

Helpful Advice

To insure proper alignment ...

Schedule an appointment with the patient for a template try-in before the surgery date. Take an x-ray with the template in the patient's mouth to insure the alignment of the sleeve is where you want it. If the alignment is incorrect, break it apart by placing the template into 1/4 cup of boiling water, remove from hot water with forceps to carefully break the softened acrylic away from the guide sleeve with your fingers. Remake it using the correct offset and/or angled guide posts. Disinfect and retry the new template in the patient's mouth. Take another verifying x-ray.

Components Reusable ...

All guide sleeves and inserts are reusable and autoclavable. The autoclaving should be at 135 degrees C for at least 10 minutes. Regular guide sleeves are made of 303 stainless steel. The open guide sleeves are made of 410 stainless steel and can also be autoclaved, but they will show some signs of rusting unless you use some of the surgical milk* pre rinse to prevent rusting when autoclaved. Alumina ceramic guide sleeves are fired at 1600 degrees when they are made so they can also be autoclaved at 135 degrees C for 10 minutes with no problems. To reuse the guide sleeves, place the fabricated template in 1/4 cup of boiling water for 1 minute to soften the acrylic. Remove it from the hot water with forceps. Immediately and carefully break the softened acrylic away from the guide sleeve with your fingers.

Disinfecting and use ...

The surgical template cannot be autoclaved or it will melt. It should be placed in Betadine for 10 minutes at room temperature, then rinsed or placed in sterile water or saline for 3 seconds. Rinse once more prior to use. At the time of surgery the flap can be reflected to the palatal and the template placed on the teeth (the template will hold the palatal tissue out of the way.) A 3 mm hybrid drill is placed in the guide sleeve of the template. The hybrid drill is recommended because it determines precision guidance for the drill within the 3 mm guide sleeve and follows the 2 mm pilot hole in the same trajectory. After drilling approximately 2 mm into the bone, the template should be removed and the location of the pilot hole checked, to see that it is located where it should be in relation to the mesio-distal and bucco-lingual dimension of the alveolar crest.

Complications ...

If there is a concavity on the buccal or lingual aspect below the crest of bone, a perforation may occur. If this happens, one has to decide whether or not to change the angle of the drill which would change the angle of the fixture, thus changing the long axis of the implant body and position of the head of the implant. The original orientation can be followed, but augmentation may be necessary. The area of perforation may be augmented with a bone graft and gortex membrane. However, if the inadequacy is too severe, the ridge may have to be augmented, the site closed, and the surgeon may have to return at a later date to place the implant.

Important note when ordering Guide Sleeve Inserts ...

A drill manufacturer's labeled size may not be the actual size of the drill. To insure proper fit with any guide sleeve insert, measure the actual outside diameter (od) of the drill shaft, then order the next size larger guide sleeve insert to prevent binding of the drill.

Alternative applications ...

Consider GUiD Right Kits, which contain a variety of insert sizes, to further insure accuracy of the drill position, which will ultimately result in more accurate implant placement.

Speak to a consultant...

For advice call 585.924-3190 / 800.314.0065

* *Surgical Milk is available through Henry Schein*
Gallon - \$46.99 (8893280) 32oz. - \$20.99 (9972049)