



Turning imagination into reality

## R2GATE Service Guide



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virtual implant surgery R2gate Online Services

CT File Upload | Diagnosis Confirm

STL Export | Project Save | prev STEP 04 next

Work Folder : 전악샘플.W.L 수정

3D 2D

cast wax'up auto rotate

maxilla

mandible

implant angle implant

환감철  
20130507 kV 75  
WW 4096 mA 6.0  
WL 1048 0.202 mm

Tooth Num : 26

Tooth Num : 26

Tooth Num : 26

D : 5,5mm  
L : 11,5mm  
AnyRidge

4% 14% 16% 26% 40%

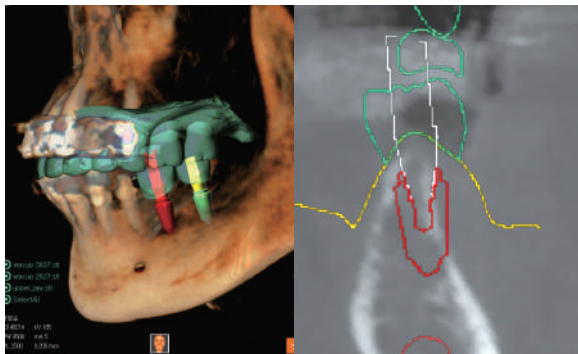
# Quick Introduction of R2GATE

## 01. Prosthesis driven Implant positioning

R2GATE is the cutting edge implant planning software that allows you to place the implant into optimal position.

R2GATE integrate all information that you needed for implant Tx.Planning.

- Final Prosthetic design
- Skeletal information
- Gingival form
- Occlusal relationship

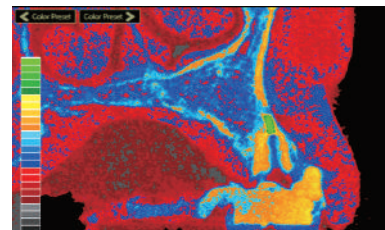


## 02. Digital-eye™

Color-coded analysis of the bone morphology enables you to identify invisible bony structure easily and to predict an optimal drilling sequence for strong initial stability of implant.



Conventional view



Digital eye™ view

## 03. ONE-DAY IMPLANT service

With “ONE-Click”, you can experience a handy and fast service with reasonable price.

### ONE-DAY IMPLANT Service

- 3D printing surgical guide
- Zirconia customized abutment
- Temporary crown



### R2 Stent Service

- 3D printing surgical guide







Patients will be comfortable with safe cutting edge  
3D computer guided implant surgery!

# TREATMENT COUNSEL

Have your patients feel comfortable  
**who is afraid of implant surgery.**

Reduce the operation time with more sophisticated computer guided surgery!

Faster recovery by less pain flapless surgery!

New teeth on the day of implant surgery!

## R2GATE Consulting Guide(Q&A)

### Q. What's R2GATE?

- » R2GATE is cutting edge program to produce sophisticated hybrid image by layering CT data and scan data of plaster model.
- » We can place the implant in the one of the best positions by making a decision with final prosthesis appliance which guarantees long-term safety.

### Q. What's 3D printing surgery guide?

- » We can produce R2 stent(guided appliance for the surgery) by 3D printing with the diagnosis and simulation results extracted from the R2GATE program.
- » R2 stent is produced by sophisticated 3D printing machine with accurate and high-strength materials which makes placement more precise.
- » R2GATE makes us operate minimum invasion possible.

### Q. What's ONE-DAY IMPLANT?

- » R2GATE makes us possible produce R2 stent, customized abutment and CAD/CAM Temporary with the results from the software.
- » Depends on the patient's condition, you can place the customized abutment right after the tooth extraction, and then deliver CAD/CAM Temporary(ZrGen temporary) to realization of the ONE-DAY IMPLANT.
- » ZrGEN temporary crown made from resin block has esthetics and durability to keep until final prosthesis appliance loaded.
- » You can recommend R2GATE guided surgery especially with the elderly and female patients who are afraid of surgeries because R2GATE spend much less time and less bleeding through flapless surgery in case of no GBR needed.

### Q. What's Zirconia customized abutment?

- » Zirconia customized abutment is a final abutment with esthetics and high biocompatibility useful to have ONE-DAY implant surgery.
- » It looks good even with gingival retraction because metal gingival finish lines are not exposed out. Also, you can set the gingival finish lines on your own by prepping oral cavity.
- » It is possible to take impression right after the removal of temporary crown when you load the final prosthesis appliance(same to natural teeth).

### Q. Flapless only?

- » The purpose of the guided surgery is that positioning implant on the most appropriate site. Therefore, you can use all of the implant surgery cases not just for flapless surgeries.

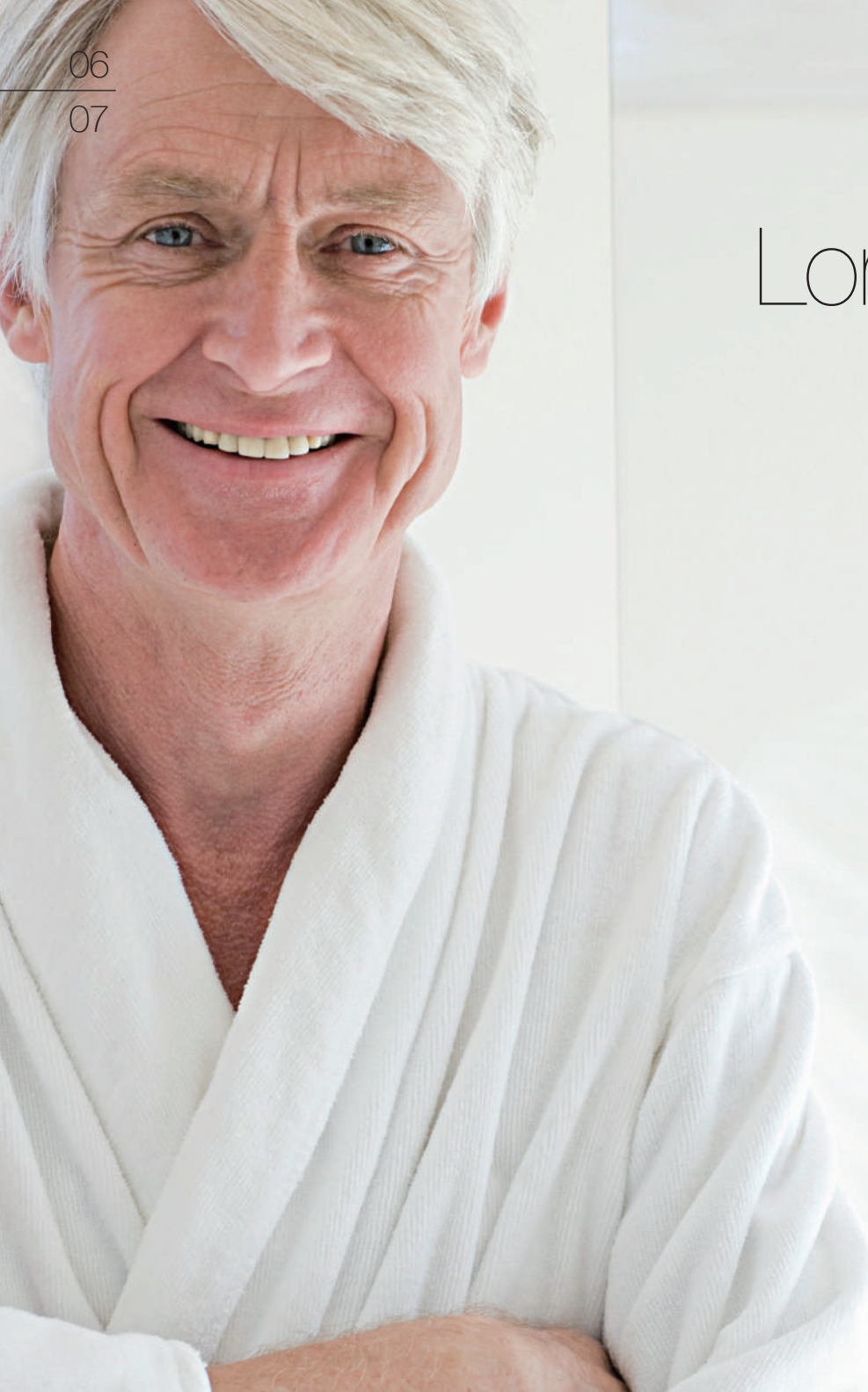
### Q. Does anyone can get the surgery?

- » It may difficult to connect the stent to final line of the teeth and patients who has small oral cavity. Please be careful of mobility teeth cases because it can be hard to stick in.

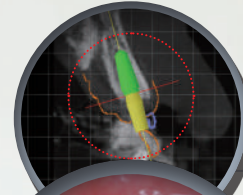
### Q. How long does it take to make stents?

- » Please be noted that it takes around 5 days from the date of the model sent for stent produce. (7 days for ONE-DAY implant.)



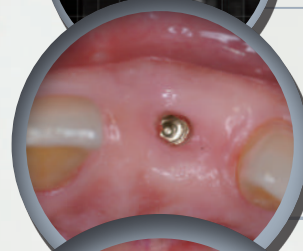


# Long beauty, less treatment



More accurate surgery,  
less surgery time through  
3D computer guided  
surgery!

1



Faster recovery,  
less pain by  
flapless surgery

2



More natural and  
healthy neighboring  
teeth with computer  
customized abutment!

3



Bring the beauty to your  
life on right that day of  
the implant surgery!

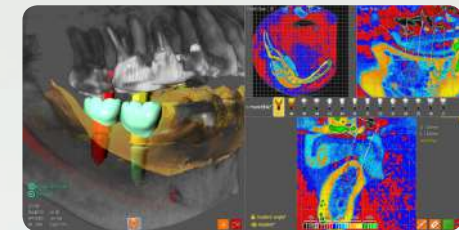
4



# period through "3D Computer Guided Surgery"

## Detailed 3D diagnosis with CT and Scan data

We can make almost same condition of oral cavity by layering CT and scanned 3D model image. Pre-simulation makes us spend less time to surgery and realize risk elements in advance through discovering implant diameter, length, positioning site, angle and depth.



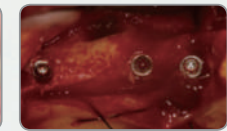
[Implants surgery simulation]

## Flapless surgery with computer navigation guide

We can operate the surgery with guided stent to do a surgery exactly same to the simulation. Flapless surgery make the patient recover faster, less pain, less bleeding, and spend less time.



[Flapless surgery]



[Flap surgery]

## Customized abutment with high-biocompatibility

It looks good and is helpful to keep implants long time with characteristic biocompatibility making neighboring teeth healthy compared to other brands of metal material abutment.



[Customized  
abutment]



[Temporary Crown]

## New teeth on the day of implant surgery!

We can load the temporary teeth right after the surgery depends on the patient's condition with customized biocompatible abutment. ZrGEN temporary crowns are produced from high-strength resin block with high esthetics and strength. It is possible to keep implants satisfactory and safely.

# Why Zirconia?



## 1. High-compatibility

### - Zirconia > Titanium > Gold

Many articles report the high-compatibility of zirconia. It is guaranteed long-term safety by maintaining neighboring teeth healthily, minimizing infection.



## 2. Highly esthetics

### - No metal exposed!

It's highly esthetic because all the materials are made from Zirconia, not be seen metal part except the connection part.

### - Don't worry about gingival recession!

After loading final prosthesis appliance, you don't have to worry about gingival retraction caused from metal margin at all.



## 3. Convenient, long-term maintenance

### - Supra margin

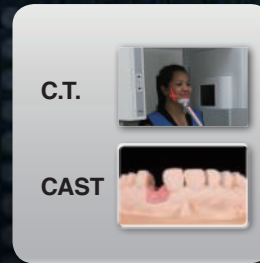
Prosthesis process will be more convenient by reducing chair time. All margins can be shaped as Supra margin which makes prep and impression process easy.

### - No Remaining cement

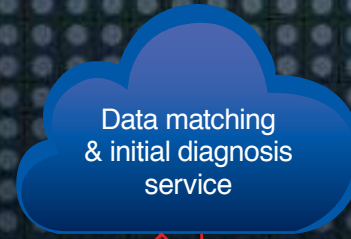
You can release the stress of the peri-implantitis by removal of the remaining cement perfectly after loading prosthesis appliance setting seeing the margin directly.



# CHAIR SIDE PREPARATION



Submission



Send Project file



## 1 CBCT Taking



### 1. R2 Tray preparation

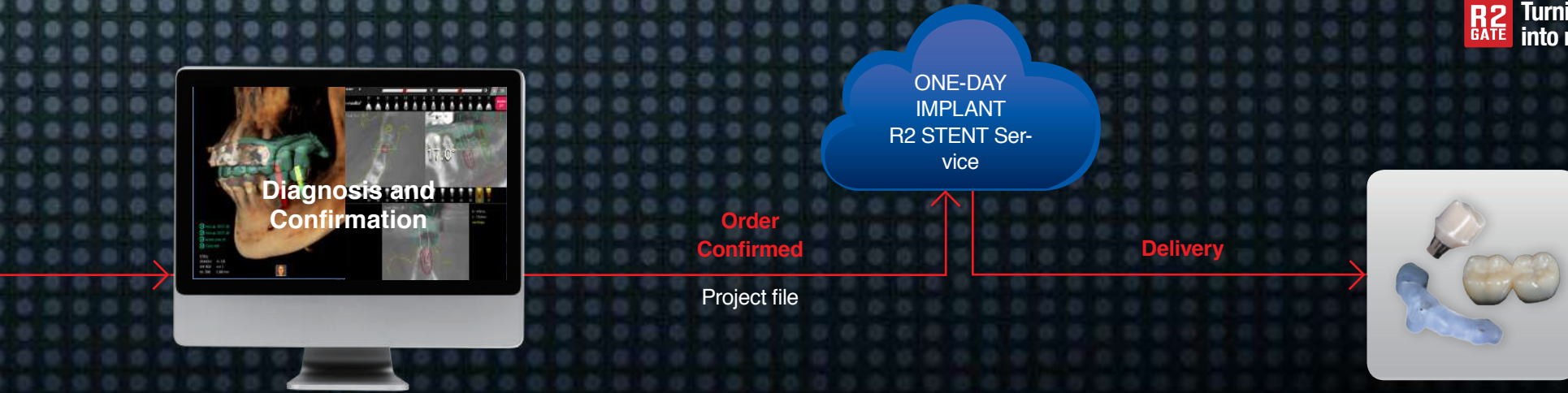
Please be prepared R2 Tray received from DDX center. Please be noted that it's for single-use.

## 2 STONE CAST



### 1. Take Alginate impression

Take the alginate impression by using tray you have. Please take both of implant area and antagonist impression for the accurate result.



## 2. Put the bite impression materials into the tray.

Please put the bite impression materials evenly. Materials should be bite impression materials or heavy body. It should be checked that it's radiation penetrable before putting into the tray.



## 3. R2 Tray Setting

Have your patients to bite R2 Tray to implant surgery site.



## 4. CBCT capturing

Record the CT image with impression materials hardened. After the CT capturing, please get rid of R2 Tray from the patients and clean it through flowing water with model.



## 2. Stone pouring

Please pour the materials into the tray right after hardening. Please be careful not to transform the cast and the impressions because if you did, the stent would not perfectly fit.



## 3. Delievery

Please pack the R2 Tray, maxillary, and mandible not to be damaged and send to DDX in parcel.

Should I have  
to use the  
R2 tray all the  
time?

R2 Tray use



In case of **full edentulous patients**



In the case of edentulous patients, deliver the patient's model in advance (denture use), the individual R2 Tray will be produced and delivered. Please send the CT data taken with this Tray.





### 1. Implant around natural teeth

In case of the natural tooth around the implant placement site, it is allow not using the R2 Tray.



### 2. Prosthetic teeth

In the case of teeth around the implant placement site is metal prosthetic teeth, use the R2 Tray as there can be affected to matching operation by scattering of the metal when CT image taking.



### 1. Take Alginate impression

In the case of edentulous patient, take alginate impression for individual R2 Tray production and then produce stone cast to be delivered to DDX center.



### 2. Customized Gothic Arch Tray

DDX center will send you customized Gothic arch tray produced based on received stone cast from you.



### 3. Gothic Arch Tracing

Take a CT image placing Gothic arch in oral cavity after the record of occlusion sent.

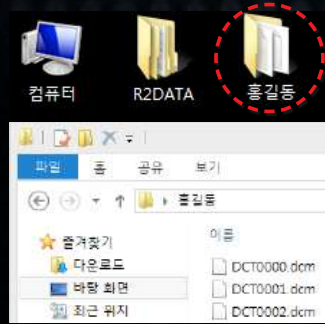


### 4. Delivery

Once all the process is finished, please return the Gothic arch and CT file to the DDX center.

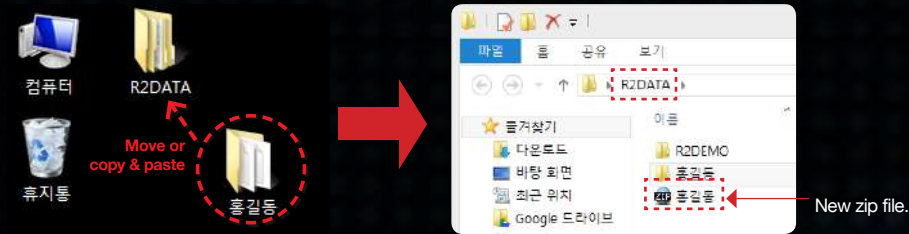
## CT Data transmission ①

1. Extract the CT data by viewer program provided each CT manufacturer.



- Each CT data will be saved as "the name of the patient" folder to desktop or pass specified. (It also can be saved as Zip file)
- CT data is composed of 150~250 files in the folder of "the name of the patient". The number of the files can be different depends on CT's FOV value.

2. Copy to CT data folder to "R2DATA" folder, and then compress the files to send.



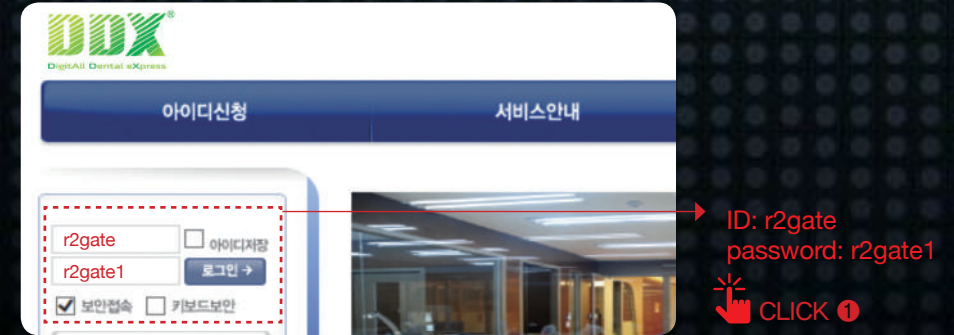
3. Upload the file to webhard for R2GATE or send the data by webhard program installed your desktop.



- Webhard address: [minec.webhard.co.kr](http://minec.webhard.co.kr)  
→ ID: r2gate  
→ password: r2gate1

## CT Data transmission ②

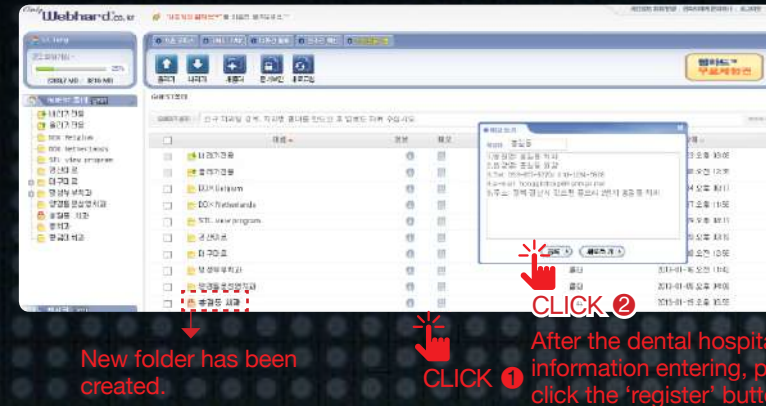
1. **Visiting the webhard** : Please visit our webhard site for DDX use only (<http://minec.webhard.co.kr>) online.



2. **Creating New folder** : If you're visiting this webhard for the first time, please create a new folder saved as "Your Hospital name" as followed image.



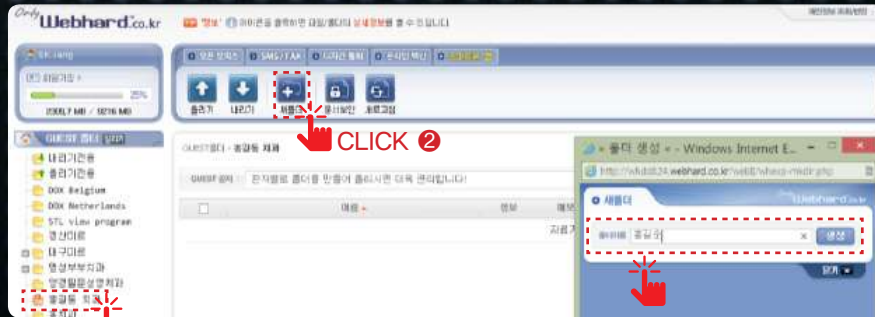
3. **Entering the hospital information** : After creating new folder, click the memo icon to input details of hospital information.



After the dental hospital information entering, please click the 'register' button.

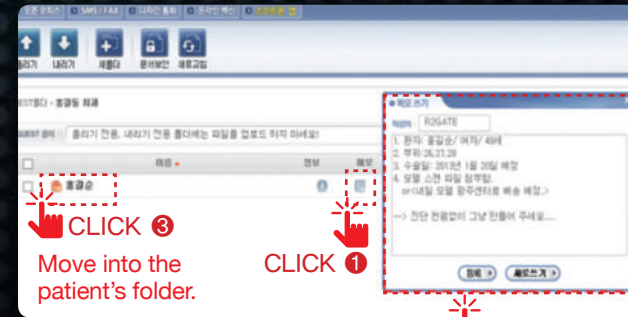


4. **Creating patient's folder** : Click the newly created folder, and create another folder as "The name of the patient". You can add requests from the patients by memo icon.



CLICK 1

CLICK 3 Input the name of the patient

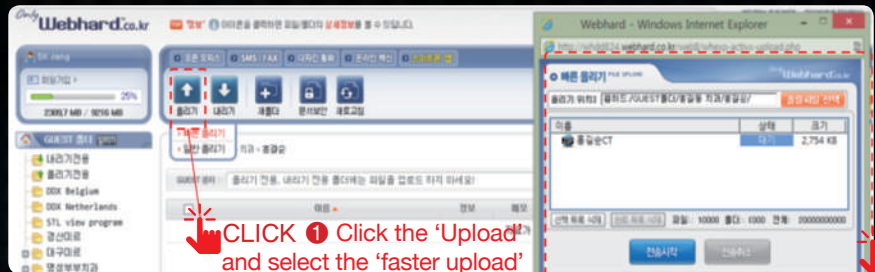


CLICK 3  
Move into the patient's folder.

CLICK 1

CLICK 2 Please add the patient's information and requests, and then click the register button.

5. **CT data transmission** : 1 Please click the Upload button and then select the 'faster upload' to upload the files. 2 Click 'Start' button after you find the patient's CT files.



CLICK 1 Click the 'Upload' and select the 'faster upload'

CLICK 2 Click the start after you find the patient's CT files.

6. **Complete the transmission** : 1 CT data sending completed. 2 You can add the more details by memo icon.



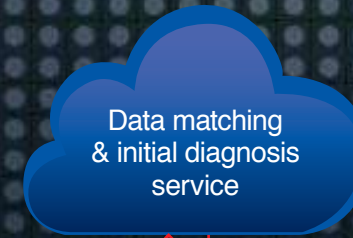
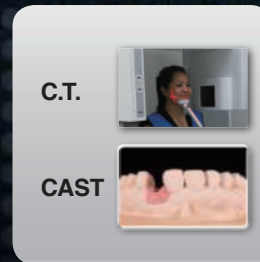
Transmission completed.

Add the details to memo menu.



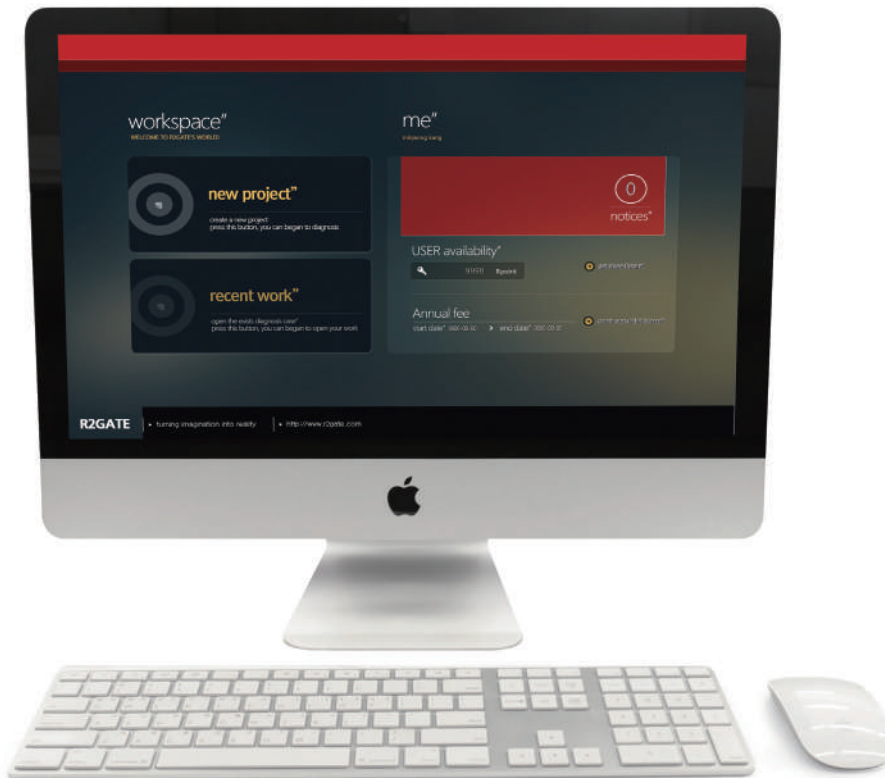
# DIAGNOSIS CONFIRM

Please refer R2GATE QUICK Reference to use of R2GATE program for diagnosis confirmation.



Submission

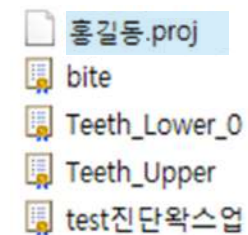
Send Project file

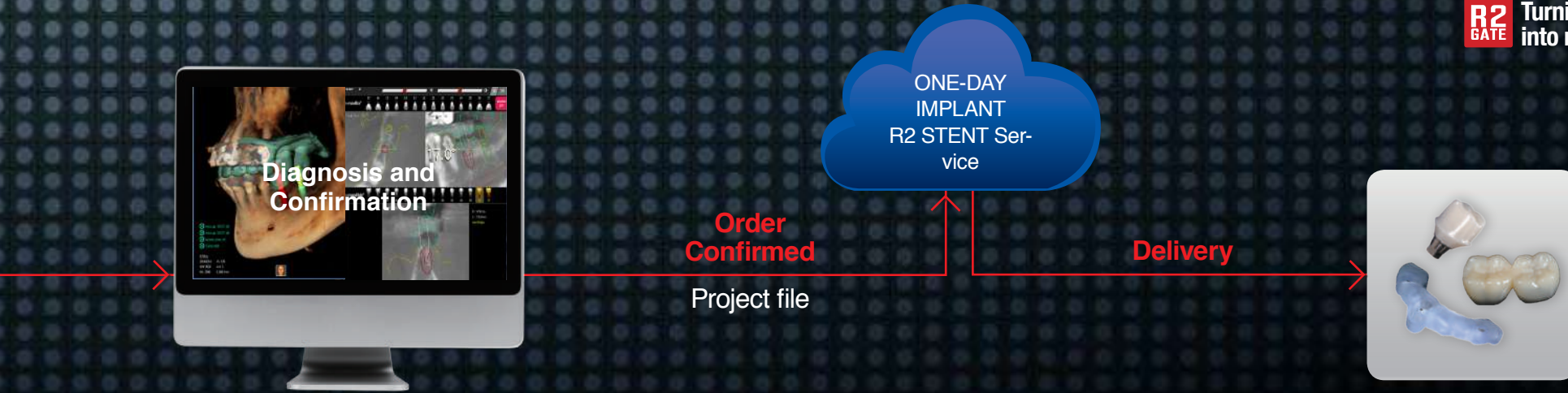


## 1. Project file contents

Project file contents are as followed.

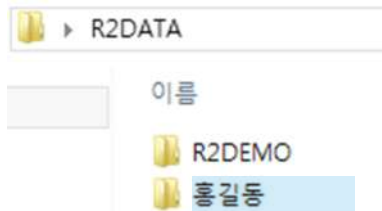
- (1) Diagnosis file- "the name of the patient" \_time and date.proj : Layering of CT, Scan file, and diagnosis wax-up.
- (2) Model data of mandible, and maxillary - "the name of the patient".stl : oral cavity (model) scan file.
- (3) Bite data - bite.stl : scanned file of impressed mandible and maxillary positioning.
- (4) Diagnosis wax-up - "the name of the patient" \_waxup.stl : diagnosis wax-up file of implant positioning.





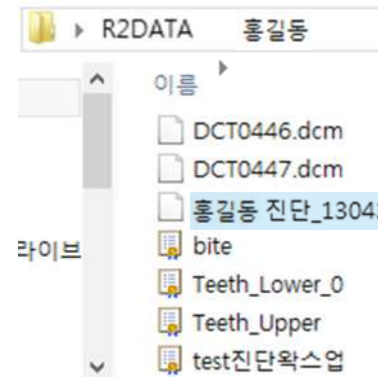
## 2. Paste diagnosis file

Please paste the zip file into "R2DATA" folder of the desktop.



## 3. Diagnosis file confirmation and re-sending the data

Please be noted that all the revised positioning information will be saved. Please re-send the data to the center after you revise the files.

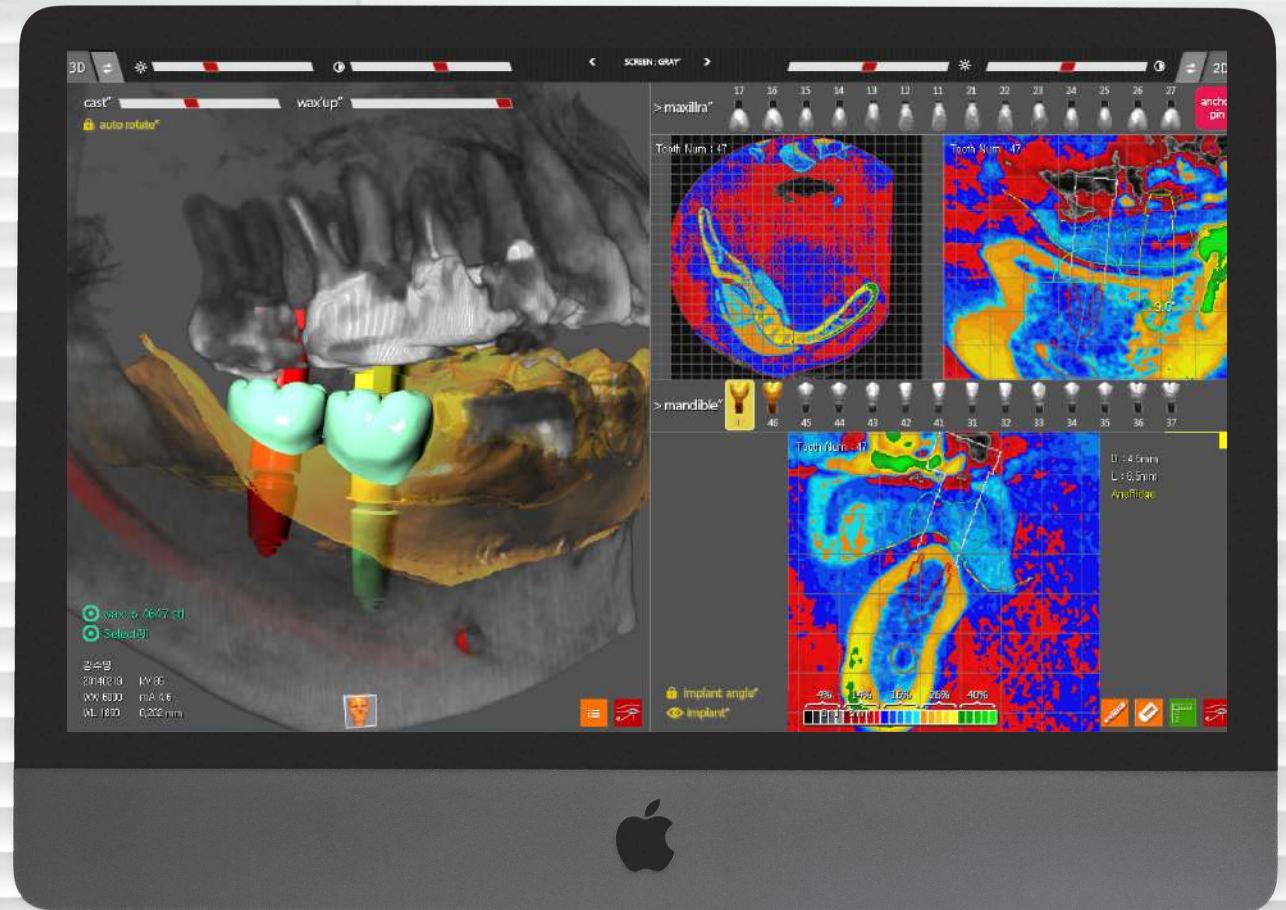
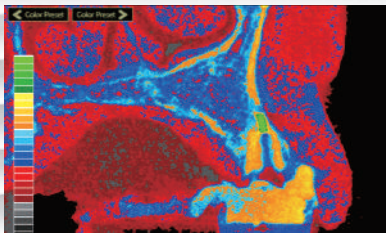




## Digital DNA found in monochrome

### Digital-eye™

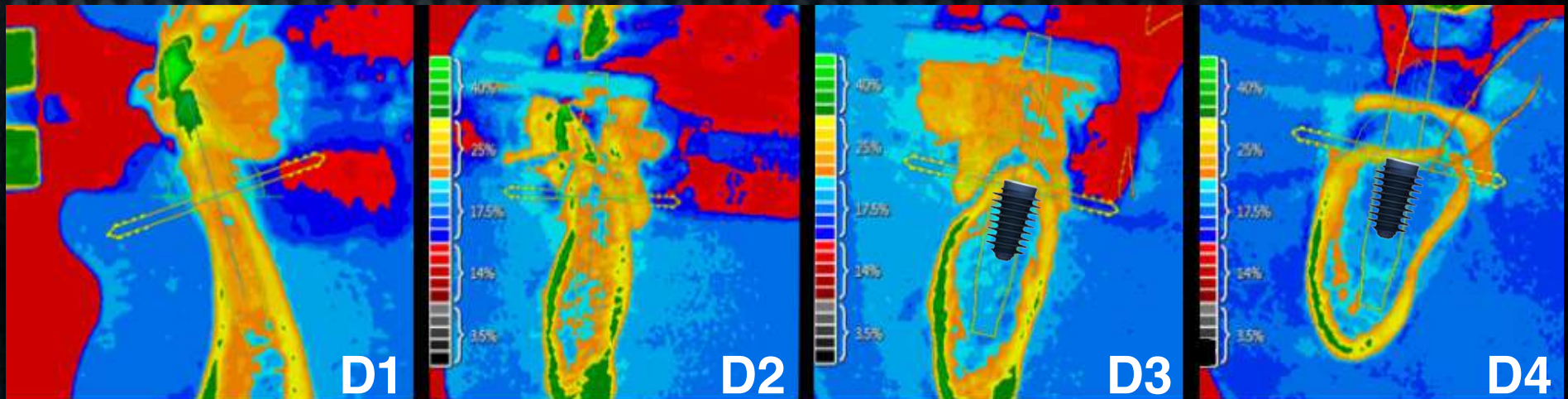
Color-coded analysis of the bone morphology enables you to identify invisible bony structure easily and to predict a optimal drilling sequence for strong initial stability of implant.





## Digital-eye™

Digital-Eye™ makes you an accurate diagnosis by reconstructing 256 layers of gray scales to colored figures possible to realize bone density and the shape.



## How to achieve a optimal initial stability?

It's possible to get the optimum ISQ value even under the poor bone condition controlling drilling sequence depends on the bone condition understanding the bone condition before the surgery.

## Immediate Loading?

Satisfactory ISQ value! But how about immediate loading?  
We'll help you to make a decision providing the possibility of immediate loading success by giving bone density and cortical engagement analysis data in advance.



## R2GATE

the cutting-edge digital diagnosis  
& virtual surgery program for implant  
dentistry.

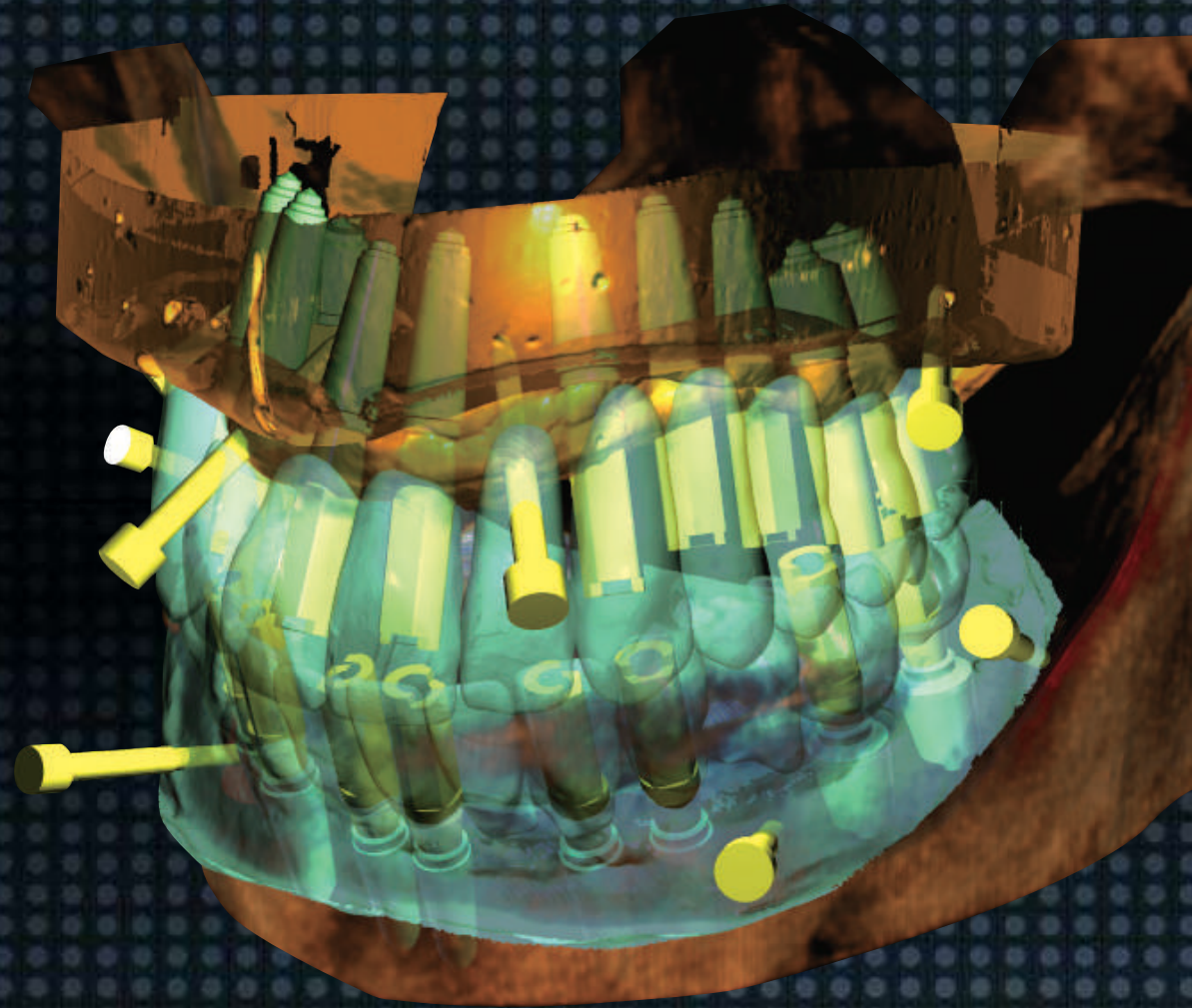
Optimal Implant positioning

Color coded bone analysis

ONE-DAY IMPLANT

## R2GATE

provides you amazing experience  
you ever had!



**R2**  
**GATE** Turning imagination  
into reality

**R2GATE Surgery** >>



# R2 Stent Surgery and preparation

## 1. Checking R2 Package



R2 Stent



Zirconia customized abutment



Temporary crown

- 1) Please check the items of delivery box from iDDA center(DDX center).
  - 2) R2 Stent
  - 3) Zirconia customized abutment (ordered separately)
  - 4) Temporary crown (ordered separately)
- : attaching Zirconia customized abutment and Temporary crown in advance to check the directions of Buccal, lingual, Mesial, and Distal.

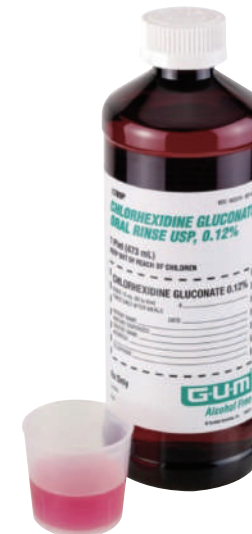
## 2. I received two R2 Stents!

- 1) If you planned to place wide diameter fixture, there will be two R2 stents inside the box.
- 2) Two R2 Stents needed for bigger diameter fixture for bigger hole.
- 3) Regular size guide stent can be used with regular drill and wide size guide stent can be used after that.
- 4) Drill the fixtures as the instructions given above in case that you received two fixtures. Use the handpiece connector to finish the drilling by each size.
- 5) There are R and W marks on the guide stents to recognize easily.



## 3. Stent sterilization 30 minutes before the surgery

Please soak the stent to chlorhexidine or other sterilized materials 30 minutes before the surgery.



# R2 ONE-DAY IMPLANT<sup>®</sup> Surgery Sequence

## 1. Attaching R2 Stent

- 1) You can easily attach the R2 Stent designed to be supported neighboring teeth.
- 2) In case that there's no neighboring teeth you can attach the stents by using Anchor pin especially designed for stent positioning.



## 2. R2 Drilling sequence

### 1) Initial drilling

Initial drilling is the most important part of the surgery. Please select one of the "Guide initial drill" or general initial drills depends on the distance of the stent and crestal bone.

#### ① General initial drill

##### ➡ Usage

If there's enough space to stent and crestal bone, general initial drill can be used in case that initial drill's guide part is fully attached to stent hole. **[Picture 1]**

##### ➡ How to drilling

Drilling until initial drill touched to stopper of the stent. **[Recommendable RPM value is 700 ~ 1,000]**

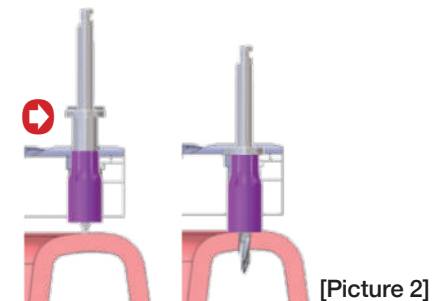
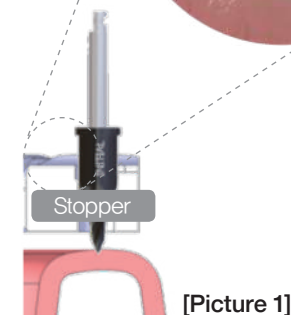
#### ② Guide initial drill

##### ➡ Usage

If there's not enough space to stent and crestal bone, guide initial drill can be used. In case that initial drill's guide part is not fully attached to stent hole. Drill after you make the pink sleeve down to the drill tip. While you're drilling, sleeves will go upward without touching. **[Picture 2]**

##### ➡ How to drilling

Drilling until initial drill touched to stopper of the stent. **[Recommendable RPM value is 700 ~ 1,000]**



# R2 surgical kit AnyRidge Type

**Initial Drill**

Drills for initial drilling pass




Ref.  
AGID2003



Ref.  
AGID2005

**Guide Stop drill**

Drill diameter : 2.0 ~ 5.9  
Drill Length : 7.0 ~ 13.0mm



Guide length : 13.5mm  
Drilling length : 7.0 ~ 13.0mm


**Drill Extension**



Ref.  
MDE150

**Cortical Bone Drill**


Crestal bone part has been removed to place the fixture more smoothly in Type I, II Bone




Ref. ARCD3500    Ref. ARCD4055    Ref. ARCD6080

**BONE Profiler**

To minimize the interference from Crestal bone as loading the ZrGEN abutment, [Use before fixture placement/ Recommended RPM value is 600~1000]



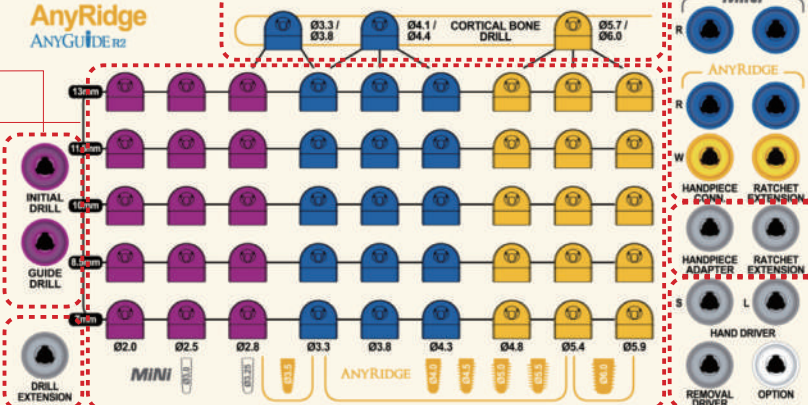
Ref.C AGBP40    Ref.C AGBP50    Ref.C ARBP60



Ref. MRW040S  
**RATCHET WRENCH**

Ø4.0    Ø5.0    Ø6.0  
**BONE PROFILER**

**AnyRidge ANYGUIDE R2**



Ø3.3 / Ø3.8    Ø4.1 / Ø4.4    Ø5.7 / Ø6.0  
**CORTICAL BONE DRILL**

Ø2.0    Ø2.5    Ø2.8    Ø3.3    Ø3.8    Ø4.3    Ø4.8    Ø5.4    Ø5.9

MINI    ANYRIDGE

HANDPIECE ADAPTER    RATCHET EXTENSION  
HANDPIECE ADAPTER    RATCHET EXTENSION  
HAND DRIVER    L    R  
REMOVAL DRIVER    OPTION

**Hex Driver**

: 1.2 hex driver (Short)  
: 1.2 hex driver (Long)  
: Abutment Remover driver




Ref. TCMHDSI200    Ref. TANMRD18    Ref. TCMHDL1200

**Handpiece Adapter**



Ref. AGHAS

**Ratchet Extension**

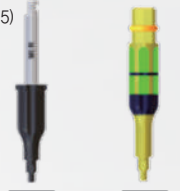


Ref. MRE400S

**Insertion instrument**


: Handpiece connector  
: Ratchet connector

► S - mini (ø3.0/ø3.5)



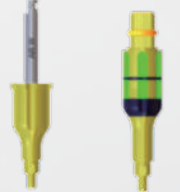
Ref. AGHCR17    Ref. AGRCR17

► R - AnyRidge Regular (ø3.5 ~ ø4.5)



Ref. AGHCR23    Ref. AGRCR23

► W - AnyRidge Wide (ø5.0 이상)



Ref. AGHCW23    Ref. AGRCW23



R2 surgical kit  
**AnyOne** Type

### Initial Drill

Drills for initial drilling pass

Initial Drill



Ref.  
AGID2003

Initial Guide Drill



Ref.  
AGIGD2005

### Guide Stop drill

Drill diameter : 2.0 ~ 5.9  
Drill Length : 7.0 ~ 13.0mm



Guide length : 13.5mm  
Drilling length : 7.0 ~ 13.0mm


### Drill Extension



Ref.  
MDE150

### Cortical Bone Drill

Crestal bone part has been removed to place the fixture more smoothly in Type I, II Bone



Ref. AODD39   Ref. AODD43   Ref. AODD48   Ref. AODD53   Ref. AODD63

### BONE Profiler

To minimize the interference from Crestal bone as loading the ZrGEN abutment. [Use before fixture placement/ Recommended RPM value is 600~1000]



Ref.C AGBP40   Ref.C AGBP50   Ref.C ARBP60



Ref. MRW40S  
RATCHET WRENCH

Ø4.0   Ø5.0   Ø6.0  
BONE PROFILER

### AnyOne ANYGUIDER2

MINI

DENSE DRILL

Ø3.5   Ø4.0   Ø4.5   Ø5.0   Ø6.0

INITIAL DRILL   GUIDE DRILL   DRILL EXTENSION

AnyOne

MINI

Ø2.0   Ø2.5   Ø2.8   Ø3.3   Ø3.6   Ø4.2   Ø4.8   Ø5.8

HANDPIECE ADAPTER   RATCHET ADAPTER

HAND DRIVER   RATCHET EXTENSION

OPTION

### Hex Driver

: 1.2 hex driver (Short)  
: 1.2 hex driver (Long)



Ref. TCMHDS1200   Ref. TCMHDL1200

### Handpiece Adapter



Ref. AGHAS

### Ratchet Extension




Ref. MRE400S

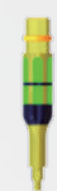
### Insertion instrument

: Handpiece connector  
: Ratchet connector

► S - mini (ø3.0/ø3.5)



Ref. AGHCR17




Ref. AGRCR17

► R - AnyOne Regular (ø3.5 ~ ø4.5)



Ref. AGHCR23




Ref. AGRCR23

► W - AnyOne Wide (ø5.0 이상)



Ref. AGHCW25



Ref. AGRCW25

## 2) 2nd Drilling

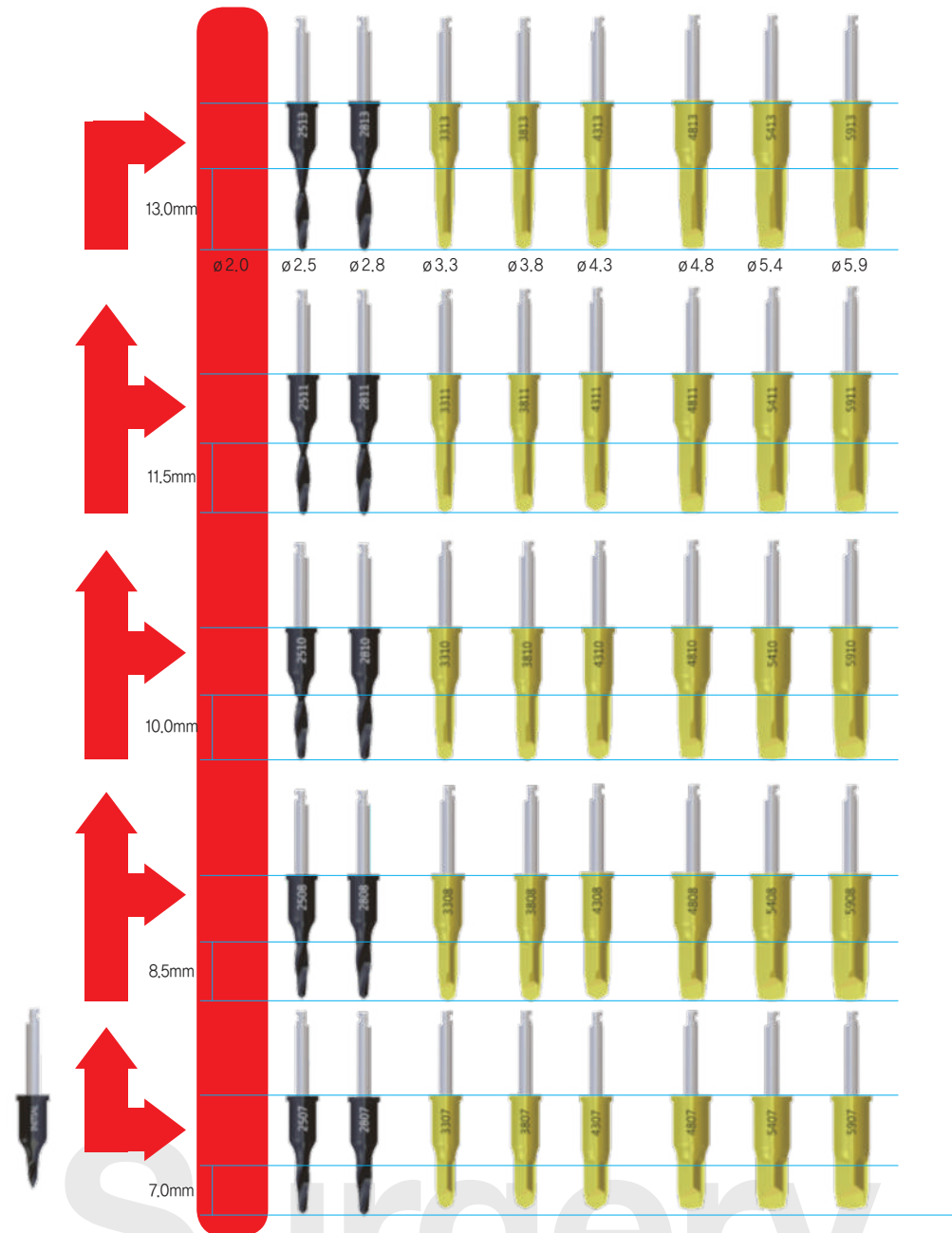
Start the drilling with drill diameter 2.0. Follow the sequence from 7.0mm of length to planned depth in order to make sure secure the drill pass

(Ex) 10.0mm drilling :

You can start with 2.0x7.0mm size drill to 2.0x8.5mm, 2.0x10.0mm.

### \* Tip for drilling precisely

- Place the guide part of the drill fully engaged to stent hole.
- Start with low speed to higher speed as drill speed.
- When drill goes down to full depth, make sure that the drill goes up and down two or three times to complete the pass.



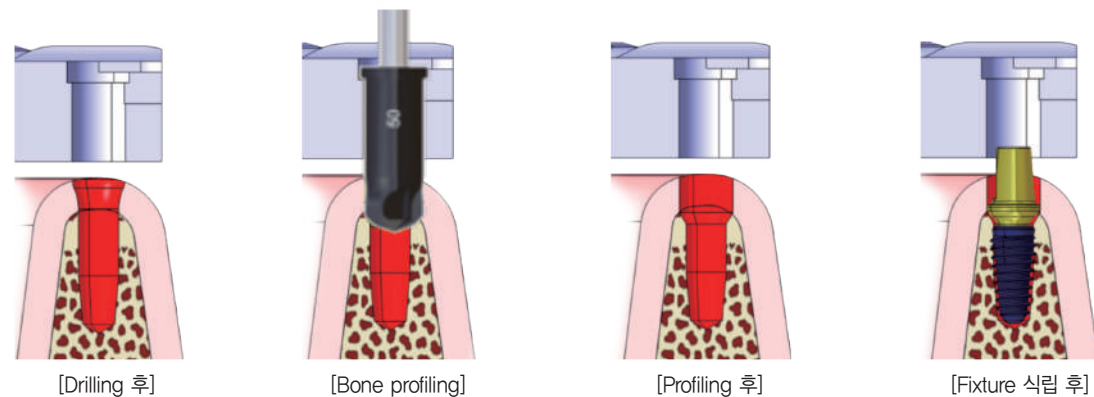
### 3) General Drilling

Finish up the drilling by fixture size.

[Recommended RPM value 1,000 ~ 1,200]

### 4) Bone profiling (Required)

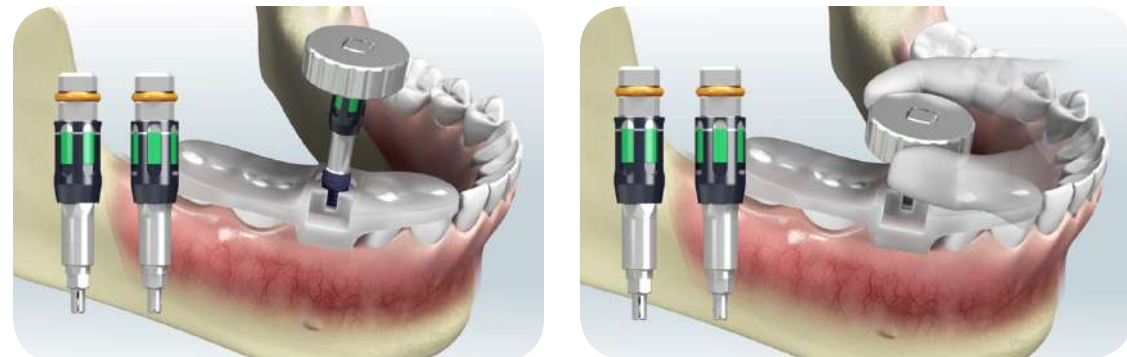
Bone profiling should be done in case that it's difficult to connect the customized abutment caused from the crestal bone pick interference after the drilling. Bone profiler can be controlled the depth by stent stopper as well. [Recommended RPM value is 600 ~ 800]



### 5) Fixture placement

Please pick up the fixture by hand ratchet connector and start the hand insertion. When nearly finished the placement, use handpiece connector to finish up the drilling within recommended torque value to maximum depth.

[Recommended Torque value : 45Ncm]





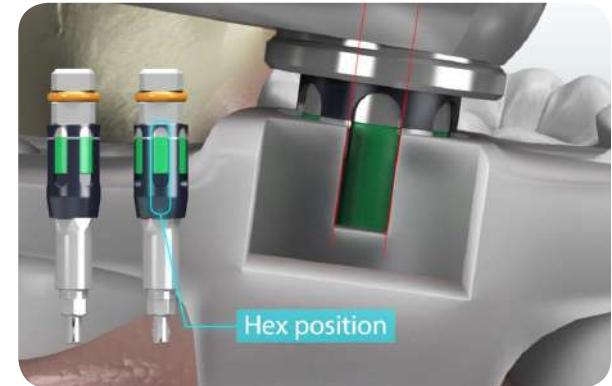
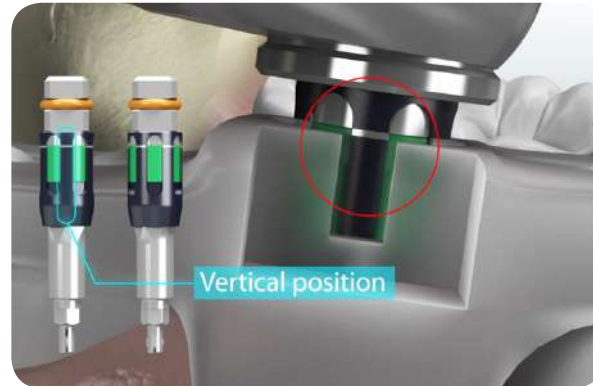
## 6) Apico-coronal and Hex control by using torque wrench

### ① Apico-coronal position

Depth of the fixture can be controlled by rotating the fixture with torque wrench until marking line of the ratchet connector goes to upper part of the stent window.

### ② Hex direction control

With proper apico-coronal position, please rotate the ratchet connector little bit more 1/6 circle clockwise to fully attached green colored column of stent window.



### 7) ZrGen Customized abutment connection

Unseal the package and connect the ZrGen Customized abutment in order.



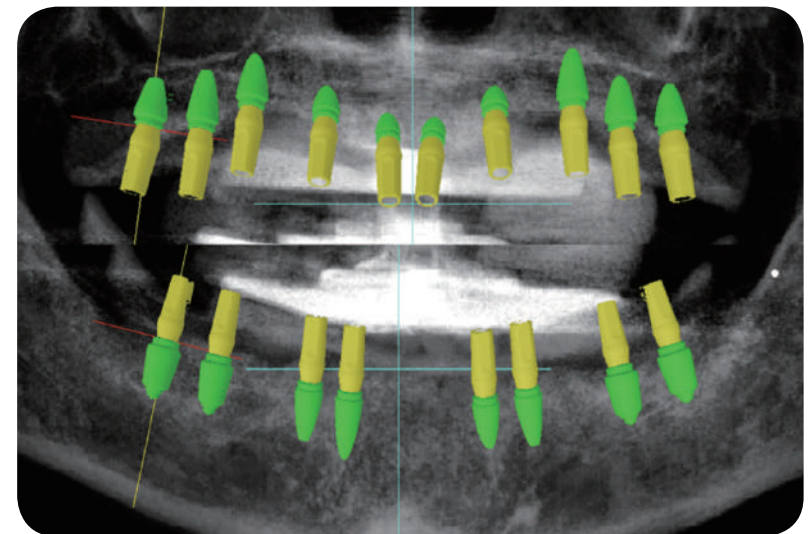
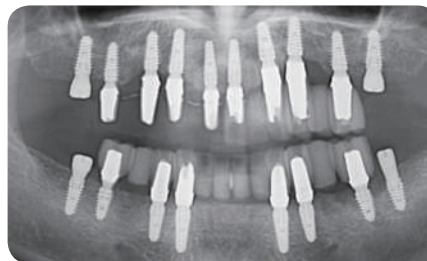
ZrGEN ►

R2 Stent ►



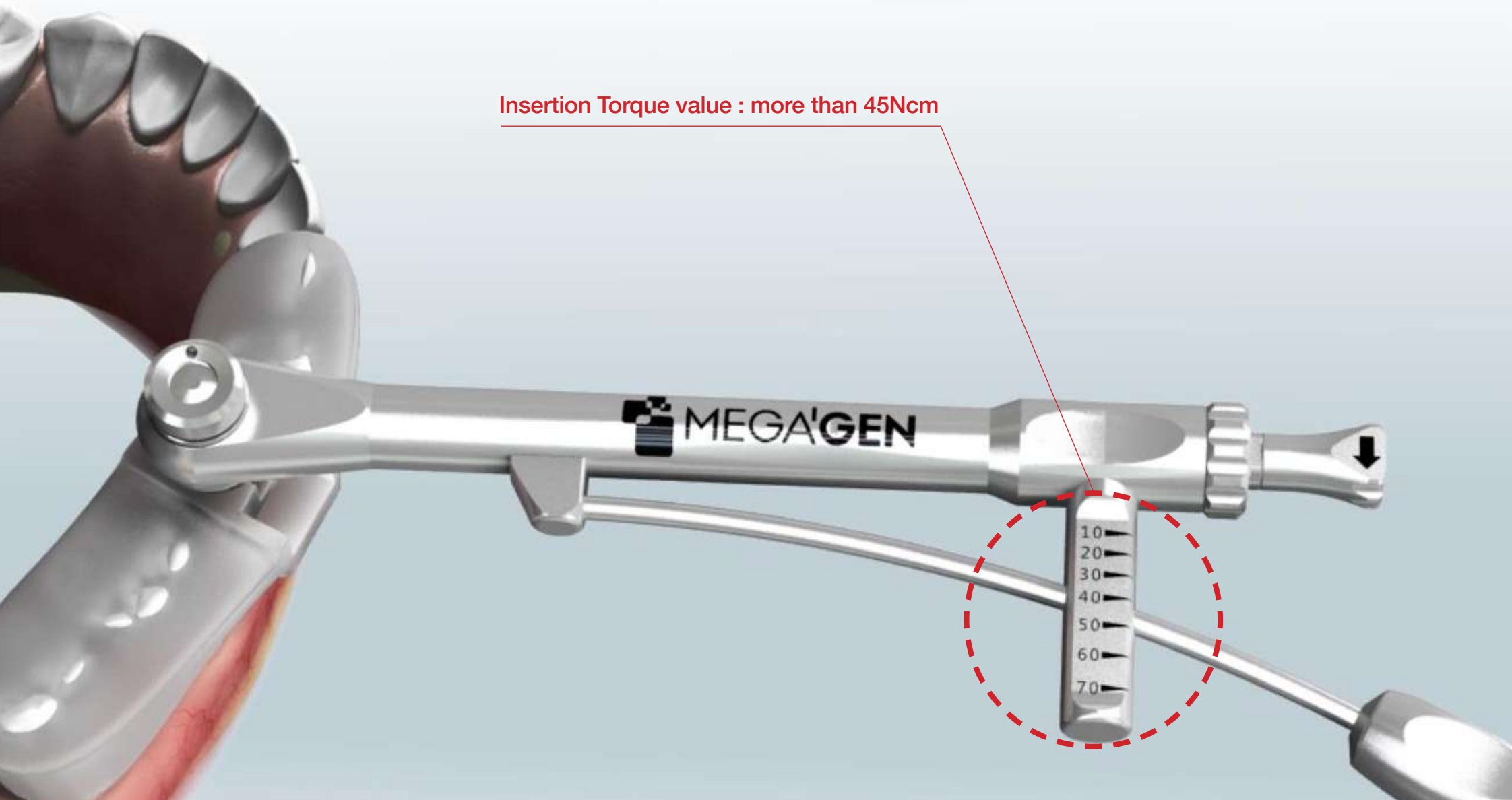
### 8) ZrGEN temporary connection

When ZrGen abutment done, deliver temporary crown and finish the surgery.



# ONE-DAY IMPLANT CONDITION

Recommended condition for ONE-DAY IMPLANT and immediate loading is at least 45 Ncm ITV(Insertion torque value), and 70 ISQ.



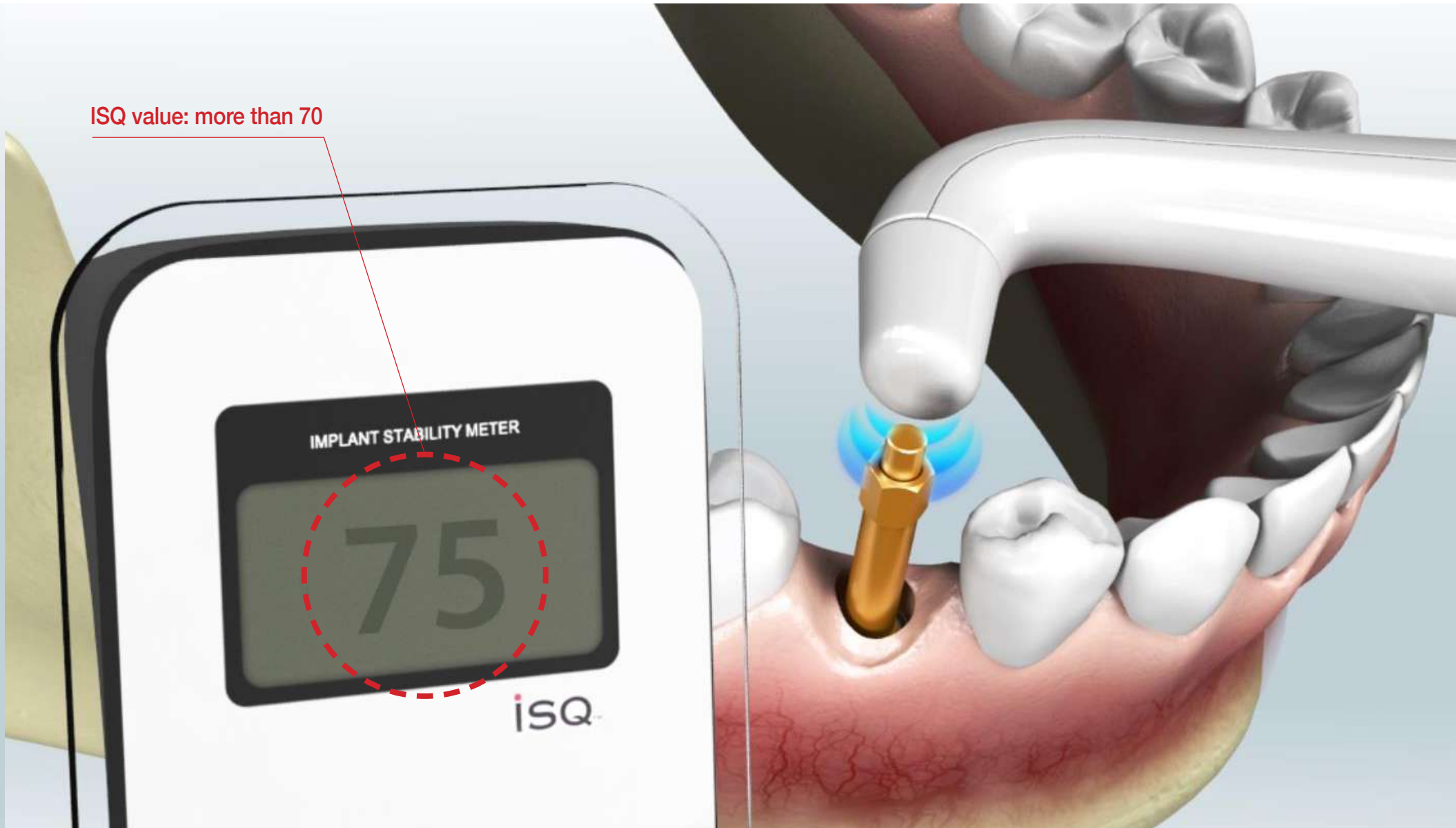


ISQ value: more than 70

IMPLANT STABILITY METER

75

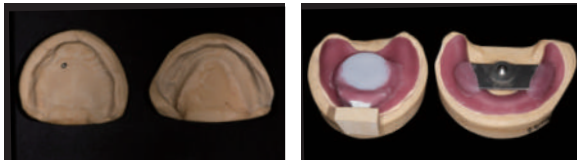
iSQ



# R2 Stent Seating of edentulous patients

## 1. R2 Stent of edentulous patients

R2 stent of edentulous patients can be seated by using anchor pin and tissue support.



[R2 Stent for edentulous patients]



[Seated stent in oral cavity]

## 2. R2 Stent fix

- 1) Seating jig will be provided for accurate positioning of R2 Stent.
- 2) Attach R2 stent to seating jig before inserting into oral cavity.



[R2 stent Engaging surface of edentulous patients]



[Antagonistic teeth surface]



[Stent attached to seating jig]



- 3) Positioning R2 stent and seating jig into the oral cavity.  
If the antagonistic teeth are denture, please fix the stent with denture in it.



- 4) Cut the cortical bone with 2.0mm drill on the anchor pin hole after patient bite the stent and seating jig strongly.



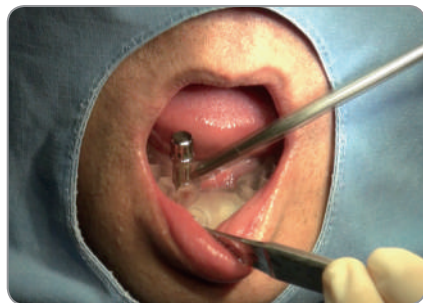
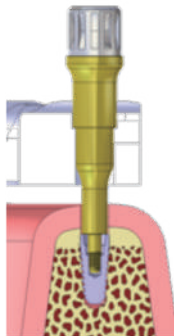
- 5) Tighten the anchor pin to anchor pin hole by using hand driver.

# R2 Anchor Kit


## 1. Stent Anchor Pin Use


After the placement of fixture, connect the stent anchor pin to gain additional support for the stability.

- Ex) Connect to the front of the fixture in Free end case.
- Ex) Stent seating after the removal of anchor pin in case of edentulous patients.




**Trox Tip** Ref.C AGTT80      **Handle** Ref.C TD





**Anchor kit**  
1110-7001


**Stent Anchor**



Regular core      Wide core

Ref.C AGSAR20      Ref.C AGSAW20

**Anchor Pin**



L 5.0mm      L 7.5 mm      L 10 mm

Ref.C TCMACP2015      Ref.C TCMACP2018      Ref.C TCMACP2020



# Open your Digital-eye!

## Digital-eye™

Color-coded analysis of the bone morphology enables you to identify invisible bony structure easily and to predict an optimal drilling sequence for strong initial stability of implant.

