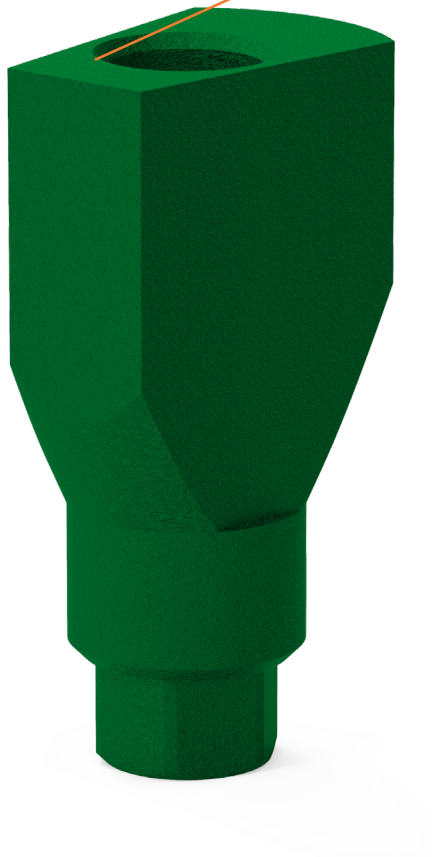
Ti-Bases system for internal hex implants

Features Scan adapter

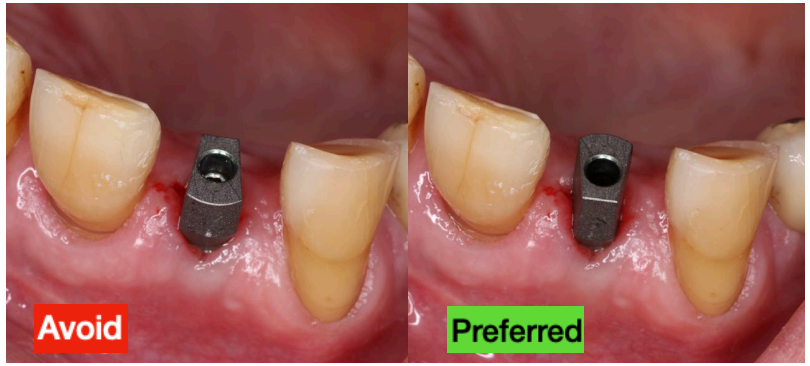
Titanium for precision and x-ray visibility

Sandblasted for scanning

2 mm shoulder height helps choosing the cuff height of the Ti-base



Place **flat** side buccal for angulated screwchannel with a lingual direction



Features new ti-bases

Cutting groove 5mm

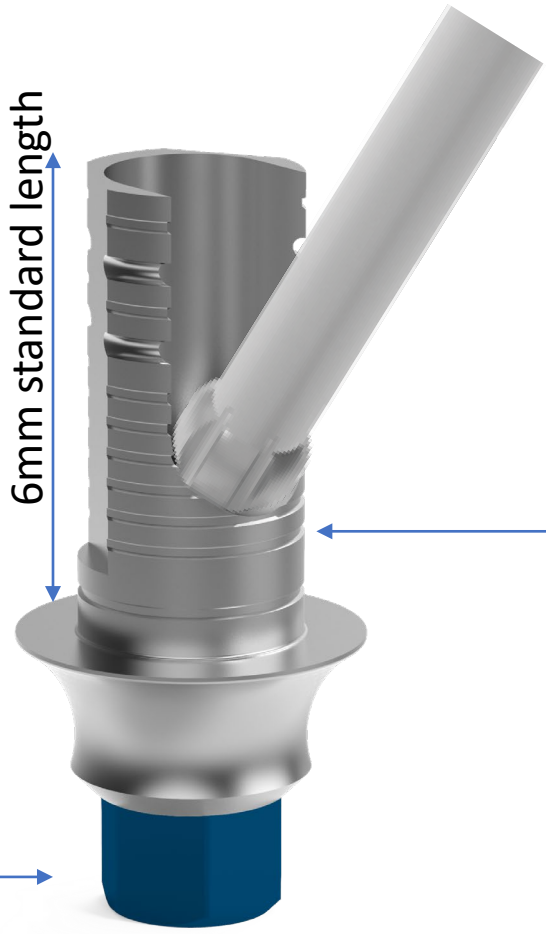
Cutting groove 4mm

Choose right height in the software

If possible always use the initial length of 6mm

6 different cuff heights and widths

Rotating and Non-Rotating



25 degree screw angle*

Extra grooves, for better retention

*Included screw for straight channel

Screw for angle is S1BRS1T6

Analogs Internal hex narrow

For implants: 3.3 is narrow

- Volution SVB33XX
- IMAX HYHA IMAX33XXHYHA
- IMAX C IMAX33XXC

In Combination with SCAN ADAPTOR NARROW : S1BNSA

S1BNIA

For dental plaster model

S1BNDIA

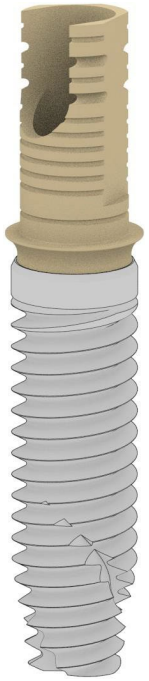
For Digital 3D printed model

Ti bases Internal hex narrow

For implants: 3.3 - narrow (anterior use)

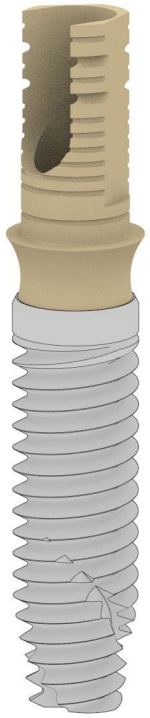
- Volution SVB33XX
- IMAX HYHA IMAX33XXHYHA

In Combination with SCAN ADAPTOR NARROW : S1BNSA



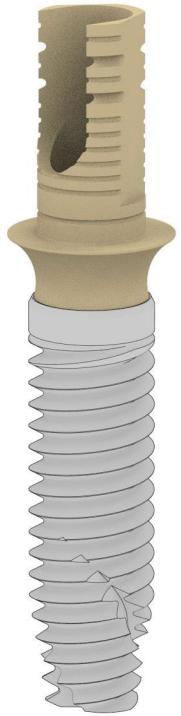
S1BN11DCTB

- Shoulder for Zirconia 0,4mm
- Cuff width Ø 3,7mm
- Cuff height 0,8mm
- Anterior use for incisors in the mandibula and lateral incisors in the maxilla



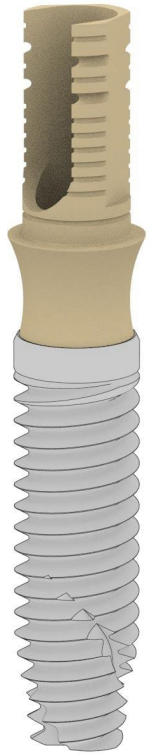
S1BN12DCTB

- Shoulder for Zirconia 0,4mm
- Cuff width Ø 3,7mm
- Cuff height 1,8mm
- Anterior use for incisors in the mandibula and lateral incisors in the maxilla



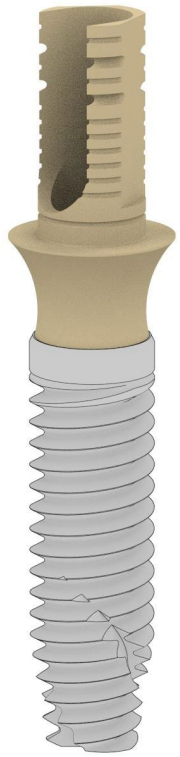
S1BN12DCTB50

- Shoulder for Zirconia 0,8mm
- Cuff width Ø 4,5mm
- Cuff height 1,8mm
- Anterior use for incisors in the mandibula and lateral incisors in the maxilla



S1BN14DCTB

- Shoulder for Zirconia 0,4mm
- Cuff width Ø 3,7mm
- Cuff height 2,8mm
- Anterior use for incisors in the mandibula and lateral incisors in the maxilla



S1BN14DCTB50

- Shoulder for Zirconia 0,8mm
- Cuff width Ø 4,5mm
- Cuff height 2,8mm
- Anterior use for incisors in the mandibula and lateral incisors in the maxilla

Analogs Internal hex regular

For implants: 3.7, 4.1, 4.7, 5.2 is 3.5mmD internal hex regular

- Volution: SVB37XX
- IMAX HYHA: IMAX37XXHYHA
- IMAX C: IMAX37XXC

In Combination with SCAN ADAPTOR Regular : S1BSA

S1BIA

For dental plaster model

S1BDIA

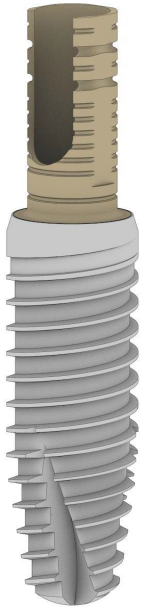
For Digital 3D printed model

Ti bases Internal hex regular

For implants: 3.7, 4.1, 4.7, 5.2 - 3.5mmD internal hex regular

- Volution: SVBXX
- IMAX HYHA: IMAXXXHYHA
- IMAX C: IMAXXXC

In Combination with SCAN ADAPTOR Regular : S1BSA

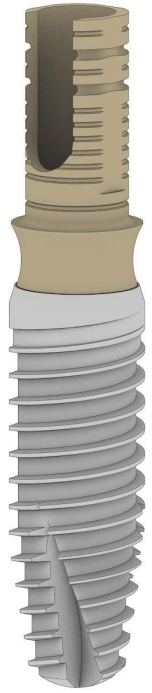


S1B00DCTB

- Shoulder for Zirconia 0,4mm
- Cuff width Ø 3,4mm
- Cuff height 0mm
- **Incisors**

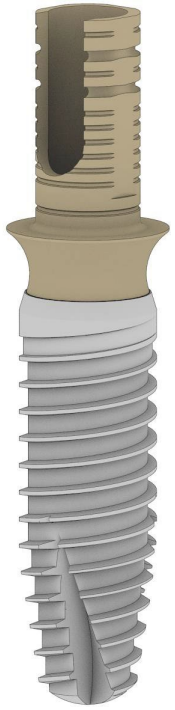
S1B11DCTB

- Shoulder for Zirconia 0,4mm
- Cuff width Ø 3,7mm
- Cuff height 0,5mm
- **Incisors, Cuspids**



S1B12DCTB

- Shoulder for Zirconia 0,4mm
- Cuff width Ø 3,7mm
- Cuff height 1,8mm
- **Incisors, Cuspids**

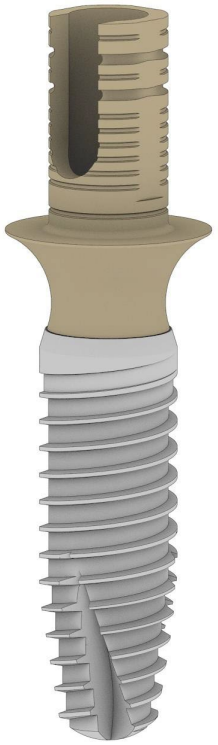


S1B12DCTB50

- Shoulder for Zirconia 0,8mm
- Cuff width Ø 4,5mm
- Cuff height 1,8mm
- **Incisors, Cuspids, Premolars**

S1B14DCTB

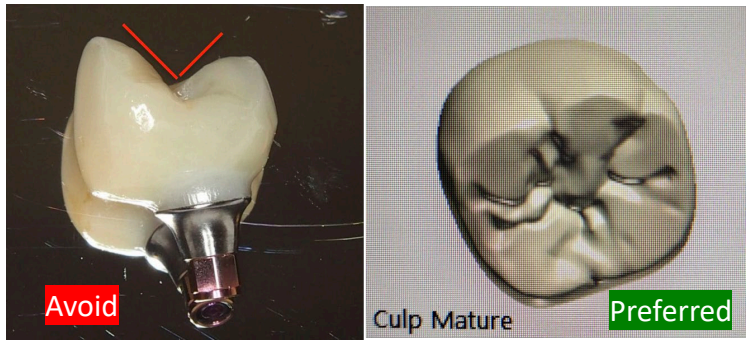
- Shoulder for Zirconia 1,2mm
- Cuff width Ø 5,7mm
- Cuff height 1,8mm
- **Molars**
- 4.1 and wider implants only



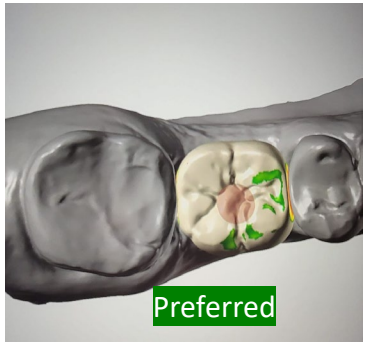
S1B14DCTB50

- Shoulder for Zirconia 1,2mm
- Cuff width Ø 5,7mm
- Cuff height 2,8mm
- **Molars**
- 4.1 and wider implants only

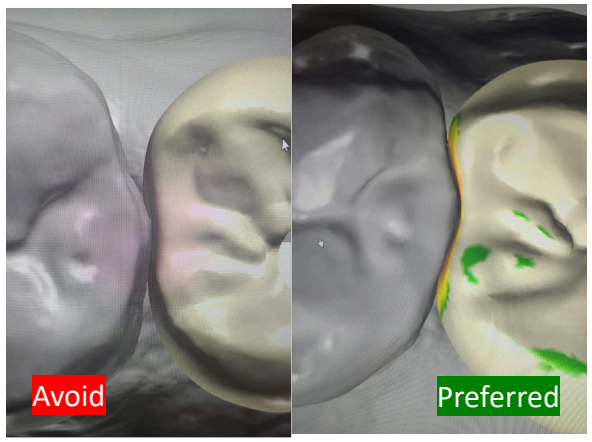
Considerations and troubleshooting



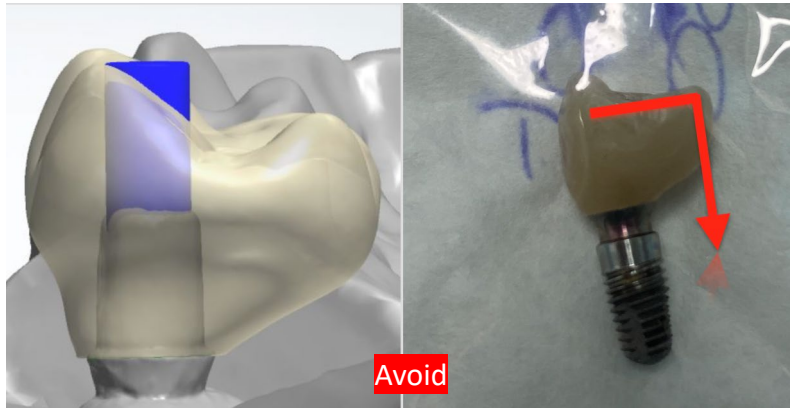
Flat occlusal tables, **minimal** cusps height



Small occlusal tables to prevent overloading

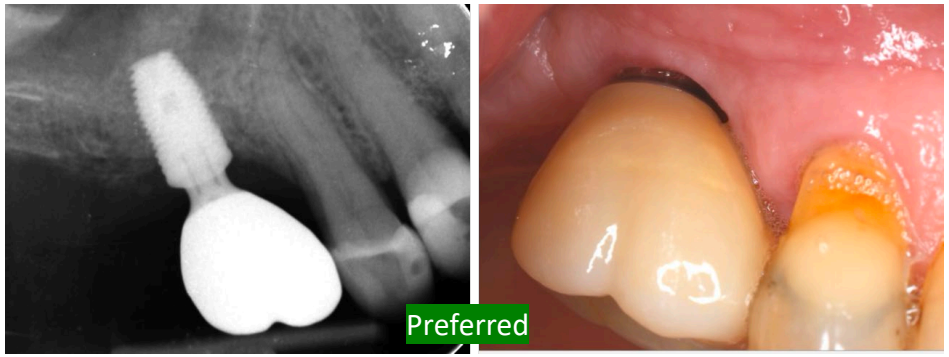


A **large** contact **area** helps preventing biomechinical complications. Ideally the restorative dentist should provide a adequate surface for this, otherwise optimize in the CAD software

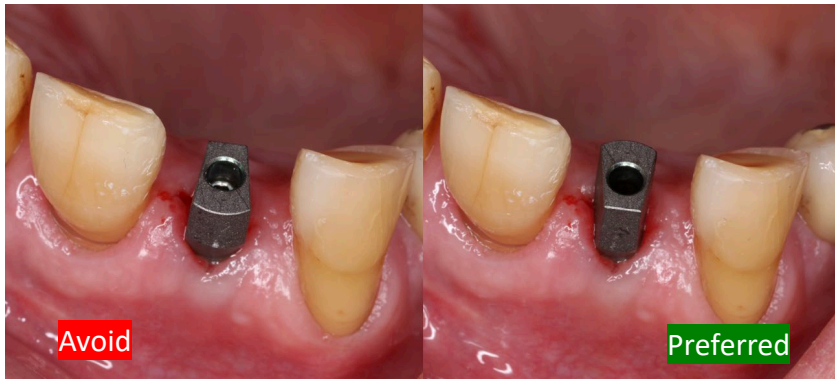


Design **load bearing cusps** with as much **contour reduction** as possible to avoid biomechanics failures, especially the palatal cusps, since there is no esthetic demand in that plane.

Considerations and troubleshooting

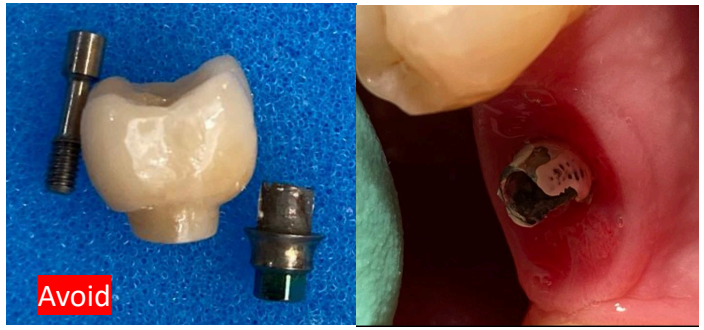


Choose the **highest** Ti-base possible in the posterior area. Titanium is strong and biocompatible. A small line of titanium is often far away from the smile line



For angulated screw channels the **flat** side of the scanadaptor should be placed in the **opposite direction** of the aimed angulation: flat side buccal for a lingual positioned screw access hole.

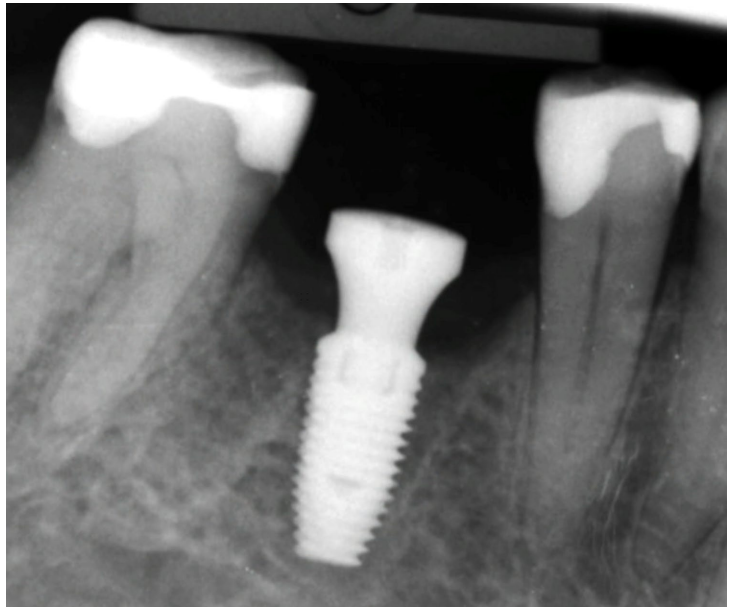
Use **MDP** primer, **sandblasting** and a resin cement to bond the Ti-base to Zirconia (multiple brands available)



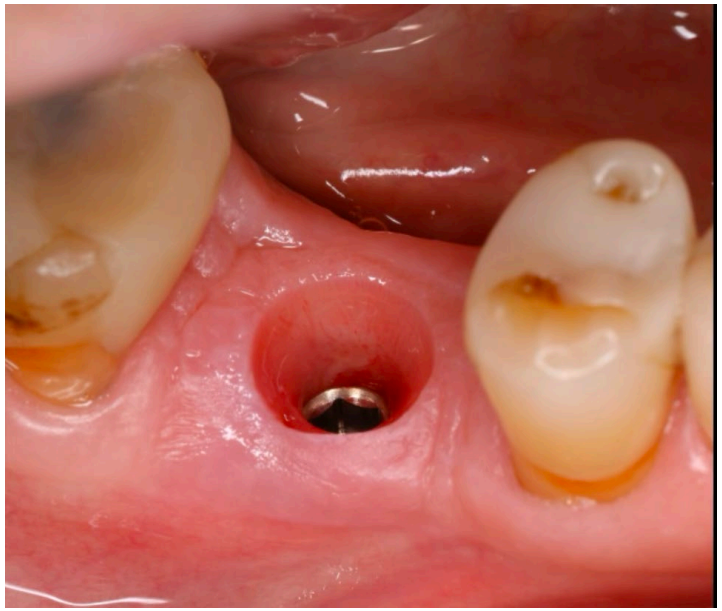
Too **small and unnecessary shortening.** Only **the 5.7mm wide** Ti-base is suitable for non splinted molar crowns

Too **low** Ti-base. Choose a higher version to avoid pressure on the periosteum.

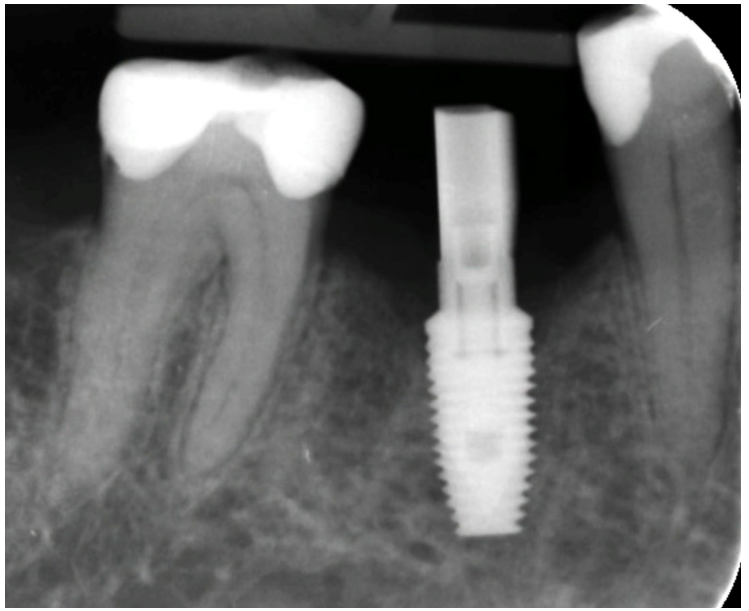
Case: molar



6mm wide and 4.5mm high healing abutment

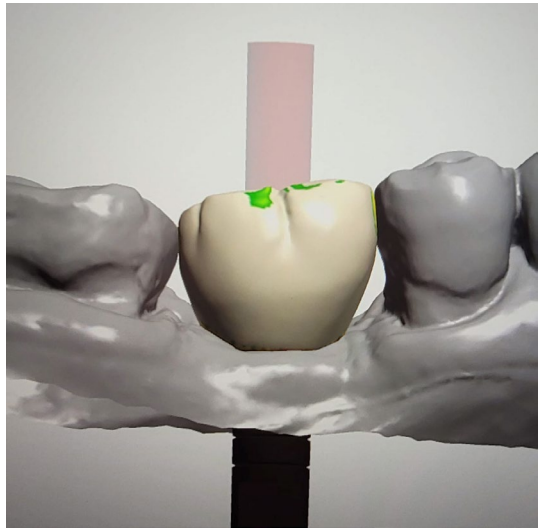


Good initial emergence profile

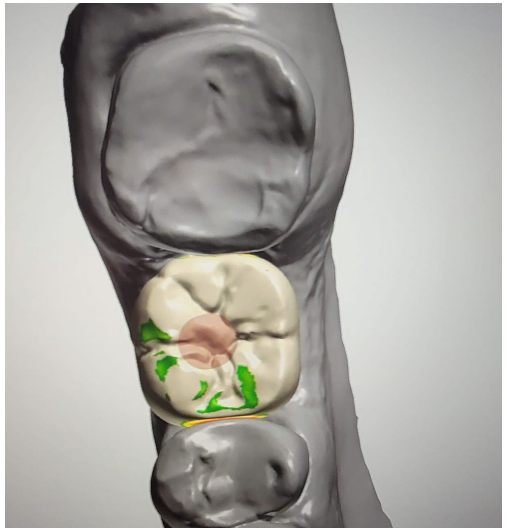


Scan adaptor properly seated.
Flat side facing the buccal plane

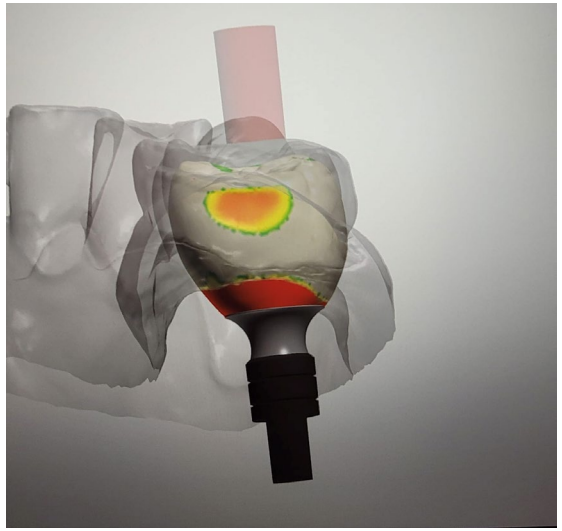
Case: molar



Plan the same height for the interpoximal crista as the neighboring teeth and have similar interproximal spaces



Flat cusps and small occlusal table

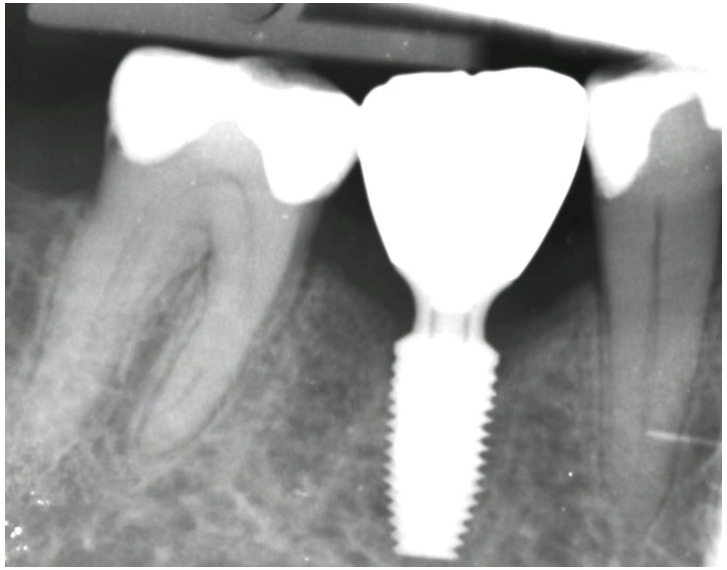


Large contact area instead of point

Lingual contour reduction especially in the cervical area

Case: molar

2.8mm height and 5.7mm wide Ti-base
Clean and disinfected



X-ray after placement

Full Zirconia crown