



Bright Ideas in Dental Implants



Tri-Nex (Internal Tri-Nex) Surgical Sequence

Ø3.5 mm

Ø4.3 mm

Ø5.0 mm

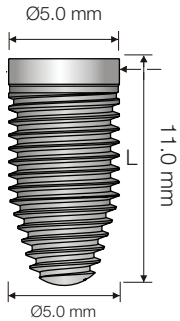
Ø6.0 mm

Tri-Nex Ø3.5 mm is available in 8.5, 10.5, 12, 13.5 and 16.5 mm lengths and feature a Ø3.5 mm prosthetic platform.

Tri-Nex Ø4.3 mm is available in 8.5, 10.5, 12, 13.5 and 16.5 mm lengths and feature a Ø4.3 mm prosthetic platform.

Tri-Nex Ø5.0 mm is available in 8.5, 10.5, 12, 13.5 and 16.5 mm lengths and feature a Ø5.0 mm prosthetic platform.

Tri-Nex Ø6.0 mm is available in 8.5, 10.5, 12, 13.5 and 16.5 mm lengths and feature a Ø6.0 mm prosthetic platform.



Design Features

The Tri-Nex Implant features an internal hexagon below the tri-lobe connection for implant insertion. This ensures the integrity of the tri-lobe at the time of restoration. The coronal walls of the 3.5 mm and 4.3 mm diameter tri-lobe are reinforced to further strengthen the implant. The reinforcement of the coronal wall creates a beveled edge that allows for “platform switching”. The Tri-Nex thread design extends to the apex of the implant to increase overall surface area and improve primary stability, in the case of immediate placement following extraction.

Surgical Sequence

(Ø5 mm x 13.5 mm Tri-Nex)

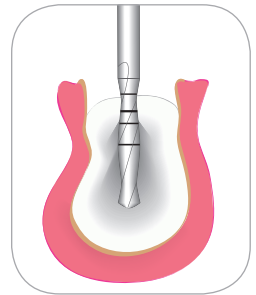
Step 1

Elevate a full-thickness mucoperiosteal flap and expose the alveolar bone. Utilize the Round Bur (D-RB) to initiate the osteotomy by perforating the cortical plate at the desired location.



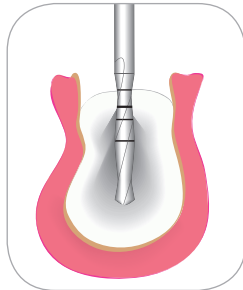
Step 4

The osteotomy site is further widened with a 3 mm Twist Drill (D-30T) to the required depth, at 1000-2000 rpm with copious irrigation.



Step 2

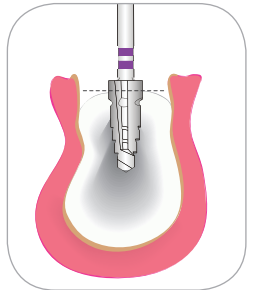
The 2 mm Twist Drill (D-20T) has markings at the length of 10.5, 11.5, 13.5 and 16.5 mm and should be inserted to the required depth, at 1000-2000 rpm with copious irrigation.



Step 5

In bone quality type 1 and 2, the osteotomy is then widened with a 3.5 mm x 13 mm Tapered Drill (D-L-35-13) to the required depth, at 500-800 rpm with copious irrigation.

Note: Depending on bone quality the tapered drills are inserted to about 1 mm beyond the last coronal notch to ensure excellent primary stability.



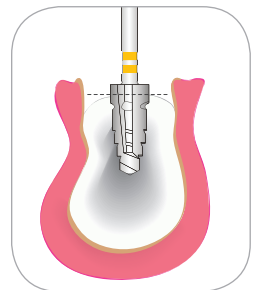
Step 3

It is recommended that the Direction Indicator (I-DI) be inserted after each Twist Drill to verify alignment with adjacent teeth/implants and the opposing occlusion. A radiograph should be taken at this point.



Step 6

Again, in bone quality type 1 and 2 the 4.3 mm x 13 mm Tapered Drill (D-L-43-13) is used to further widen the osteotomy to the required depth, at 500-800 rpm with copious irrigation.

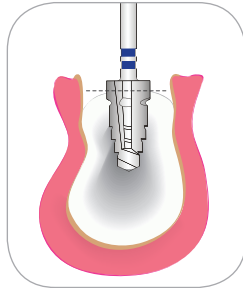




Step 7

At this point the osteotomy is finalized utilizing the 5.0 mm x 13 mm length Tapered Drill (D-L-50-10) to the required depth, at 500 to 800 rpm.

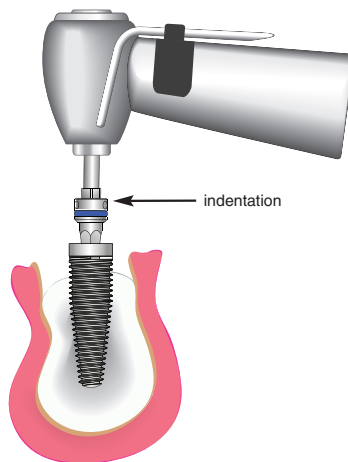
Note: Depending on bone quality the tapered drills are inserted to about 1 mm beyond the last coronal notch to ensure excellent primary stability.



Step 8

The implant is carefully removed from its sterile vial with the Insertion Tool (I-HLH-50M) fully engaged with the internal hex of the implant. It is then carried to the osteotomy site and inserted at 15-20 rpm at approximately 35 Ncm (depending on bone quality).

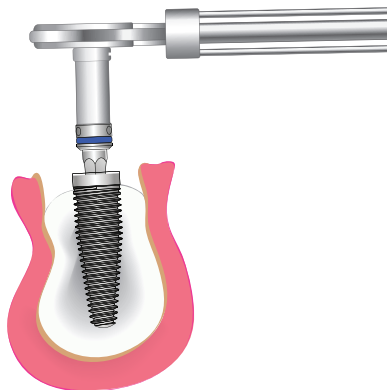
Note: The three indentations on the insertion tool must be aligned with the three lobes of the implant connection to ensure ease of restoration.



Step 9

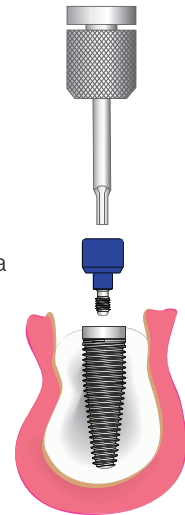
A Converter Wrench (I-WI-C-S) is inserted into the Ratchet Wrench (I-RATCHET-2) and connected to the Insertion Tool (I-HLH-50M) to fully seat the implant.

Important: Care must be taken that one lobe faces the buccal to ensure proper restoration.



Step 10

In a one-stage protocol, the Healing Abutment is placed with a Unigrip Driver (I-UGI) and the flap margins are positioned around the Healing Abutment in a tension-free manner.



Step 11

In a two-stage protocol, the Cover Screw is placed with a Unigrip Driver (I-UGI) and the flap margins are repositioned and sutured in a tension-free manner.



Considerations

Indications

The Tri-Nex Implant is intended to be implanted in the upper or lower jaw arches to provide support for a fixed or removable dental prosthesis in a single tooth, partially edentulous or full arch prosthesis. The Tri-Nex Implant further adds the option for immediate temporization on single and splinted multiple unit restorations when excellent primary stability is achieved and with appropriate occlusal loading, to restore masticatory functions.

Contraindications

Implant placement is contraindicated in patients with inadequate quality and/or quantity of bone, as well as patients with medical disorders unfit for general oral surgery procedures, e.g., blood dyscrasias, and bone dyscrasias. Additional contraindications include, but are not limited to, individuals with localized or systemic factors that could interfere with the healing process, e.g., infections, steroid therapy, smoking, and bruxism.

Note: Improper treatment planning and/or implant placement might result in implant failure and potential loss of the surrounding bone.

Healing Period

Any inadvertent loading of the implant should be avoided, especially during the first 6 weeks of healing to achieve optimal osseointegration.

Immediate Restoration

The Tri-Nex Implant may be immediately temporized on single and splinted multiple unit restorations when excellent primary stability is achieved and with appropriate occlusal loading. Whenever possible these restorations should be out of occlusion in both centric and eccentric positions. The patient should adhere to a soft diet and place minimal forces on these restorations for 6 to 8 weeks.

Delayed Restoration

The healing period is generally 3-4 months in the mandible and 4-6 months in the maxilla, however, healing periods for each patient vary.

After the appropriate healing period the Cover Screw is removed, the Healing Abutment is placed and the gingiva is slightly sutured around. The Healing Abutment remains in place for approximately 2 weeks. Impressions can then be taken and the prosthetic protocol may proceed.

Please consult the Southern Implants Prosthetic Manual.