

SMART™ IMPLANT



Design Facts

SMART™ implant is primarily designed for immediate and early loading protocols in compromised bones.

By following a flexible surgical protocol adjusted to the bone type ideal primary stability can be achieved.

Blade type apex and cutting edges enable you to readjust implant axis for optimal restorative orientation and esthetic results.

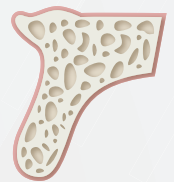
Indication Priority



Extraction Socket

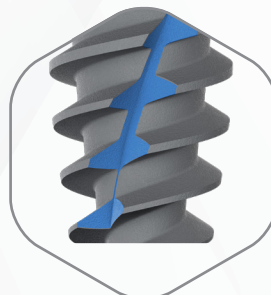
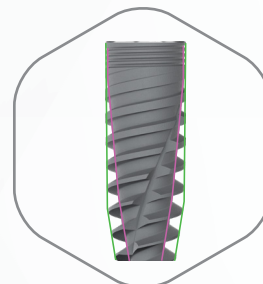
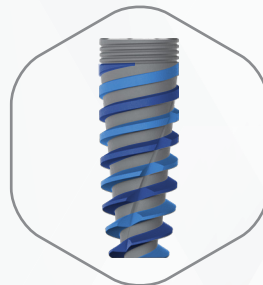
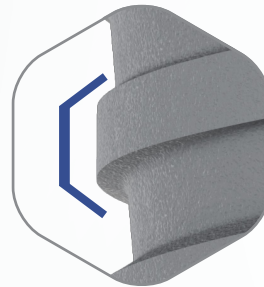
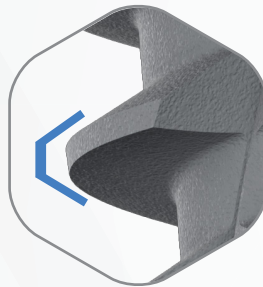


Bone Type D4



Bone Type D3

“PRIMARY STABILITY ASSURED!”



Straight Neck & Micro Grooves

Slightly inward design eliminates the need for wider drilling. Provides cortical bone preservation for the long-term success of the implant. Micro grooves reduce stress on cortical bone and form circular bone barriers in peri-implant area.

Combined Thread

Gradually expands bone starting from sharper threads to ACME threads thus securing stronger primary stability

Tapered root-like body

Ensures maximum bone-implant-contact in step-drilled osteotomy.

Dual Contour

Coronal part & body: straight
Apical part: conical

Double-Helix Thread

for increased primary stability and decreased micromovements

Apical Cutting Edge

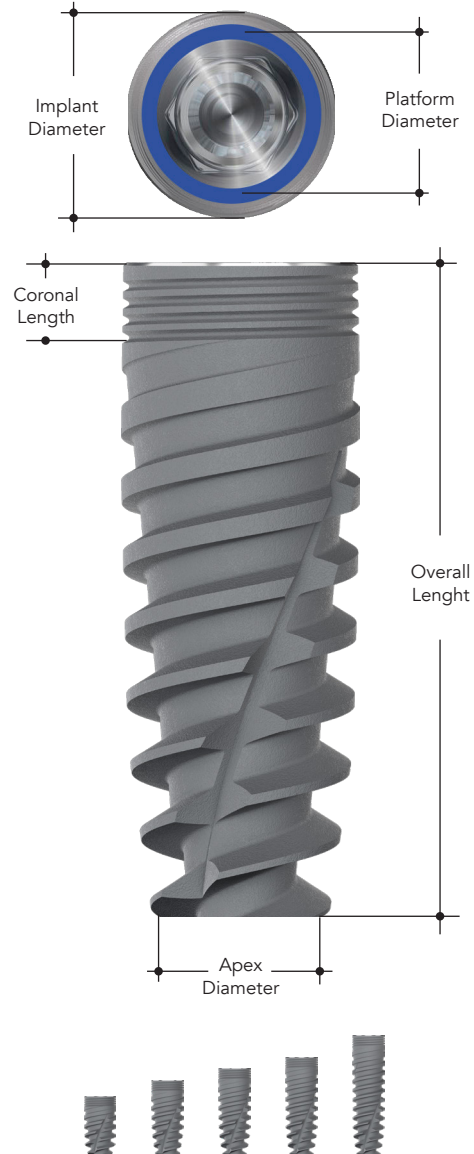
helps easy insertion in narrower osteotomy.

Blade-like Tip

helps to re-align axis during insertion.

SMART™ IMPLANT

Dimensions



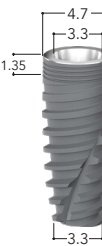
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	8	3.3	113308N
	10		113310N
	11.5		113311N
	13		113313N
	16		113316N



NP	Length (mm)	Diameter (mm)	Ref. Code
	8	3.75	113708N
	10		113710N
	11.5		113711N
	13		113713N
	16		113716N



RP	Length (mm)	Diameter (mm)	Ref. Code
	8	4.2	114208R
	10		114210R
	11.5		114211R
	13		114213R
	16		114216R



RP	Length (mm)	Diameter (mm)	Ref. Code
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	13		114713R
	16		114716R



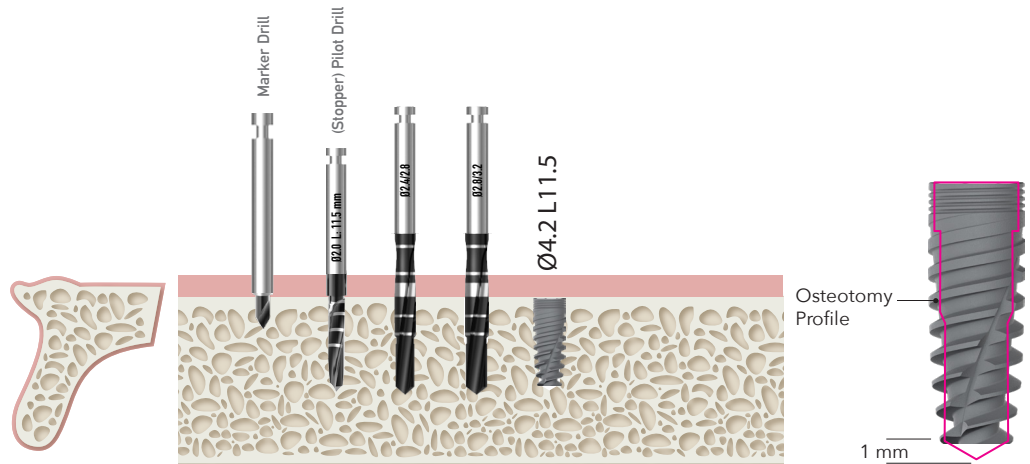
RP	Length (mm)	Diameter (mm)	Ref. Code
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	11.5		115311R
	13		115313R
	16		115316R

*Actual sizes

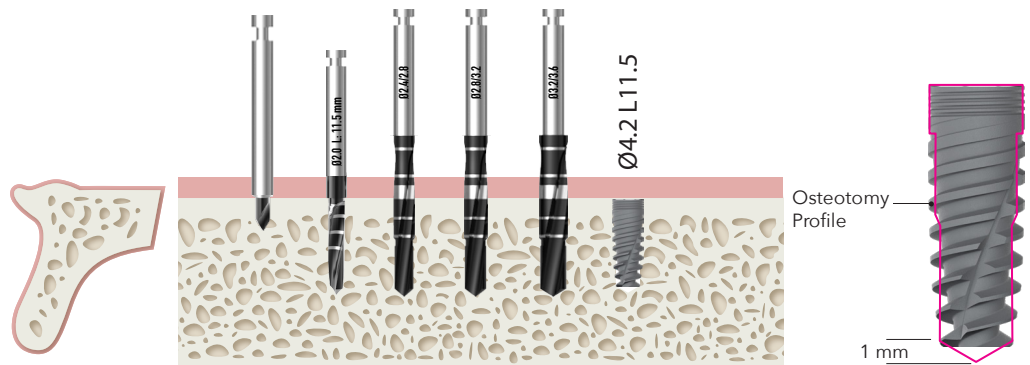
DRILLING PROTOCOL

SMART™ Ø4.2 L11.5

D4 2 step narrower drilling protocol is recommended to have a better primary stability. Step drilling allows a stronger grip at the apical part. Tapping drill can be used optionally to breakthrough the cortical bone. Place the implant 0.5 mm subcrestally.



D3 1 step narrower drilling protocol is recommended to have a better primary stability. Step drilling allows a stronger grip at the apical part. Tapping drill can be used optionally to breakthrough the cortical bone.



D2 proceed drilling to "3.6 - 4.0 step drill" and finish with cortical drill. In the case that insertion torque exceeds 70 NCM, reverse the implant 1/2 turn and continue insertion. If you feel strong resistance, remove the implant, place it into the tube, widen the osteotomy one step further.



**The images here may differ from the actual product.*