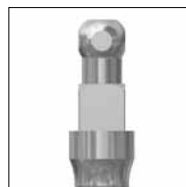
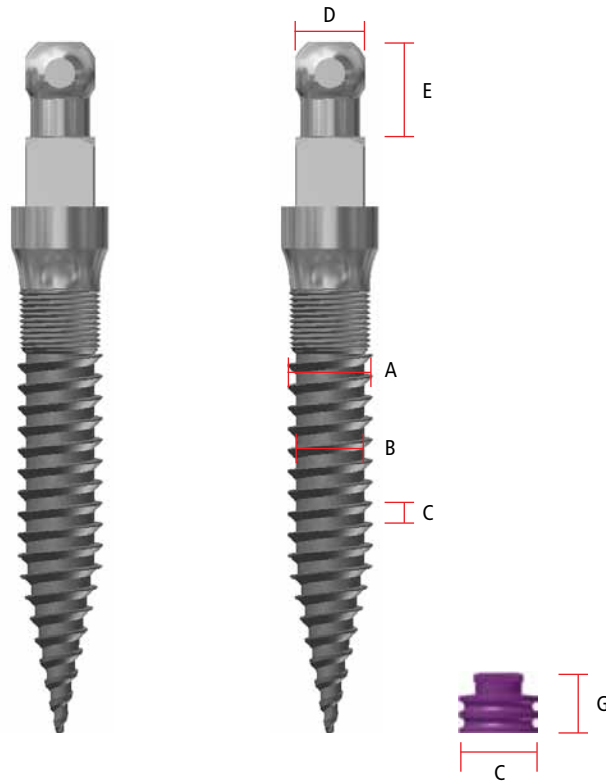


MINI

Special implant for the stabilization of removable dentures.



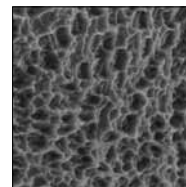
Prosthesis not required



Differentiated threading



Minimally invasive implant





DAES surface

A	B	C	D	E	F	G
IMPLANT DIAMETER	IMPLANT BODY DIAMETER	THREAD PITCH	O-BALL DIAMETER	INTRAMUCOSAL HEIGHT	CAP DIAMETER	CAP HEIGHT
1,9	1,6	0,5	1,8	4	4	3,25
2,5	1,9	1	1,8	4	4	3,25

All measurements are in millimeters

MINI ADVANTAGES ARE:

- Thin and minimally invasive implant
- Prosthesis not required
- Suitable for monofasic surgery
- Ideal for denture stabilization
- Useful as supporting implant to reduce early loading on traditional implants
- Realized in titanium grade 5

DIAMETER	COLLECTION	NOMINAL LENGHT	REFERENCE	RENDERING
1,9	10	IMI19100A	MINI DENTAL IMPLANT Ø 1,9 MM L. 10,0 MM	
	11,5	IMI19115A	MINI DENTAL IMPLANT Ø 1,9 MM L. 11,5 MM	
	13	IMI19130A	MINI DENTAL IMPLANT Ø 1,9 MM L. 13,0 MM	
	15	IMI19150A	MINI DENTAL IMPLANT Ø 1,9 MM L. 15,0 MM	
2,5	10	IMI25100A	MINI DENTAL IMPLANT Ø 2,5 MM L. 10,0 MM	
	11,5	IMI25115A	MINI DENTAL IMPLANT Ø 2,5 MM L. 11,5 MM	
	13	IMI25130A	MINI DENTAL IMPLANT Ø 2,5 MM L. 13,0 MM	
	15	IMI25150A	MINI DENTAL IMPLANT Ø 2,5 MM L. 15,0 MM	

The implant is supplied with titanium cap which is provided with retentive "O ring".

Spare retentive cap with or

MATERIAL Titanium grade 5 (Ti6Al4V)
USE Cap with OR 70-80 Shore to be placed inside the denture.



1,9	2,5
-----	-----

COR1770

Spare or 70-80 Shore

MATERIAL NBR
USE To be used in case of wear of the OR which have been inserted inside the retentive caps. OR density: 70-80 Shore
NOTE Kit of 6 pieces



1,9	2,5
-----	-----

OR3570

Straight Abutment

MATERIAL Titanium grade 5 (Ti6Al4V)
USE Cementable straight abutment to be used when the implant works as a section-breaker support on a bar.



1,9	2,5
-----	-----

MMI17H1

Angled Abutment

MATERIAL Titanium grade 5 (Ti6Al4V)
USE Cementable 15° angled abutment to be used when the implant works as a section-breaker support on a bar.



1,9	2,5
-----	-----

MMI1715

Castable - Transfer

MATERIAL PMMA
USE To be used as a plastic abutment in order to realize an abutment through fusion, or as a transfer for the impression taking.



1,9	2,5
-----	-----

CMI17

Implant replicas

MATERIAL
USE

Stainless steel
To be inserted in the choke model as implant replica



1,9	2,5
-----	-----

AMI17

IMPRESSION TAKING AND DENTURE DEVELOPMENT

Insert the castable-transfer on the MINI implant ensuring the perfect coupling between the parts. Take the impression with the appropriate material and the individual impression tray.

Wait up to the sufficient hardening of the material and extract the impression from the oral cavity with the castable-transfer, ensuring the perfect connection of the parts.

Develop the plaster model.

Realize the removable denture including the retentive caps positioned on the spheres of implant replicas, considering a wide mucous-prosthetic support. Place the prosthetic device in the patient mouth, after all appropriate checkings. Particular attention has to be paid to the correct mucous-prosthetic support also in the subsequent periodical controls, potentially making the denture relining.



INSERTION OF RETENTIVE CAPS ON THE EXISTING DENTURE

In the existing denture, realize some cavities in which retentive caps will be inserted, in correspondence of MINI implants spheres.

Insert the retentive caps on the MINI implants spheres and place the denture in the patient's mouth in order to verify the correct positioning and support, making the necessary adjustments.

Once removed denture and caps, protect the mucous with dams to avoid a contact of the resin with tissues in the next phase. Reposition retentive caps. Fill cavities previously prepared in the denture with autopolymerizing resin and insert it in the patient's mouth, then close without excessive compression.

At the end of the polymerization phase, remove denture and dams. Check and finish potential exceeds of resin off. Particular attention has to be paid to the correct mucous-prosthetic support also in the subsequent controls, possibly making the denture refining. Then position the denture in the patient's mouth.

