

# NobelProcera® Angulated Screw Channel Abutment Zirconia For Nobel Biocare Internal Conical Connection



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### **Description**

Nobel Biocare's NobelProcera® ASC Abutment Zirconia is a customized dental abutment. The abutment attaches directly to the endosseous dental implants and provides a platform for restoration. The NobelProcera® ASC Abutment Zirconia is designed and made individually to fit the individual requirements for each patient. The NobelProcera® ASC Abutment Zirconia is made out of Zirconia and is delivered with a titanium adapter and an Omnigrip™ clinical screw.

Connection	Platform	Ncm
Nobel Biocare Internal Conical Connection	NP	35
	RP	35
	WP	35

Table 1 – NobelProcera® Angulated Screw Channel (ASC) Abutment Zirconia availability and (clinical) screw tightening torque

Important NobelProcera® ASC Abutment Zirconia and corresponding (clinical) Omnigrip™ screws require Omnigrip™ screwdrivers.

#### Intended Use

Nobel Biocare's NobelProcera® ASC Abutment Zirconia is a customized dental abutment. The abutment is seated and attached directly to the endosseous dental implant and provides a platform for restoration. The NobelProcera® ASC Abutment Zirconia is individually designed and manufactured to fulfill the clinical need of each patient.

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#### Indications for Use

The NobelProcera® Angulated Screw Channel Abutment is a premanufactured prosthetic component directly connected to endosseous dental implant and is intended for use as an aid in prosthetic rehabilitation.

#### Contraindications

Treatment of patients with high expected loading conditions, e.g. severe bruxism and/ or patients, which are known to have allergic reactions to any materials used during the procedure are contraindicated.

#### **Materials**

- ASC Abutments Zirconia: Yttria-stabilized Zirconiumoxide.
- Adapter for ASC abutment: Titanium alloy 90% Ti, 6% Al, 4% V.
- Clinical screws: Titanium alloy 90% Ti, 6% Al, 4% V.

#### Cautions

NobelProcera® ASC Abutment Zirconia NP is not recommended for posterior use.

# **Operating instructions**

It is strongly recommended that clinicians, new as well as experienced implant users, always go through special training before undertaking a new treatment method.

Nobel Biocare offers a wide range of courses for various levels of knowledge and experience. For more info please visit <a href="https://www.nobelbiocare.com">www.nobelbiocare.com</a>.

Working the first time with a colleague, experienced with the new device/treatment method, avoids eventual complications. Nobel Biocare has a global network of mentors available for this purpose.

# Instructions for dental laboratory

#### NobelProcera® CAD abutment design

Scan and import clinical situation into software

- Select and carefully mount appropriate NobelProcera® abutment position locator to facilitate the correct depth and orientation of the implant into the front-end software, prior to designing the abutment.
- Scan the clinical situation and the abutment position locators using a NobelProcera® scanner (or an approved NobelProcera® System), according to the tutorial found within the software.
- Once scanned, open the abutment CAD module and design your abutment, follow the instructions in the software tutorial, according to the patient's clinical needs whilst ensuring to provide adequate support for veneering material or crown retention.
- When designing the abutment it is recommended to avoid designs where the margin height is higher than 4 mm in combination with abutment body angulations above 30 degrees.

#### NobelProcera® Wax-up abutment design

Scan and import clinical situation into the software

- If optical wax is not used, the surface needs to be coated with a conventional optical scanning spray.
- Design abutment to provide adequate crown retention or support for veneering material.

#### Design recommendations

Although the minimum design shape is controlled by the software the following is a list of basic design recommendations:

- Height min. = 4 mm above implant platform to allow sufficient prosthetic retention.
- Height max. = 20 mm and diameter max 20 mm.
- Max. outer constraints are diameter
   16 mm and a height of 15 mm.
- Min and Max constraints are enforced by the software.
- Once abutment is designed, dispatch order to NobelProcera® production plant.

Please refer to Table 2 for further design recommendations.

Recommended max angulation degree		
Margin height	Recommendation for max upper body angulation	
0 mm	59°	
1 mm	51°	
2 mm	44°	
3 mm	37°	
4 mm	31°	
5 mm	27°	
6 mm	24°	
7 mm	22°	
8 mm	19°	

Table 2 – Design recommendations for the angulation of Zirconia abutment

Note Omnigrip™ laboratory screws (identified by blue colorcoding on entire screw) are available for temporary fixation of the abutments – used during the finalization of the restoration within the dental laboratory.

# Finalizing procedures NobelProcera® ASC Abutments Zirconia

- If necessary, make minor adjustments with diamond bur or flex disc with fine grit size under low pressure and with copious water irrigation.
- Proper surface finishing is mandatory if minor adjustments on the sintered frameworks were made.
- Sandblast using max. one bar of pressure utilizing 110 µm aluminum oxide, at an approximate distance of 10 mm.
- Clean in an ultrasonic unit.
- For single tooth screw-retained restorations it is possible to apply dental ceramics (veneering material) directly onto the abutment.

For long-term clinical success please follow the recommendations and handling instructions of the veneering material manufacturer.

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 If a cement retained crown or bridge is required, follow the current workflow for the separate fabrication of this restoration. Please refer to NobelProcera® Crown and Bridge Instructions For Use, and software tutorials, for the fabrication of this restoration.

### Clinical procedure

 Ensure that adapter is securely attached to the abutment, then insert the screw into the abutment, and place the assembly onto the implant. It is recommended to verify the final abutment seating using appropriate means.

Note Post placement of the abutment, if it is necessary to remove the abutment for whatever reason from its seating in the oral environment, it may occur that the abutment's metal adapter remains in the implant. If this is the case, the metal adapter can easily be removed with minimal force utilizing Nobel Biocare Abutment Retrieval Instrument Zirconia Conical Connection.

- Tighten the clinical screw in the abutment to 35 Ncm, using the corresponding Nobel Biocare torque wrench and Omnigrip™ Screwdriver.
- Once the abutment is inserted into the implant, its
  seating verified and the defined torque applied, using
  conventional procedures the screw access hole of the
  screw retained crown can be sealed. Alternatively if a final
  crown or bridge is to be cemented conventional procedures
  are to be followed and any excess cement removed.

Warning Because of the small size of prosthetic components, care must be taken that they are not swallowed or aspirated by the patient.

**Precautions/warning** The clinician is advised to provide regular patient follow up and to inform about good oral hygiene.

**Caution** Never exceed 35 Ncm prosthetic tightening torque for the abutment screw. Over tightening of abutment may lead to a screw fracture.

The ASC Abutments are delivered with Omnigrip<sup>TM</sup> screws (identified by blue color- coding on screw head) require the use of the Omnigrip<sup>TM</sup> screwdriver (identified by blue color-coding – blue ring on driver shaft). The Omnigrip<sup>TM</sup> screws and screwdriver and not compatible with the Unigrip<sup>TM</sup> system.

For additional information on restorative and dental laboratory procedures please consult the "Procedures & products" treatment guidelines available at www.nobelbiocare.com or request latest printed version from a Nobel Biocare representative.

To secure the long term treatment outcome, the practitioner/clinician is advised to provide comprehensive regular patient follow up after implant treatment and to inform about appropriate oral hygiene.

# Cleaning and sterilization instructions

This device is delivered non-sterile and must be cleaned and sterilized prior to use.

For USA: Seal single device in a pouch and steam sterilize at 270°F (132°C) for 3 minutes.

For outside USA: Seal single device in a pouch and steam sterilize at 132°C–135°C (270°F–275°F) for 3 minutes.

Alternative UK: Seal single device in a pouch and steam sterilize at  $134^{\circ}\text{C}-135^{\circ}\text{C}$  ( $273^{\circ}\text{F}-275^{\circ}\text{F}$ ) for 3 minutes.

Full set of recommended parameters are provided in "Cleaning & Sterilization Guidelines including MRI Information of Nobel Biocare Products" available at www.nobelbiocare.com/sterilization or request latest printed version from a Nobel Biocare representative.

Warning Use of non-sterile device may lead to infection of tissues or infectious diseases.

Caution This is a single use product that must not be reprocessed. Reprocessing could cause loss of mechanical, chemical and/or biological characteristics. Reuse could cause cross contamination.

# Magnetic Resonance (MR) Safety Information

Please note that this product has not been tested for heating or migration in the MR environment.

# Storage, Handling and Transportation

The product must be stored in a dry place in the original packaging at room temperature and not exposed to direct sunlight. Incorrect storage may influence device characteristics leading to failure.

## **Disposal**

Disposal of the device shall follow local regulations and environmental requirements, taking different contamination levels into account.

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# Manufacturer and **Distributor Information**

Manufacturer



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CE Mark for Class IIb Devices



Canada license exemption: Please note that not all products may have been licensed in accordance with Canadian law.

Prescription device: Rx only

Caution Federal law restricts this device to sale by or on the order of a licensed physician or dentist

# **Legal Statements**

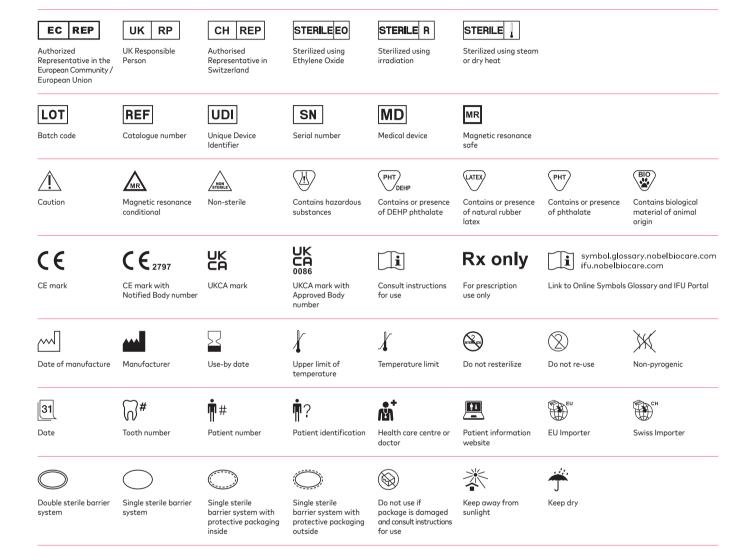
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# **Symbols Glossary**

The following symbols may be present on the device labeling or in information accompanying the device. Refer to the device labeling or accompanying information for the applicable symbols.



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