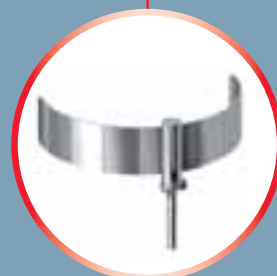


Procedures & Products – Powered by Procera®

# All-on-4



*First from Nobel Biocare.  
NobelPerfect<sup>®</sup>, (NP, RP, WP), NobelDirect<sup>®</sup> (NP, RP, WP), Brånemark System<sup>®</sup>, NobelReplace<sup>™</sup> and NobelSpeedy<sup>™</sup> Implants. A complete assortment with **FDA clearance for Immediate Function<sup>™</sup>** in all single, partial and fully edentulous restorations in the mandible and maxilla.*

Nobel Biocare AB and all production units are certified according to the Environmental Management System ISO 14001.

The procedures described herein must only be performed using components and instruments provided by Nobel Biocare.

Nobel Biocare has published disclaimers relating to patient data and purchasing conditions. The latest versions of these disclaimers are available on the NobelGuide<sup>™</sup> area on the Nobel Biocare Extranet. Please ensure that you understand and accept these disclaimers.

Nobel Biocare reserves the right to make any necessary alterations to the methods and procedures stated in this manual.

Some products may not be available in all markets. Please contact your local Nobel Biocare office for current product assortment and availability.

Nobel Biocare is in compliance with  
ISO 13485:2003 and Council Directive 93/42/EEC  
Canadian Medical Devices Regulation



**For USA only:** Federal law restricts this device to sale by or on the order of a licensed dentist or physician.  
All products are subject to change without notice.

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The All-on-4 and the All-on-4 with NobelGuide™ clinical solutions were developed by Dr. Paulo Maló at CM Clinica Maló in Lisbon, Portugal.

**Congratulations! You have made an excellent choice. Welcome to the Nobel Biocare family.**

The All-on-4 clinical solution has been developed to maximize the use of available bone and to allow for Immediate Function™. Using only four implants in edentulous jaws, the solution takes advantage of the benefits of tilting the posterior implants to provide a secure and optimal prosthetic support for a prosthetic bridge, even with minimum bone volume.

**The All-on-4 clinical solution can be performed in two ways:**



**Flap**

**Flapless**



**All-on-4** using conventional flap procedure with traditional planning and a standardized All-on-4 Guide for predictable and optimal positioning of the implants.

**All-on-4 with NobelGuide™** using flapless technique, computer-based planning and a customized Surgical Template to correctly drill and position the implants.

*For details continue to next page.*

*For details continue to page 13.*



## Quick Start

### Implants you can use for All-on-4:

#### *Parallel implants:*

NobelSpeedy™ Groovy  
 NobelSpeedy™ Replace  
 Brånemark System® MkIII Groovy  
 NobelReplace™ Straight Groovy  
 Brånemark System® MkIII, TiUnite®  
 Brånemark System® MkIV, TiUnite®  
 Replace® Select Straight

#### *Tapered implants:*

NobelReplace™ Tapered Groovy  
 Replace® Select Tapered

### Other items you will need:

- All-on-4 Guide
- Products needed for the restorative procedure are located in the Product Catalog found at the back of this manual.

### Manuals:

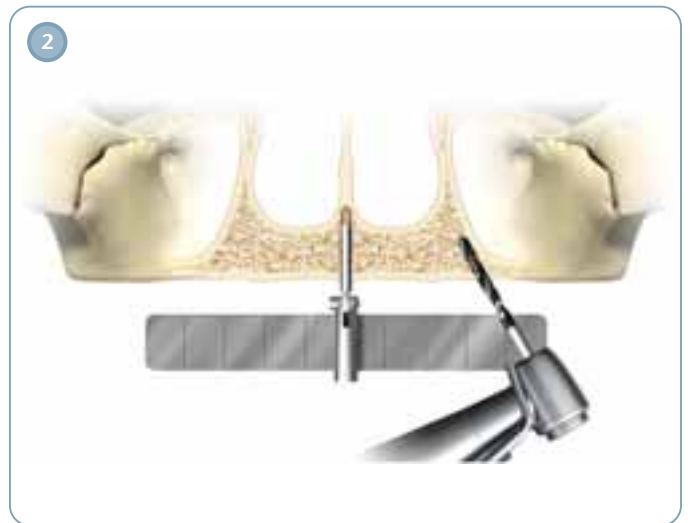
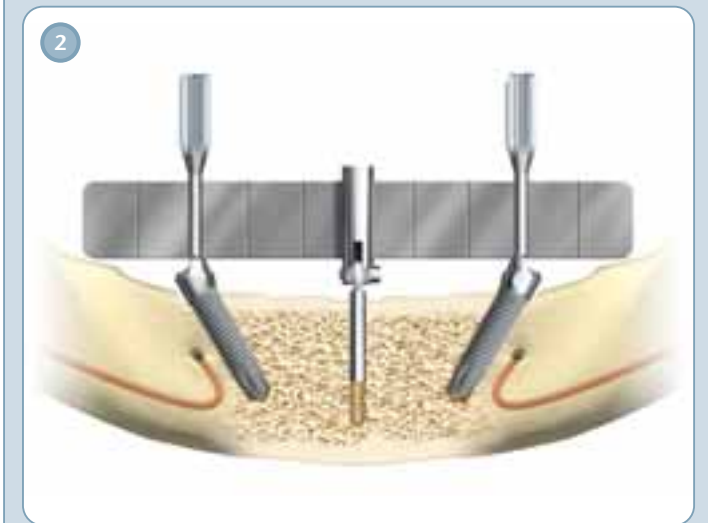
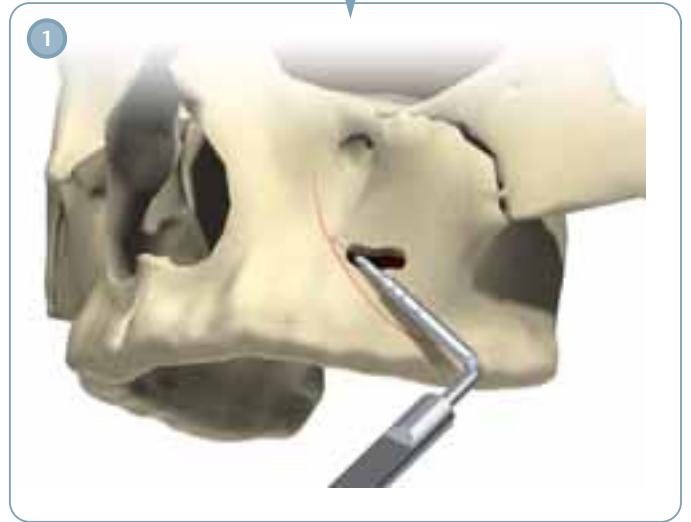
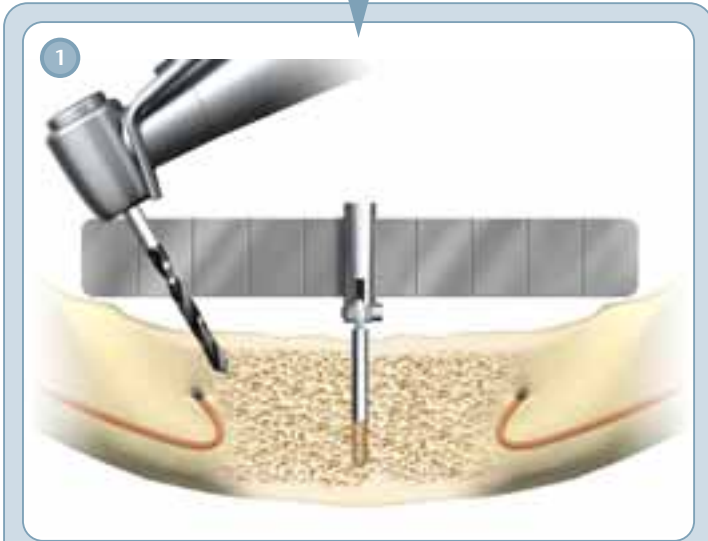
For a full description of the implant placement, prosthetic procedures and all instruments needed, please refer to the relevant manual for the selected prosthetic components and/or implant system.



All-on-4

Quick Start – Mandible

Quick Start – Maxilla



## Treatment Planning

The All-on-4 clinical solution has been developed to maximize the use of available bone and to allow for Immediate Function™. When planning an All-on-4 treatment using a flap technique, be sure to consider the following factors:

### General Considerations:

- Ability to achieve primary implant stability (35 – 45 Ncm insertion torque).
- No severe parafunctions.
- Indicated for totally edentulous maxilla with a minimum bone width of 5 mm and a minimum bone height of 10 mm from canine to canine.
- Indicated for totally edentulous mandible with a minimum bone width of 5 mm and minimum bone height of 8 mm in between the mental foramina.
- To diminish the cantilever, tilt the posterior implants to a maximum of 45°.
- If the angulation is 30° or more, it is **necessary** to splint the tilted implants.
- For tilted posterior implants, plan the distal screw access holes to be located at the occlusal face of the 1st molar, 2nd pre-molar or 1st pre-molar.
- The All-on-4 treatment does not require a wider opening of the mouth than a normal straight position of the implants due to the angulation of the posterior implants.
- If there are extraction sites, clean them thoroughly. It is advisable to place implants between extraction sockets.

### Specific Considerations – Implants:

- If possible, the posterior implants should be  $\varnothing$  4.0 or  $\varnothing$  4.3 mm. **Note:** The 30° Multi-unit Abutment is only available for Regular Platform (RP). The 17° Multi-unit Abutment is available for Narrow Platform (NP) and Regular Platform (RP)
- When placing posterior implants with an internal connection, make sure that one of the tri-channel lobes on the implant is pointing distal or slightly buccal.



### Specific Considerations – Prosthetics:

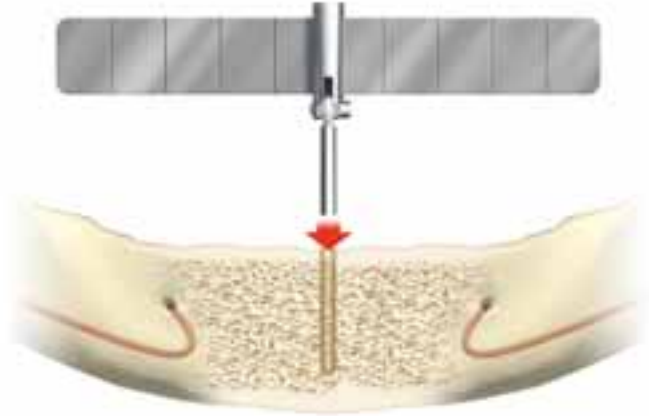
- No extensions over one-tooth on each side for the immediate all-acrylic bridge, which should have a maximum of 12 teeth.
- If the patient's removable prosthesis is in good condition, it may be used to fabricate the immediate all-acrylic bridge.
- For proper esthetics and function, the final bridge should have 12 teeth.

## Step-by-Step Clinical Procedures for an Edentulous Mandible

The following step-by-step instructions outline the main procedures used to treat totally edentulous jaws using the All-on-4 treatment. **Note:** The images show NobelSpeedy™ Groovy RP implants.

### 1. Position All-on-4 Guide

- After making an incision for flap elevation, make an osteotomy of approximately 10 mm in the midline using a  $\varnothing$  2 mm Twist Drill.
- Place the **All-on-4 Guide** in the mid-line osteotomy.

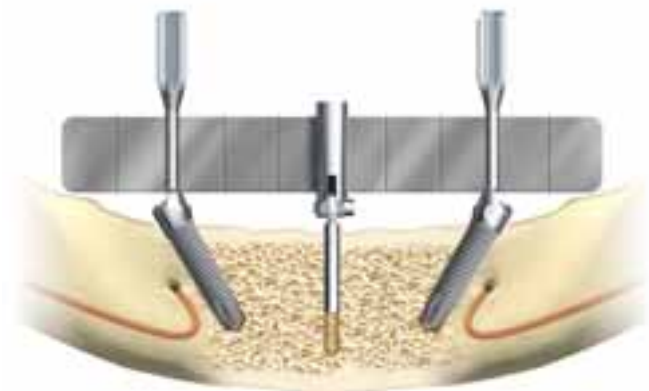
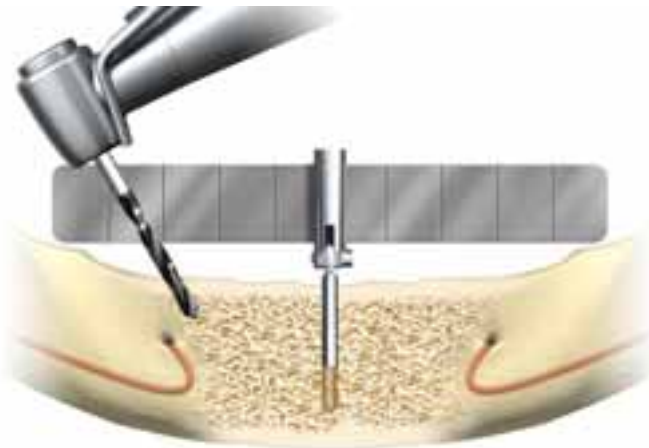


### 2. Posterior Site Preparation

- Drill to appropriate depth, using a  $\varnothing$  2 mm Twist Drill tilted to a maximum angle of 45°.

**Note:** It is important to identify the mental foramen and exiting inferior dental nerve. The final position of the implant should be in front of the foramen avoiding the nerve loop.

- Check for correct angulation with the **All-on-4 Guide**.
- Enlarge the site according to the type of implant used and the density of the bone. Install an implant.
- Use a **Bone Mill** to correctly seat the abutment, if applicable (**Note:** Only intended for Brånemark System® and NobelSpeedy™ Groovy implants).
- Place a **30° Multi-unit Abutment**. Tighten to 15 Ncm using the **Unigrip™ Screwdriver Machine** and **Manual Torque Wrench Prosthetic**.
- Perform the same procedure for the opposite posterior site.

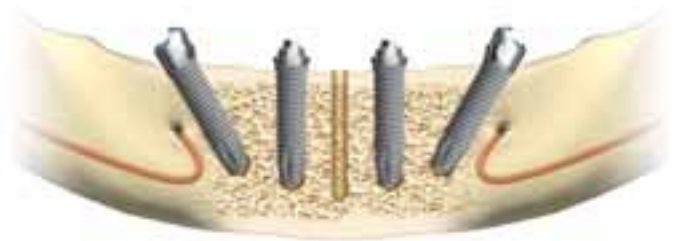




## Step-by-Step Clinical Procedures for an Edentulous Mandible

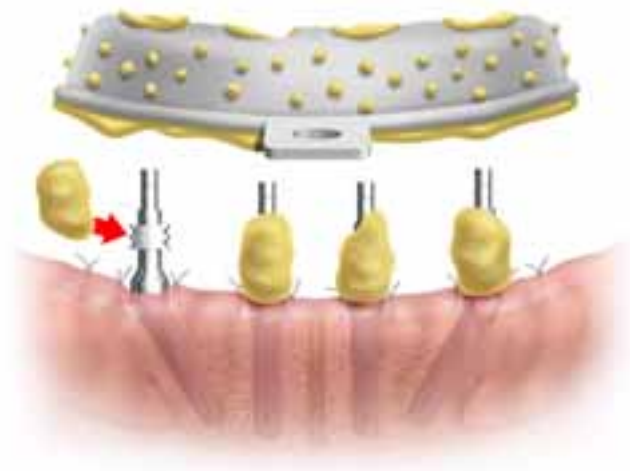
### 3. Anterior Site Preparation

- Prepare two anterior sites, as far apart from each other as possible, allowing a safe distance from the apex of the posterior implants.
- Use a **Bone Mill** to correctly seat the abutments, if applicable. (*Note: Only intended for Brånemark System® and NobelSpeedy™ Groovy implants*).
- Place straight or 17° **Multi-unit Abutments** and allow for proper emergence of the prosthetic screw.
- Tighten 17° **Multi-unit Abutments** to 15 Ncm using the **Unigrip™ Screwdriver Machine** and **Manual Torque Wrench Prosthetic**.
- Tighten straight **Multi-unit Abutments** to 35 Ncm using the **Screwdriver Machine Multi-unit** and **Manual Torque Wrench Prosthetic**.



### 4. Take an Impression

- After suturing, connect the **Multi-unit Impression Copings Open Tray** to the **Multi-unit Abutments**.
- Take an impression using silicone soft putty material and a customized open tray.



## Step-by-Step Clinical Procedures for an Edentulous Mandible

### 5. Laboratory Procedure

- In the laboratory, a model and a restoration are made.
- For more information, see the Step-by-Step Laboratory Procedure.



### 6. Connect the Bridge

- Place chlorhexidine gel inside the copings and connect the all-acrylic bridge to the abutments.
- Tighten to 15 Ncm using a **Unigrip™ Screwdriver Machine** and **Manual Torque Wrench Prosthetic**.
- Check the occlusion.
- After a sufficient healing period, follow established prosthetic procedures for the final restoration, preferably a Procera® Implant Bridge with individualized Procera® Ceramic Crowns.



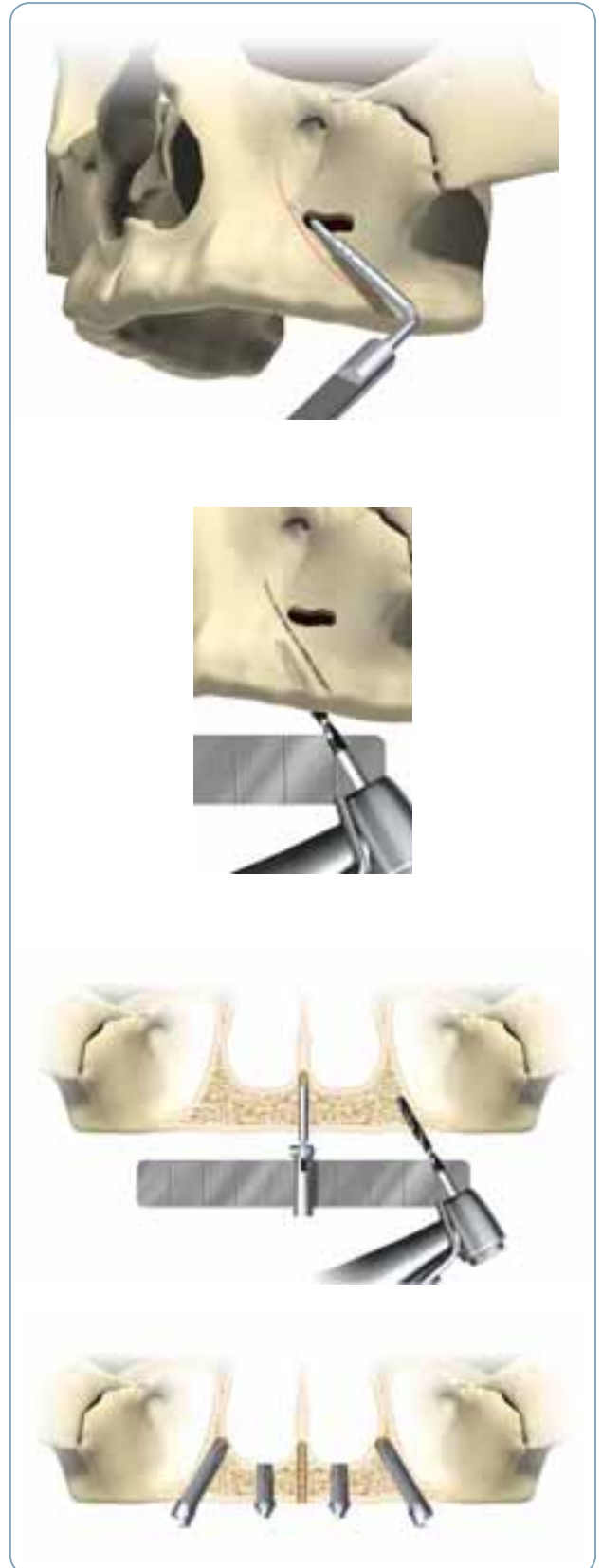
**Note:** The bridge can also be made by converting the existing denture into a bridge. For further information, please visit our website [www.nobelbiocare.com](http://www.nobelbiocare.com) and search for All-on-4.

## Step-by-Step Clinical Procedures for an Edentulous Maxilla

When performing an All-on-4 in the maxilla, use the following steps for the posterior sites in addition to those for the posterior sites in the mandible.

### Posterior Site Preparation

- Identify the anterior wall of the maxillary sinus by drilling a small opening on the lateral wall of the maxilla where the anterior wall should be expected.
- Explore the wall with a probe, extend the window if necessary.
- Mark with the surgical marker the position of the anterior wall.
- Start the site preparation as posterior as possible allowing approximately 4 mm from the sinus wall.
- Incline the drill (not more than 45°) as far back as possible to minimize the cantilever.



## Step-by-Step Laboratory Procedures

### Fabricate the All-Acrylic Bridge

- Fabricate a soft tissue model using **Abutment Replicas Multi-unit**.
- Use **Guide Pins** or **Lab Screws** to place **Temporary Copings Multi-unit** on the replicas.
- Adjust the copings if needed.
- Fabricate an all-acrylic bridge using a high-density acrylic.

Remember to reinforce the weak points of the prosthesis around the cylinders with more acrylic.

*Note: If possible, a tooth set-up should be tried in the patient's mouth before finalizing the bridge.*



**Note:** The bridge can also be made by converting the existing denture into a bridge. For further information, please visit our website [www.nobelbiocare.com](http://www.nobelbiocare.com) and search for All-on-4.

## Quick Start

The All-on-4 with NobelGuide™ enables you to use CT scan data as the basis for surgical planning in a 3D computer environment. From your computer-based planning, Nobel Biocare provides you with a Surgical Template to guide you safely during flapless surgery.

To take advantage of Immediate Function™ and place a highly esthetic prosthetic reconstruction at the time of surgery, non-engaging 30° Multi-unit Abutments RP are used for the posterior implants. The dental laboratory fabricates an acrylic jig for transferring the ultimate position of the angled abutment from the model to the patient.

### Software you will need for All-on-4 with NobelGuide™:

Procera® Software for Computer-Based Planning

### Implants you can use for All-on-4 with NobelGuide™:

#### *Parallel implants:*

NobelSpeedy™ Groovy  
 NobelSpeedy™ Replace  
 Brånemark System® Mk III Groovy  
 NobelReplace™ Straight Groovy

#### *Tapered implants:*

NobelReplace™ Tapered Groovy

### Other items you will need:

- Surgical Template ordered in Procera® Software
- Products needed for the restorative procedure are located in the Product Catalog found at the back of this manual.

### Manuals:

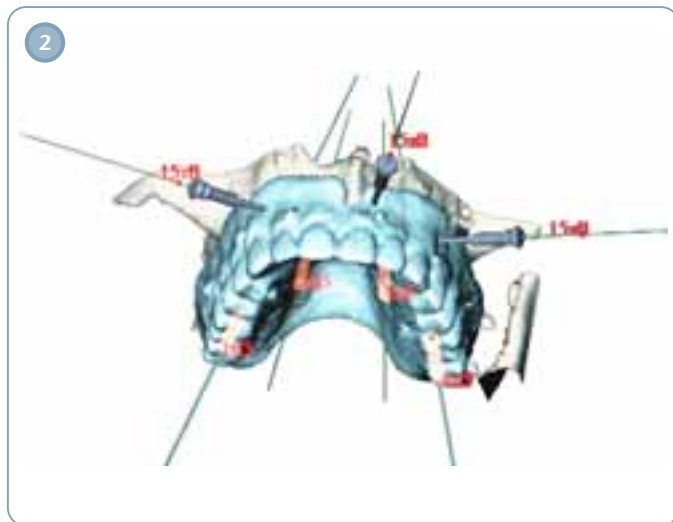
- NobelGuide™ Concept Manual

For a full description of the implant placement, prosthetic procedures and all instruments needed, please refer to the relevant manual for the selected prosthetic components and/or implant system.



# All-on-4 with NobelGuide™

## Quick Start All-on-4 with NobelGuide™



## Treatment Planning

The All-on-4 clinical solution has been developed to maximize the use of available bone and allow Immediate Function™. When planning an All-on-4 with NobelGuide™ treatment, be sure to consider the following factors:

### General Considerations:

- When using NobelGuide™ computer-based planning, a CT scan using a Radiographic Guide is required. Please refer to the NobelGuide™ Concept Manual for details.
- Ability to achieve primary implant stability (35–45 Ncm insertion torque).
- No severe parafunctions.
- Indicated for totally edentulous maxilla with a minimum bone width of 5 mm and a minimum bone height of 10 mm from canine to canine.
- Indicated for totally edentulous mandible with a minimum bone width of 5 mm and minimum bone height of 8 mm in between the mental foramina.
- The sites must be fully healed.
- To diminish the cantilever, tilt the posterior implants to a maximum of 45°.
- If the angulation is 30° or more, it is **necessary** to splint the tilted implants.
- For tilted posterior implants, plan the distal screw access holes to be located at the occlusal face of the 1st molar, 2nd pre-molar or 1st pre-molar.
- The All-on-4 treatment does not require a wider opening of the mouth than a normal straight position of the implants due to the angulation of the posterior implants. However, as with all NobelGuide™ treatments, it is important to compensate for the extra height needed for NobelGuide™ components and instruments.

### Specific Considerations – Implants:

- If possible, the posterior implants should be Ø 4.0 or Ø 4.3 mm. **Note:** *The 30° Multi-unit Abutment Non-Engaging is only available for the Regular Platform (RP).*

### Specific Considerations – Prosthetics:

- No extensions over one-tooth on each side for the immediate all-acrylic bridge, which should have a maximum of 12 teeth.
- If the patient's removable prosthesis is in good condition, it may be used to fabricate the immediate all-acrylic bridge.
- For proper esthetics and function, the final bridge should have 12 teeth.

## Checklist Prior to Surgery

- Correct Implants, Guided Components and Instruments
- Operation Specification
- Surgical Template
- Surgical Index
- Prosthetic Components and Instruments



- The jig construction for placing 30° Multi-unit Abutments Non-Engaging, which includes:
  1. Impression Coping Open Tray Multi-unit
  2. Guide Pin
  3. Abutment Holder
  4. Jig Stabilizer
  5. 30° Multi-unit Abutment Non-Engaging
  6. Abutment Screw

For more information on how to make the jig, see page 21 for the Step-by-Step Laboratory Procedure.

For instructions on cleaning the jig, see page 26.





## Step-by-Step Clinical Procedures for an Edentulous Maxilla

The following step-by-step instructions outline the main procedures for using NobelGuide™ to treat totally edentulous jaws using the All-on-4 clinical solution. **Note:** The images show NobelSpeedy™ Groovy RP implants.

### 1. Place Implants

- Follow the detailed surgical procedures for **All Teeth Missing** found within the specific NobelGuide™ Procedures & Products for the selected implant system.
- Place four implants according to the computer-based planning.
- Remove the **Surgical Template**.



### 2. Connect Multi-unit Abutments

- Use a **Bone Mill** to correctly seat the abutments, if applicable.
- Note: Only intended for Brånemark System® Groovy and NobelSpeedy™ Groovy implants.*
- Place the correct size and sterilized straight **Multi-unit Abutments** in the two anterior sites.
- Tighten to 35 Ncm using the **Screwdriver Machine Multi-unit** and **Manual Torque Wrench Prosthetic**.



### 3. Place Jig to Connect 30° Multi-unit Abutments

- Place the disinfected jig on the corresponding anterior abutment and posterior implant.
- Verify correct seating of the jig and tighten the **Guide Pin** to the anterior abutment.



### 4. Connect 30° Multi-unit Abutment

- Connect the 30° **Multi-unit Abutment** using a **Unigrip™ Screwdriver** and tighten manually.



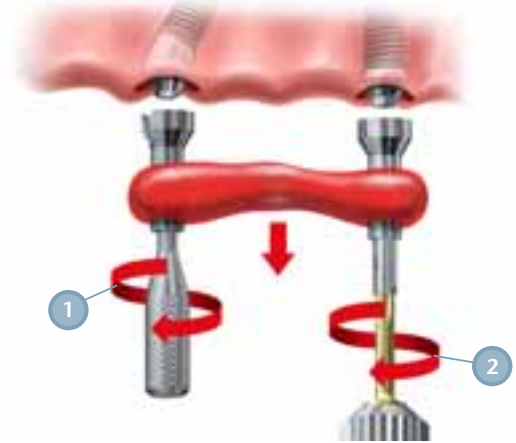
## Step-by-Step Clinical Procedures for an Edentulous Maxilla

### 5. Disconnect the Jig

- Disconnect the jig by unscrewing the **Abutment Holder (1)** and **Guide Pin (2)**.

- Repeat the entire procedure for the opposite side.

*Note: Never unscrew the **Abutment Holder** connected to the **30° Multi-unit Abutment** before completely tightening the posterior angulated abutment.*



### 6. Final Tightening of the 30° Multi-unit Abutments

- Tighten the **30° Multi-unit Abutment** to 15 Ncm using the **Unigrip™ Screwdriver Machine** and **Manual Torque Wrench Prosthetic**.



### The All-Acrylic Bridge

The all-acrylic bridge is delivered with **Temporary Copings Multi-unit** in three implant positions. There is an extended hole located in one of the posterior positions.



## Step-by-Step Clinical Procedures for an Edentulous Maxilla

### 7. Connect Temporary Coping

- Connect the bridge using three prosthetic screws and manually tighten using a **Unigrip™ Screwdriver**.
- Place a **Temporary Coping Multi-unit** into the extended hole and manually tighten using a **Unigrip™ Screwdriver**.
- Tighten all the screws to 15 Ncm using a **Unigrip™ Screwdriver Machine** and **Manual Torque Wrench Prosthetic**.
- Use tooth color flow composite or acrylic to secure the Temporary Coping to the bridge making sure to keep the screw access hole free from composite.



### 8. Reinforce Temporary Coping Multi-unit

- Disconnect the bridge.
- Fill up the gap between the **Temporary Coping** and the bridge with self-curing acrylic.
- Adjust and polish.



## Step-by-Step Clinical Procedures for an Edentulous Maxilla

### 9. Connect the Bridge

- Place chlorhexidine gel inside the copings and connect the all-acrylic bridge to the abutments.
- Tighten to 15 Ncm using the **Unigrip™ Screw-driver Machine** and **Manual Torque Wrench Prosthetic**.
- Check the occlusion.
- Follow established prosthetic procedures for the final restoration after a sufficient healing period, preferably using a Procera® Implant Bridge with individualized Procera® Ceramic Crowns.



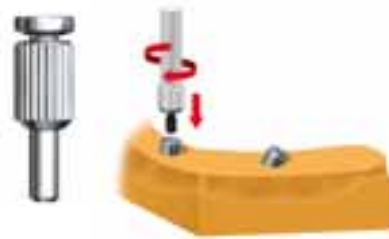
## Step-by-Step Laboratory Procedures – Fabrication of Model and Abutment Connection

**1. Fabricate a Stone Model and Surgical Index**

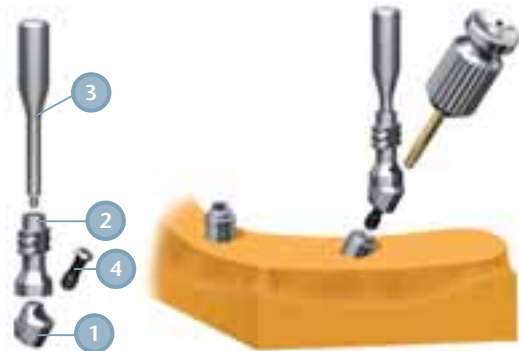
- Fabricate a stone model using the **Surgical Template** as described in the NobelGuide™ Concept Manual.
- Mount the model in the articulator.
- Fabricate a **Surgical Index**.
- Put the **Surgical Template** back in the UV-protective plastic bag that it was delivered in.

**2. Connect straight Multi-unit Abutment**

- Place the selected straight **Multi-unit Abutment** on the anterior implant replica. Remove the plastic holder.
- Tighten with the **Screwdriver Manual Multi-unit**.

**3. Place 30° Multi-unit Abutment Non-Engaging**

- Place a **30° Multi-unit Abutment Non-Engaging (1)** including the **Jig Stabilizer (2)**, **Abutment Holder (3)** and **Abutment Screw (4)** on a posterior **Implant Replica**.
- Align the **Abutment Holder** with the long axis of the straight **Multi-unit Abutment**.
- Tighten the **Abutment Screw** with a **Unigrip™ Screwdriver Manual**.

**4. Disconnect Jig Stabilizer**

- Disconnect the **Jig Stabilizer** by unscrewing the **Abutment Holder**.

Repeat Steps 2–4 for the opposite side.

*Note: Once the abutments are tightened in their final position, they must not be loosened until after the jig is fabricated.*



## Step-by-Step Laboratory Procedures – Fabrication of the All-Acrylic Bridge

### 1. Place Temporary Copings Multi-unit

- Use **Guide Pins** or **Lab Screws** to place **Temporary Copings Multi-unit** on the two anterior and one of the posterior abutments.
- Adjust the copings if needed.



### 2. Fabricate the All-Acrylic Bridge

- Fabricate an all-acrylic bridge using a high-density acrylic.
- Remember to reinforce the weak points of the prosthesis around the cylinders with more acrylic.



### 3. Drill Hole Through Bridge

- Drill through the bridge where the fourth **Temporary Coping Multi-unit** should be positioned. Make sure that the hole is larger than the coping.



### 4. Try in Coping

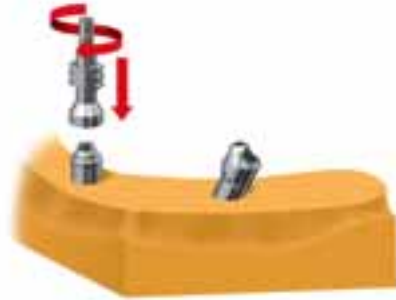
- Try in the coping and adjust if necessary.



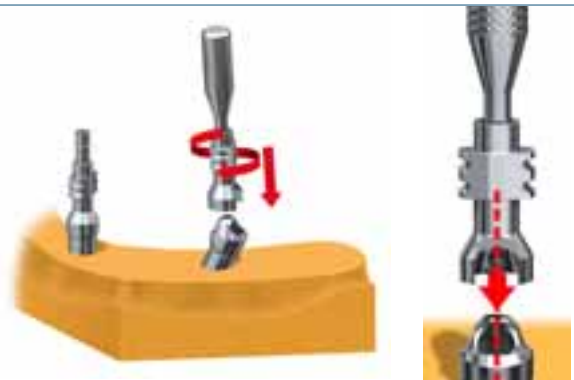
## Step-by-Step Laboratory Procedures – Jig Fabrication

**1. Place Impression Coping**

- Place an **Impression Coping Open Tray Multi-unit** on one of the straight **Multi-unit Abutments**.
- Tighten the **Guide Pin** using a **Unigrip™ Screw-driver Manual**.

**2. Reconnect Jig Stabilizer**

- Reconnect the **Jig Stabilizer** and **Abutment Holder** on the **30° Multi-unit Abutment Non-Engaging**.
- Align the abutment screw access hole with the **Abutment Screw**.

**3. Secure Jig Stabilizer**

- Use thin wire or dental floss to secure the **Jig Stabilizer** and the **Impression Coping Open Tray Multi-unit**.

**4. Apply Acrylic**

- Use quick-setting acrylic to secure the wire/floss between the **Jig Stabilizer** and the **Impression Coping Open Tray Multi-unit** on top of the straight **Multi-unit Abutment**.



## Step-by-Step Laboratory Procedures – Jig Fabrication

### 5. Remove Jig

- Loosen, but do not remove, the **Guide Pin** from the straight **Multi-unit Abutment**.
- Loosen the **Abutment Screw** securing the 30° **Multi-unit Abutment** to the **Implant Replica**.
- Remove the jig from the stone model.

*Note: All components must remain connected together in the jig construction.*

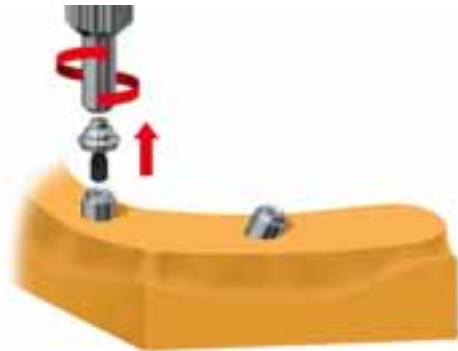


### 6. Repeat Procedure

- Repeat the procedure for the other two abutments.

### 7. Disconnect straight Multi-unit Abutment

- Disconnect the straight **Multi-unit Abutments** from the model using a **Screwdriver Manual Multi-unit**.



### 8. Send the Following to the Clinic:

- Two jigs
- Straight Multi-unit Abutments
- All-acrylic bridge
- Surgical Template
- Surgical Index
- Temporary Coping Multi-unit
- Stone model





The highly esthetic and versatile Procera® Implant Bridge is recommended for the final prosthetic reconstruction.

The Procera® Implant Bridge provides you with several veneering options, depending on your patient's needs and requirements:

### Basic

#### Procera® Implant Bridge with acrylic teeth and acrylic gingiva

Acrylic teeth with acrylic gingiva applied over the Procera® titanium framework.

### Premium

#### Procera® Implant Bridge with individualized Procera® Ceramic Crowns

Individual Procera® Crowns in Alumina or Zirconia cemented to a Procera® Implant Bridge framework for excellent esthetics and strength.

See the NobelEsthetics™ Products & Procedure manual for further details.



*Premium Bridge maxilla*



*Basic Bridge mandible*



*Intra-oral bite*



*Extra-oral smile*

*Courtesy of CM Clinica Maló Lisbon and CM Ceramics*

### Acrylic Jig

- Disinfect the jig according to normal procedures for non-autoclavable products.



### Surgical Template

- Before surgery, use a high level disinfectant (eg CidexOPA Solution) for 12 minutes at room temperature. Rinse thoroughly with sterile water. Dry quickly but without using heat.



### Storage Instructions for the Surgical Template

- The Surgical Template is made of a material that is sensitive to moisture and UV light. Store the Surgical Template together with a moisture absorbent in the UV protective plastic bag in which it was delivered.
- Always store the Surgical Template in a dry and dark location.
- Never expose the Surgical Template to direct sunlight.
- Never remove the moisture absorbent.

**Caution!** The **Surgical Template** may deform if exposed to liquids, including water, for more than 30 minutes.





## Restorative Components for All-on-4

The surgical components needed can be found in the surgical manuals for your specific implant system. For other prosthetic components, please see the NobelEsthetics™ Product Catalog.

### All-on-4 Guide

32068 All-on-4 Guide



### Multi-unit Abutments

*Note: Abutments include an Abutment Screw*

#### Brånemark System®

29176	Multi-unit Abutment Bmk Syst NP 1 mm
29177	Multi-unit Abutment Bmk Syst NP 2 mm
29178	Multi-unit Abutment Bmk Syst NP 3 mm
29179	Multi-unit Abutment Bmk Syst RP 1 mm
29180	Multi-unit Abutment Bmk Syst RP 2 mm
29181	Multi-unit Abutment Bmk Syst RP 3 mm
29182	Multi-unit Abutment Bmk Syst RP 4 mm
29183	Multi-unit Abutment Bmk Syst RP 5 mm
29184	Multi-unit Abutment Bmk Syst WP 1 mm
29185	Multi-unit Abutment Bmk Syst WP 2 mm
29186	Multi-unit Abutment Bmk Syst WP 3 mm
29187	17° Multi-unit Abutment Bmk Syst NP 2 mm
29188	17° Multi-unit Abutment Bmk Syst NP 3 mm
29189	17° Multi-unit Abutment Bmk Syst RP 2 mm
29190	17° Multi-unit Abutment Bmk Syst RP 3 mm
29191	17° Multi-unit Abutment Bmk Syst RP 4 mm
29192	30° Multi-unit Abutment Bmk Syst RP 4 mm
29193	30° Multi-unit Abutment Bmk Syst RP 5 mm



#### NobelReplace™

29196	Multi-unit Abutment NobRpl NP 1 mm
29197	Multi-unit Abutment NobRpl NP 2 mm
29198	Multi-unit Abutment NobRpl NP 3 mm
29199	Multi-unit Abutment NobRpl RP 1 mm
29200	Multi-unit Abutment NobRpl RP 2 mm
29201	Multi-unit Abutment NobRpl RP 3 mm
29202	Multi-unit Abutment NobRpl RP 4 mm
29203	Multi-unit Abutment NobRpl RP 5 mm
29204	Multi-unit Abutment NobRpl WP 1 mm
29205	Multi-unit Abutment NobRpl WP 2 mm
29206	Multi-unit Abutment NobRpl WP 3 mm
29235	17° Multi-unit Abutment NobRpl NP 2 mm
29236	17° Multi-unit Abutment NobRpl NP 3 mm
29237	17° Multi-unit Abutment NobRpl RP 2 mm
29238	17° Multi-unit Abutment NobRpl RP 3 mm
29239	17° Multi-unit Abutment NobRpl RP 4 mm
29240	30° Multi-unit Abutment NobRpl RP 4 mm
29241	30° Multi-unit Abutment NobRpl RP 5 mm



#### Prosthetic Screws

29285	Prosthetic Screw Multi-unit
29286	Prosthetic Screw Multi-unit Bmk Syst WP





**Kit**

32309 Prosthetic Kit

Prosthetic Kit includes:

32322 Prosthetic Kit Box (without instrumentation)

29165 Manual Torque Wrench Prosthetic

29151 Screwdriver Machine Unigrip™ 20 mm

29153 Screwdriver Machine Unigrip™ 30 mm

29158 Screwdriver Machine Multi-unit 21 mm



**Impression Copings**

29089 Impression Coping Open Tray Multi-unit

29091 Impr Coping Open Tray Multi-unit Bmk Syst wP

29090 Impr Coping Closed Tray Multi-unit

29092 Impr Coping Closed Tray Multi-unit Bmk Syst wP

**Laboratory Components**

*For fabrication of temporary bridge*

**Abutment Replicas**

31161 Abutment Replica Multi-unit

29110 Abutment Replica Multi-unit 5/pkg

31162 Abutment Replica Multi-unit Bmk Syst wP



**Temporary Copings**

29046 Temporary Coping Multi-unit

29047 Temporary Coping Multi-unit Bmk Syst wP

DCA 468-0 Temporary Coping Plastic Multi-unit

DCA 705-0 Temporary Coping Plastic Multi-unit Bmk Syst wP



**Guide Pins**

31155 Guide Pin Multi-unit 20 mm

29103 Guide Pin Multi-unit 20 mm 5/pkg

31157 Guide Pin Multi-unit Bmk Syst wP



**Lab Screws**

29287 Lab Screw Multi-unit 5/pkg

31163 Lab Screw Multi-unit Bmk Syst wP



## Restorative Components for All-on-4 with NobelGuide™

The surgical components needed can be found in the NobelGuide™ surgical manuals for your specific implant system.

For other prosthetic components, please see the NobelEsthetics™ Product Catalog and NobelGuide™ Concept Manual.

### Multi-unit Abutments

*Note: Abutments include an Abutment Screw*

#### Brånemark System®

29176	Multi-unit Abutment Bmk Syst NP 1 mm
29177	Multi-unit Abutment Bmk Syst NP 2 mm
29178	Multi-unit Abutment Bmk Syst NP 3 mm
29179	Multi-unit Abutment Bmk Syst RP 1 mm
29180	Multi-unit Abutment Bmk Syst RP 2 mm
29181	Multi-unit Abutment Bmk Syst RP 3 mm
29182	Multi-unit Abutment Bmk Syst RP 4 mm
29183	Multi-unit Abutment Bmk Syst RP 5 mm
29184	Multi-unit Abutment Bmk Syst WP 1 mm
29185	Multi-unit Abutment Bmk Syst WP 2 mm
29186	Multi-unit Abutment Bmk Syst WP 3 mm
33411	30° Multi-unit Abutment Non-Engaging Bmk Syst RP 4 mm
33412	30° Multi-unit Abutment Non-Engaging Bmk Syst RP 5 mm



#### NobelReplace™

29196	Multi-unit Abutment NobRpl NP 1 mm
29197	Multi-unit Abutment NobRpl NP 2 mm
29198	Multi-unit Abutment NobRpl NP 3 mm
29199	Multi-unit Abutment NobRpl RP 1 mm
29200	Multi-unit Abutment NobRpl RP 2 mm
29201	Multi-unit Abutment NobRpl RP 3 mm
29202	Multi-unit Abutment NobRpl RP 4 mm
29203	Multi-unit Abutment NobRpl RP 5 mm
29204	Multi-unit Abutment NobRpl WP 1 mm
29205	Multi-unit Abutment NobRpl WP 2 mm
29206	Multi-unit Abutment NobRpl WP 3 mm
33409	30° Multi-unit Abutment Non-Engaging NobRpl RP 4 mm
33410	30° Multi-unit Abutment Non-Engaging NobRpl RP 5 mm



#### Prosthetic Screws

29285	Prosthetic Screw Multi-unit
29286	Prosthetic Screw Multi-unit Bmk Syst WP



#### Kit

32309	Prosthetic Kit
	<i>Prosthetic Kit includes:</i>
32322	Prosthetic Kit Box (without instrumentation)
29165	Manual Torque Wrench Prosthetic
29151	Screwdriver Machine Unigrip™ 20 mm
29153	Screwdriver Machine Unigrip™ 30 mm
29158	Screwdriver Machine Multi-unit 21 mm



**Lab Components**

*For fabrication of Stone Model*



**Implant Replicas**

- 31158 Implant Replica Bmk Syst NP
- 31159 Implant Replica Bmk Syst RP
- 29108 Implant Replica Bmk Syst RP 5/pkg
- 31160 Implant Replica Bmk Syst WP
- 29498 Implant Replica NobRpl NP
- 29499 Implant Replica NobRpl NP 20/pkg
- 29500 Implant Replica NobRpl RP
- 29501 Implant Replica NobRpl RP 20/pkg
- 29502 Implant Replica NobRpl WP
- 29503 Implant Replica NobRpl WP 20/pkg



*For fabrication of temporary bridge (abutments excluded)*

**Temporary Copings**



- 29046 Temporary Coping Multi-unit
- 29047 Temporary Coping Multi-unit Bmk Syst WP
- DCA 468-0 Temporary Coping Plastic Multi-unit
- DCA 705-0 Temporary Coping Plastic Multi-unit Bmk Syst WP



**Guide Pins**

- 31155 Guide Pin Multi-unit 20 mm
- 29103 Guide Pin Multi-unit 20 mm 5/pkg
- 31157 Guide Pin Multi-unit Bmk Syst WP 20 mm



**Lab Screws**

- 29287 Lab Screw Multi-unit 5/pkg
- 31163 Lab Screw Multi-unit Bmk Syst WP



*For fabrication of jig (abutments excluded)*

**Impression Copings**

- 29089 Impression Coping Open Tray Multi-unit
- 29091 Impression Coping Open Tray Multi-unit Bmk Syst WP



*Instruments needed for laboratory procedure*

**Screwdrivers**

- 29156 Screwdriver Manual Multi-unit 25 mm
- 29150 Screwdriver Manual Unigrip™ 36 mm





our qualifications are

# your security

## Achievements

- Inheritors and developers of the work of Professor Brånemark – founder of modern implantology. World leaders in the field
- Providers of the most comprehensive and flexible crown, bridge and implant solutions in the world
- Creators of unique biocompatible material TiUnite® for optimal osseointegration, Immediate Function™ and Soft Tissue Integration™
- Creators of unique Procera® System and CAD/CAM dentistry

- FDA cleared for Immediate Function™ (except 3.0 and Zygoma)
- FDA cleared for Teeth-In-An-Hour™ in 2004

## Quality

- Zero non-conformities in 2004 FDA inspection of Nobel Biocare production units in Göteborg, Karlskoga and Stockholm

## Research

- Formal collaboration with over 50 academic institutions and 600 independent scientists around the world

- More clinical studies on immediate or early loading than all other competitors combined (Medline Feb 2005)
- More prospective clinical studies with at least 5-year follow-up than all other competitors combined (Berglund et al 2002)

## Support

- 250,000 customers trained in 40 countries during 2005
- Own sales organizations with local Nobel Biocare staff in 30 countries

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SOS-CHILDREN'S VILLAGES



Nobel Biocare cares about the environment and all production units are certified according to Environmental Management System ISO 14001

[www.nobelbiocare.com](http://www.nobelbiocare.com)

