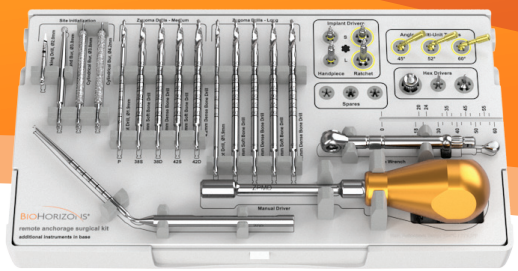
Remote Anchorage Solutions

Catalog & surgical manual



biohorizons camlog group

BIOHORIZONS®

BIOHORIZONS® fueling full-arch efficiency

Efficient protocols

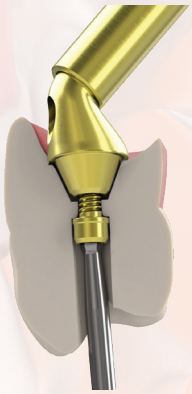
Designed for complex implant workflows, BioHorizons provides a complete surgical and restorative solution built on one prosthetic connection.





Simplified workflows

MicronMapper offers an efficient photogrammetry solution to capture full-arch implant position. SprintRay 3D printers can be used to rapidly produce a temporary for day-of restorations.



Restorative flexibility

Multi-unit abutments from 17°–60° support diverse anatomical needs while the Direct-to-MUA screw simplifies provisional and final restorations with angulated screw-access. Secure zirconia, PMMA, and 3D-printed restorations directly using an angulated screw channel for efficient, esthetic outcomes.

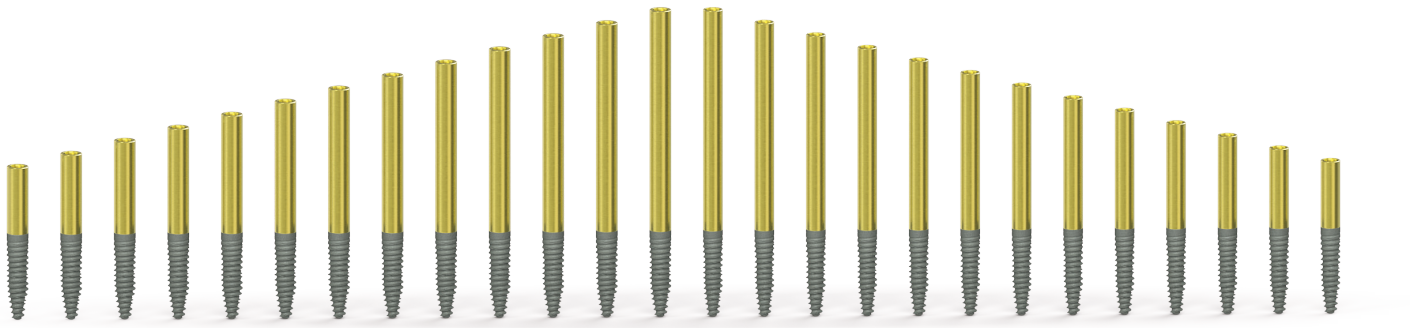


Predictable restorations

Vulcan Custom Dental offers a wide range of full arch restorative solutions, including angled screw channels for bars, and VBar for balanced stability and esthetics.

Table of contents

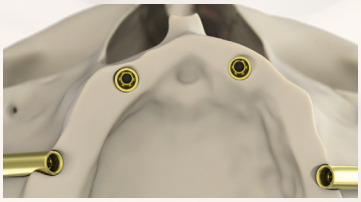
Implant portfolio & surgical kit	4
Osteotomy initialization	5
Surgical drills	6
Surgical instruments	7
Miscellaneous instruments	8
Preparing for surgery	9-10
Full-arch solutions (hybrid & quad)	11
Surgical kit layout & drill sequence	12-13
Surgical preparation	14
Extrasinus technique	15-16
Intrasinus technique	17-18
Implant placement	19
Multi-unit abutment selection & placement	20
Ordering, warranty information & references	21



shop online at store.biohorizons.com

Remote Anchorage Solutions

Featuring the Tapered Pro Conical deep conical design, the BioHorizons Remote Anchorage System is designed for predictable immediate treatment and surgical efficiency with a best-in-class conical connection.[1]

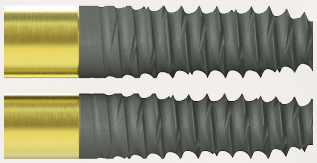


Single prosthetic platform

Perform a full-arch case with the use of a single prosthetic platform to improve surgical and restorative workflow efficiency, reduce cost and streamline inventory management.

Multiple implant diameters

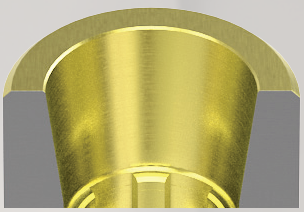
Implants offered in 3.8 and 4.2mm diameters to support varying types of procedures.





6-cam connection

The 6-cam connection is designed for flexible abutment orientation options and simplified abutment insertion with antirotation capability.



Conical connection

BioHorizons conical connection features a long conus designed to reduce micromovements and a 7.5° angulation that is proven to provide superior positional stability in comparison to other conical systems.[1]





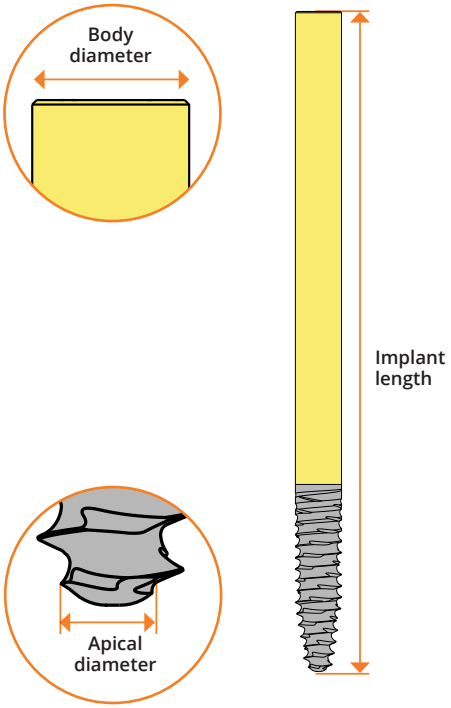
Expansive multi-unit portfolio

The expanded multi-unit abutment portfolio now includes angulations from 17° to 60° with gingival heights up to 3mm and slim abutment profiles. Specifically designed to accommodate diverse anatomical needs.

Pro Zygoma

Implant portfolio & surgical kit

Body diameter	3.8mm	4.2mm
Prosthetic connection	Regular	Regular
Apical diameter	2.5mm	2.5mm
30.0mm length	CTAZ3830	CTAZ4230
32.5mm length	CTAZ3832	CTAZ4232
35.0mm length	CTAZ3835	CTAZ4235
37.5mm length	CTAZ3837	CTAZ4237
40.0mm length	CTAZ3840	CTAZ4240
42.5mm length	CTAZ3842	CTAZ4242
45.0mm length	CTAZ3845	CTAZ4245
47.5mm length	CTAZ3847	CTAZ4247
50.0mm length	CTAZ3850	CTAZ4250
52.5mm length	CTAZ3852	CTAZ4252
55.0mm length	CTAZ3855	CTAZ4255
57.5mm length	CTAZ3857	CTAZ4257
60.0mm length	CTAZ3860	CTAZ4260





Remote Anchorage Surgical Kit

ZSK5000 — **Remote Anchorage Surgical Kit, Zygoma**

Includes the instrumentation required to place Pro Zygoma implants.

ZPK4500 — **Remote Anchorage Surgical Tray**

(without instruments)

The ZSK5000 Remote Anchorage Surgical Kit, Zygoma from BioHorizons is designed for clinical versatility and confidence in performing advanced surgical protocols. This surgical kit has an easy-to-use, intuitive layout and is fully equipped with specialty instrumentation designed to accommodate varying anatomy.



Conical Cover Screw

Part number	Platform
CRCC	Regular

Hand-tighten (10-15 Ncm) with the .050" (1.25mm) Hex Driver. Titanium alloy.

Marking drills & burs

Osteotomy initialization



Marking Drills

DM20Z	Marking Drill, Short
DM20P	Marking Drill, Long



Round Bur

DBB 38-BH	Round Bur, 3.8mm



Cylindrical Burs

DCB 38-BH	Cylindrical Bur, 3.8mm
DCB 42-BH	Cylindrical Bur, 4.2mm

Individual components

Surgical drills



Zygoma Drills - Short

DZP19S	Pilot Drill, 1.9mm, Short
DZS38S	Soft Bone Drill, 3.8mm, Short
DZD38S	Dense Bone Drill, 3.8mm, Short
DZS42S	Soft Bone Drill, 4.2mm, Short
DZD42S	Dense Bone Drill, 4.2mm, Short

Used to finalize the osteotomy for Pro Zygoma implants. These drills come with depth markings for reference and their matte finish allows for increased visibility in operatory settings.



Zygoma Drills - Medium

DZP19M	Pilot Drill, 1.9mm, Medium
DZS38M	Soft Bone Drill, 3.8mm, Medium
DZD38M	Dense Bone Drill, 3.8mm, Medium
DZS42M	Soft Bone Drill, 4.2mm, Medium
DZD42M	Dense Bone Drill, 4.2mm, Medium

Used to finalize the osteotomy for Pro Zygoma implants. These drills come with depth markings for reference and their matte finish allows for increased visibility in operatory settings.



Zygoma Drills - Long

DZP19L	Pilot Drill, 1.9mm, Long
DZS38L	Soft Bone Drill, 3.8mm, Long
DZD38L	Dense Bone Drill, 3.8mm, Long
DZS42L	Soft Bone Drill, 4.2mm, Long
DZD42L	Dense Bone Drill, 4.2mm, Long

Used to finalize the osteotomy for Pro Zygoma implants. These drills come with depth markings for reference and their matte finish allows for increased visibility in operatory settings.

Individual components

Surgical instruments



Manual Driver

ZPMD	Manual Driver

May be used with Implant-level Ratchet Drivers and Ratchet .050" Hex Driver.



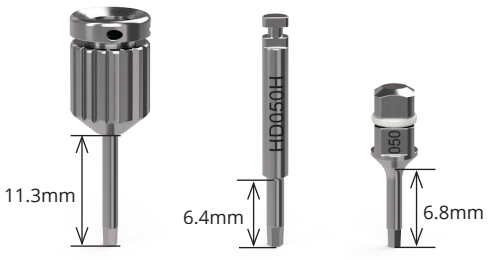
Implant-level Ratchet Drivers*

CRIDRS	Short Implant-level Driver, Ratchet
CRIDRL	Long Implant-level Driver, Ratchet



Implant-level Handpiece Drivers*

CRIDHS	Short Implant-level Driver, Handpiece
CRIDHL	Long Implant-level Driver, Handpiece



.050" (1.25mm) Hex Drivers

HD050M	Manual .050" Hex Driver
HD050H	Handpiece .050" Hex Driver
HD050R	Ratchet .050" Hex Driver*

For installation and removal of cover screws, healing caps and abutment screws. The handpiece hex drivers are used with latch-type contra-angle handpieces.

** Instrument snap rings wear out over time. If an instrument is no longer held securely by its associated driver, order a replacement ring through Customer Care.*

Ancillary instruments

Miscellaneous instruments



Torque Wrench 4mm Square 80Ncm

STW80	**Torque Wrench 4mm Square 80Ncm**

Lightweight design is easy to use as a ratchet or adjustable torque wrench with visual indicators for 30, 45, 60 and 80Ncm. Comes packaged with a 4mm square adaptor. Quickly disassembles for cleaning. No calibration required.



Zygoma Surgical Handpiece

SZ-75	**Zygoma 20:1 Surgical Handpiece**

Handpiece designed specifically for zygoma procedures. The angled design allows for a better viewing angle of the surgical field and more comfortable ergonomics. *(Corresponding WH part number: WH-30095000).*
Not Included in the ZSK5000



Zygoma Depth Probe

ZDP	**Zygoma Depth Probe**

Conical Multi-unit Try-in Abutments*



17° angled**	30° angled**	45° angled	52° angled	60° angled
CRTRY17	**CRTRY30**	**CRTRY45**	**CRTRY52**	**CRTRY60**
Regular	Regular	Regular	Regular	Regular
4mm 3mm 2mm	4mm 3mm 2mm	2.5mm 1.5mm 3.0mm (slim) 2.0mm (slim)	2.5mm 1.5mm 2.0mm (slim)	2.5mm 1.5mm

Multi-unit Try-in Abutments may be used to measure tissue thickness and verify proper prosthetic seating prior to final abutment seating. Each Try-in is laser-marked to correspond with the Multi-unit Abutment collar heights.
Try-in is carried to the site by the handle and snaps into the implant.

** Instrument snap rings wear out over time. If an instrument is no longer held securely by its associated driver, order a replacement ring through Customer Care.*
*** Not Included in the ZSK5000*

Surgical manual

Preparing for surgery

Pro Zygoma Surgical Manual

This surgical manual serves as a reference for using BioHorizons Pro Zygoma implants and surgical instruments. It is not intended to describe the methods or procedures for diagnosis, treatment planning, or placement of implants, nor does it replace clinical training or a clinician's best judgment regarding the needs of each patient. Appropriate training is strongly recommended as a prerequisite for the placement of implants and associated treatment. The procedures illustrated and described within this manual reflect idealized patient presentations with adequate bone and soft tissue to accommodate implant placement. No attempt has been made to cover the wide range of actual patient conditions that may adversely affect surgical and prosthetic outcomes. Clinician judgment as related to any specific case must always supersede any recommendations made in this document.

For the correct use of the system, professional qualification in the specific dental area is required according to local regulations and advanced surgery training / accreditation for Zygomatic implants is recommended.

For specific product information provided by third parties, please contact the respective companies directly.

Note: Products featured in this manual may not be available in all markets, consult your local representative for more information.

Indications For Use

Pro Zygoma dental implants are intended for placement in the maxillary arch to provide support for fixed or removable dental prostheses in patients with partially or fully edentulous maxillae. Pro Zygoma dental implants may be used with single-stage or two-stage procedures and may be loaded immediately when good primary stability is achieved and with appropriate occlusal loading.

Important considerations

- During all drilling protocol of the implant surgical site, avoid deflecting the drill sideways, and use continuous, copious irrigation.
- Pro Zygoma implants were designed for a maximum torque of 80 Ncm. Higher torques may cause irreversible damage to the implant driver or implant as well as surgical complications.
- The tightening torque for conical multi-unit abutments is 20 Ncm.

Contraindications

BioHorizons Pro Zygoma Implant System is contraindicated in the following conditions:

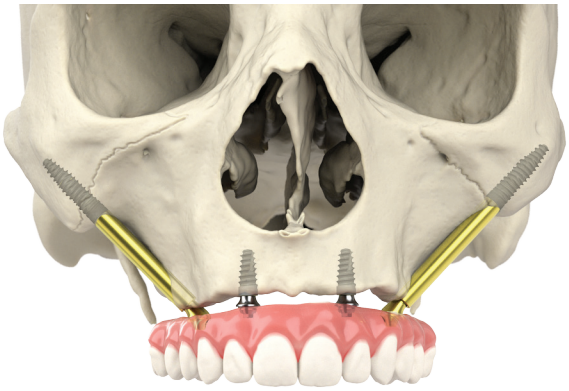
- The maxillary or zygoma bone quantity and quality is insufficient to provide initial stability to the implant
- Inadequate bone volume for zygoma or conventional implants, or where adequate numbers of implants cannot be placed to achieve full functional support of a prosthesis
- When the site or systemic conditions show inadequate or poor oral hygiene
- Acute or chronic periodontal infection
- Chemical dependence
- Occlusal parafunction
- Radiation history to the implant site
- Inappropriate patient for prolonged or complicated oral surgery
- Inability to build a functional prosthetic construction
- Rehabilitation with dental implants is also contraindicated for children, pregnant women and during breastfeeding
- In cases of immediate loading, with inappropriate primary stability of the implant

Before beginning any surgical procedure with Pro Zygoma implants:

- *Read and understand the Instructions for Use that accompany the products.*
- *Clean and sterilize the surgical tray and instruments per Instructions for Use.*
- *Become thoroughly familiar with all instruments and their uses.*
- *Study surgical kit layout and iconography.*
- *Design a surgical treatment plan to satisfy the prosthetic requirements of the case.*

Full-arch solutions (hybrid & quad)

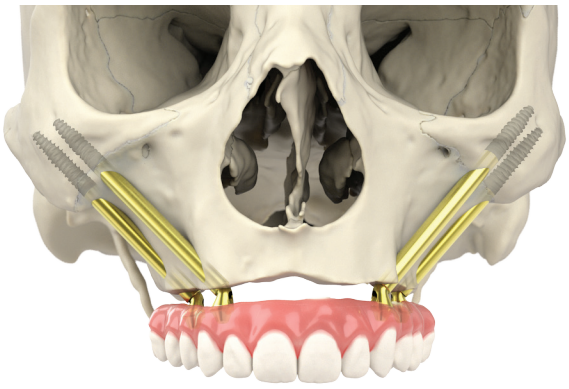
Depending on severity of bone resorption in the maxilla, a hybrid zygoma or quad zygoma technique may be a suitable treatment plan.



Hybrid zygoma

Hybrid zygoma technique

Following evaluation and in cases with mild bone resorption, a hybrid zygoma technique may be followed in which at least two traditional implants are placed in the anterior region and two zygoma implants are positioned posteriorly in the first or second premolar region.



Quad zygoma

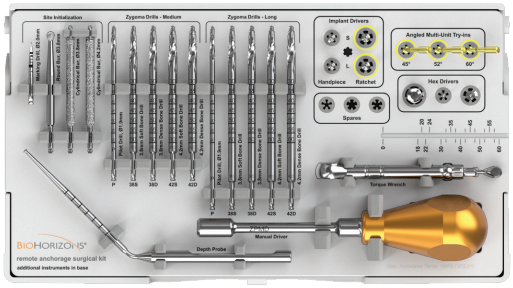
Quad zygoma technique

A quad zygoma technique may also be followed in the event of severe bone resorption. This technique consists of placing four zygoma implants, two emerging in the pre-molar/molar region and two emerging in the canine/lateral incisor region.

Important:
It is very important to keep a safe distance from the orbital rim and ensure there is adequate bone between implants to provide stability when following a quad zygoma technique.

Surgical manual

Surgical kit layout & drill sequence

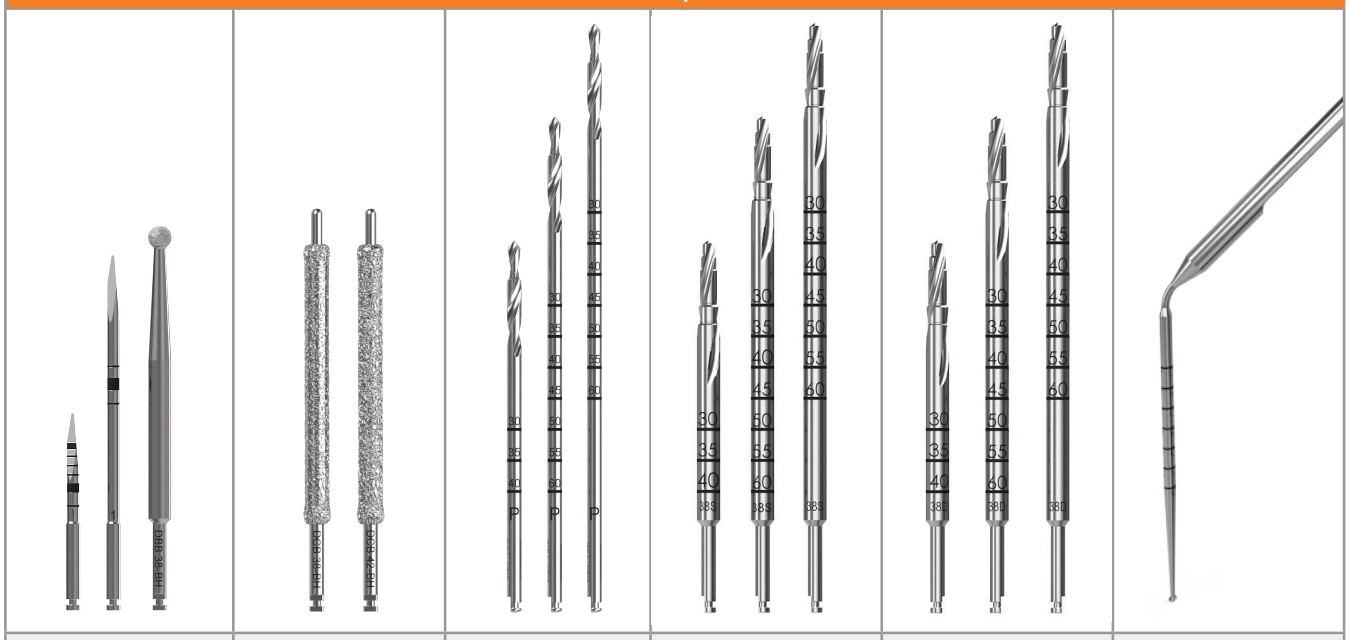


Surgical kit layout

Prior to use, clean and sterilize the surgical tray and instruments according to the Instructions for Use[2]. Study the surgical kit layout, color-coding and iconography. Surgical assistants should be thoroughly familiar with all instruments and their uses prior to initiating the surgical procedure.

The surgical kit uses an intuitive layout to guide the surgeon through the instrument sequence. The sequence begins in the upper-left corner and proceeds left to right for each implant diameter.

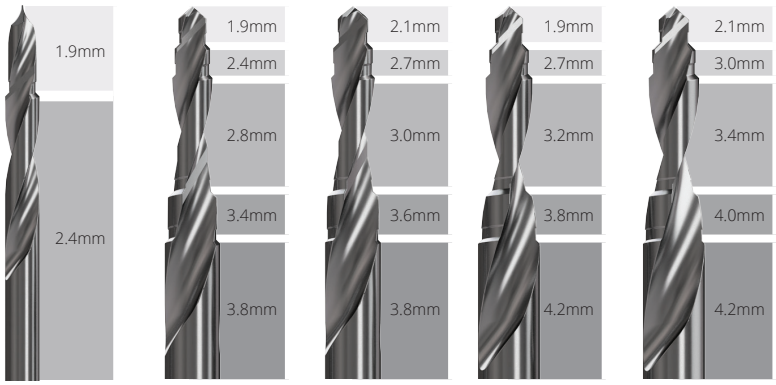
Drill sequence



Marking drills	Cylindrical burs	Pilot drills	Soft bone drills	Dense bone drills	Zygoma depth probe

*Note: Zygoma Drills are available in three lengths to accommodate patient anatomy and surgical placement. Attention should be given to the laser markings on the drills that indicate drilling depth.

Drill step diameters



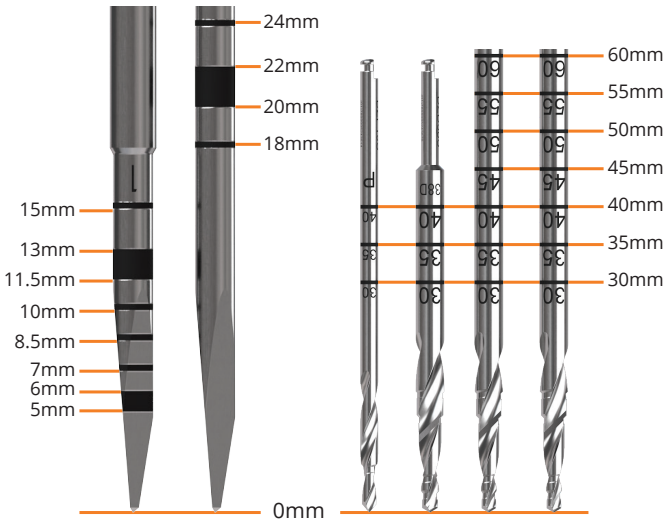
Pilot Drill | 3.8mm Soft Bone Drill | 3.8mm Dense Bone Drill | 4.2mm Soft Bone Drill | 4.2mm Dense Bone Drill

Stepped drills

The surgical drills for zygoma are designed with increasing diameter "steps" to create an osteotomy that closely matches the taper of the implant. The specific step diameters for each drill can be seen in the chart to the left.

Surgical manual

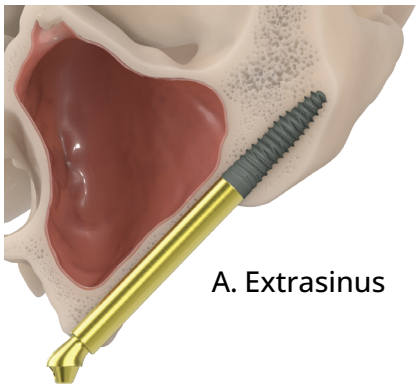
Surgical kit layout & drill sequence



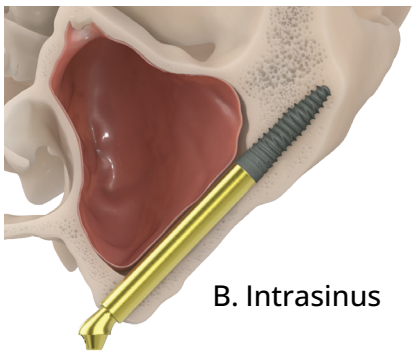
Marking drills Osteotomy drills

Drill markings

All surgical drills included with this system are externally irrigated and designed to be used with steady sterile irrigation. Reduced drill speed may be indicated in softer bone or as drill diameter increases. Drills for Pro Zygoma dental implants include depth marks every 5mm from 30mm to 60mm to gauge osteotomy depth.



A. Extrasinus



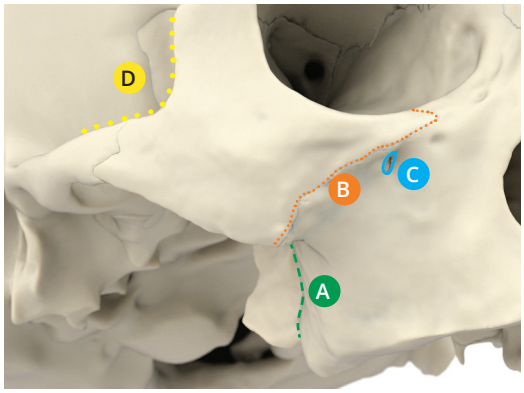
B. Intrasinus

Surgical protocol

Pro Zygoma implants are to be implanted in the upper jaw arch to provide support for fixed dental prostheses in patients with fully edentulous maxillae. Pro Zygoma implants have a threaded apical end and a smooth anodized body. The threaded portion of the implant is designed to provide anchorage in the zygomatic bone of the patient. The surgeon must expect high-density bone in this area. The unthreaded smooth surface is intended to obtain stability upon the alveolar process. All implants are appropriate for immediate loading when good primary stability is achieved and with appropriate occlusal loading. These implants are not intended for single-unit loading.

Prior to surgery, it is important to evaluate not only the bone resorption pattern that is present but also the trajectory in which you plan to place the Pro Zygoma implant. Zygoma implant placement can be either (A) extrasinus when the maxillary wall is concave, or (B) intrasinus if the maxillary wall is flat.

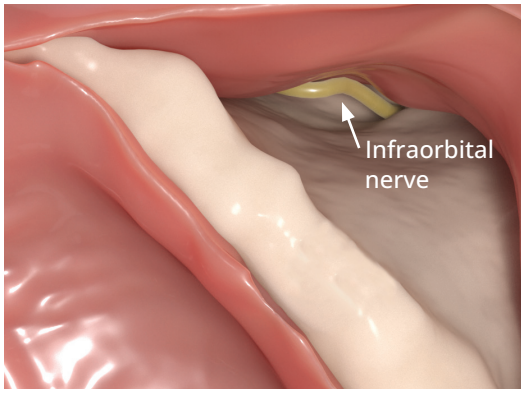
Prior to starting the drill sequence, appropriate care should be taken to preserve critical anatomy and properly create the incision.



Critical anatomy

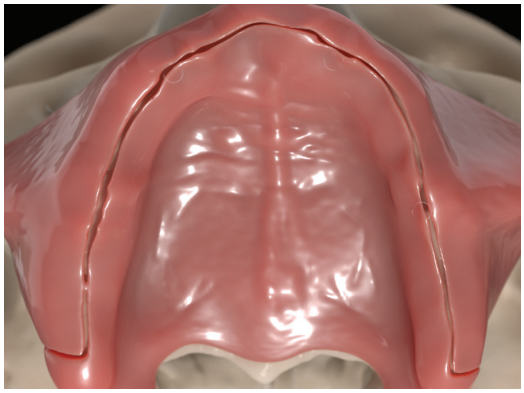
A comprehensive understanding of anatomy when placing an implant into the zygomatic bone is imperative for a successful procedure. Failure to locate vital structures could result in complications and injury to the patient. Some of the important anatomical structures to identify include the following:

- A Maxilla sinus posterior plate
- B Zygomatic suture
- C Infraorbital foramen
- D Zygomatic frontal notch



Infraorbital nerve

Additional care must be taken to avoid damage to vital regions such as vascular structures and adjacent innervations to the surgical area to prevent injury that may result in trans- and post-surgical complications such as bleeding, neural damage and impairment, ocular globe damage and other complications.

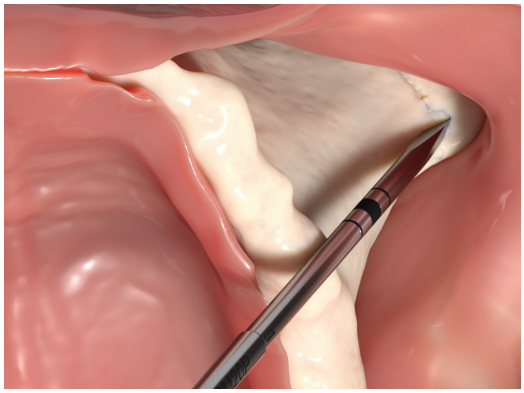


Incision

The incision is made in the maxillary ridge with two releasing vertical incisions in the posterior region.

After the incision, a mucoperiosteal flap is raised to expose the entire region where the implants will be placed.

The entire extension of the upper jaw should be exposed to the piriform aperture, canine pillars, zygomatic and the entire alveolar process.



1 Mark osteotomy

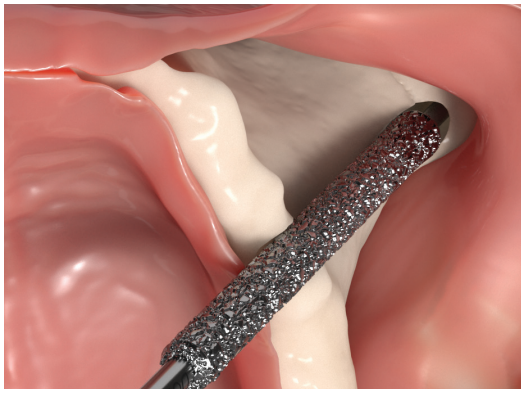
Purpose: Mark the osteotomy site located in the zygoma.

Instruments to use:

- 2.0mm Marking Drills (DM20Z or DM20P)
- 3.8mm Round Bur (DBB 38-BH)

Marking drills include laser marks that indicate depth.

- 1,200 rpm



2 Create groove

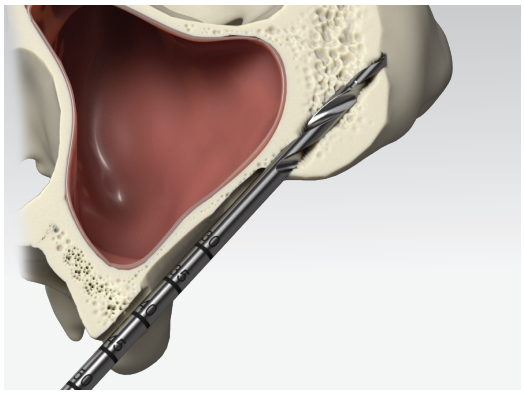
Purpose: Create a groove or channel to guide subsequent drilling and implant placement.

Instruments to use:

- Cylindrical Burs (DCB 38-BH or DCB 42-BH)

Cylindrical burs are offered in two diameters. The bur that matches the diameter of the chosen implant should be used.

- 1,200 rpm



3 Develop osteotomy

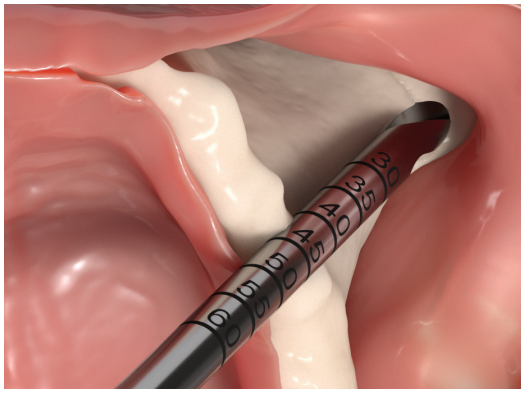
Purpose: Continue the osteotomy with the 1.9mm Pilot Drill taken to full depth.

Instruments to use:

- Pilot Drill (DZP19S, DZP19M or DZP19L)

Note: *Zygoma drills are available in three lengths to accommodate patient anatomy. Attention should be given to the laser markings on the drills that indicate drilling depth.*

- 800 rpm



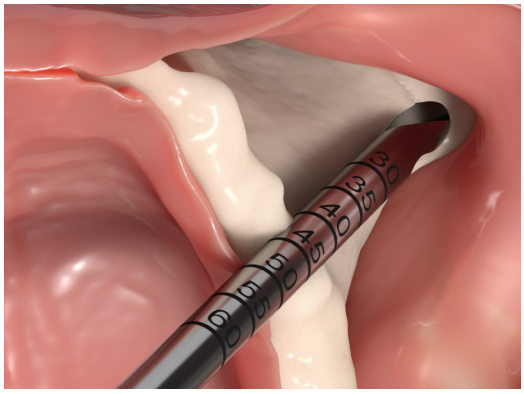
4 Enlarge osteotomy

Purpose: Enlarge the osteotomy using the appropriate diameter soft bone drill taken to planned implant length.

Advancing the step drills beyond implant depth could compromise implant insertion torque.

Instruments to use:

- 3.8mm Zygoma Drills (DZS38S, DZS38M, DZS38L)
- 4.2mm Zygoma Drills (DZS42S, DZS42M, DZS42L)
- 800 rpm

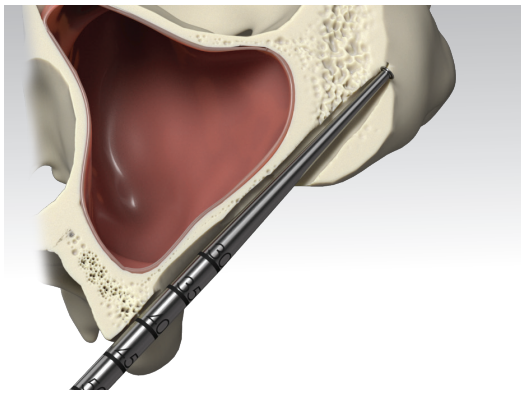


5 Complete osteotomy

Purpose: If necessary, based on bone density, the osteotomy can be enlarged further using the appropriate diameter dense bone drill.

Instruments to use:

- 3.8mm Zygoma Drills (DZD38S, DZD38M, DZD38L)
- 4.2mm Zygoma Drills (DZD42S, DZD42M, DZD42L)
- 800 rpm



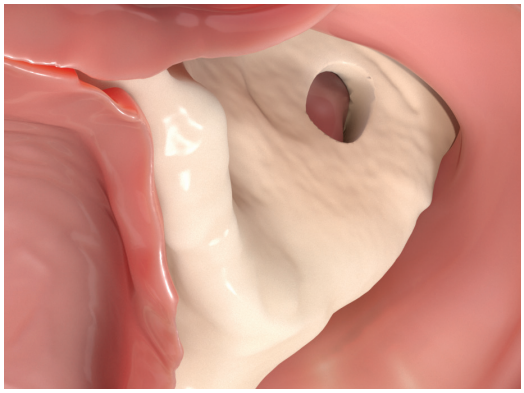
6 Verify depth

Purpose: Check the depth of the finalized osteotomy.

Note: *When selecting implant length, keep in mind that the selected multi-unit abutment will add length along the implant axis. Therefore, depending on the desired prosthetic height, it may be necessary to plan for the implant platform to land slightly below the alveolar crest.*

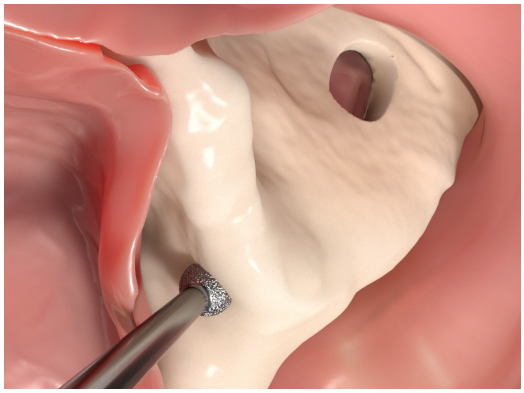
Instruments to use:

- Zygoma Depth Probe (ZDP)



1 Create viewing window

While following an intrasinus technique, a small viewing window can be cut into the lateral aspect of the maxillary sinus and bone can be removed. This window can provide additional visibility to help plan the implant trajectory. Care should be taken to preserve the lining of the sinus.



2 Mark osteotomy

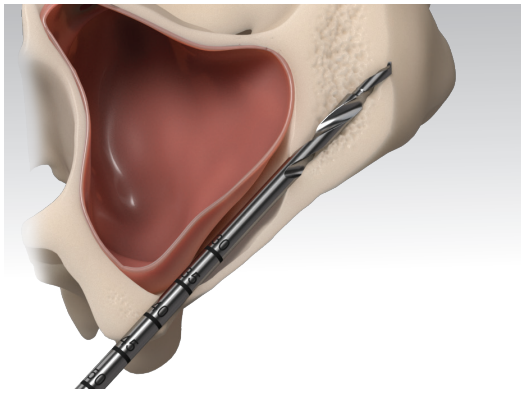
Purpose: Mark the osteotomy site located in the posterior maxilla.

Instruments to use:

- 2.0mm Marking Drills (DM20Z or DM20P)
- 3.8mm Round Bur (DBB 38-BH)

Marking drills include laser marks that indicate depth.

- 1,200 rpm



3 Develop osteotomy

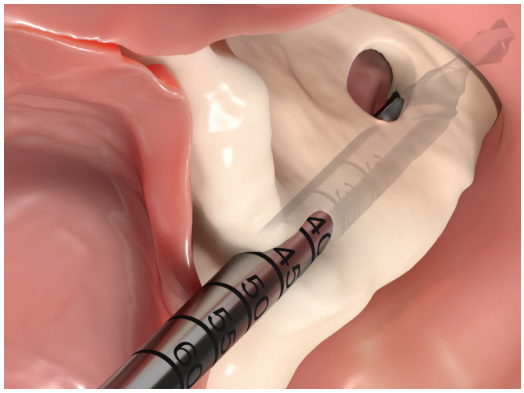
Purpose: Continue the osteotomy with the 1.9mm Pilot Drill taken to full depth.

Instruments to use:

- Pilot Drill (DZP19S, DZP19M or DZP19L)

Note: *Zygoma drills are available in three lengths to accommodate patient anatomy. Attention should be given to the laser markings on the drills that indicate drilling depth.*

- 800 rpm



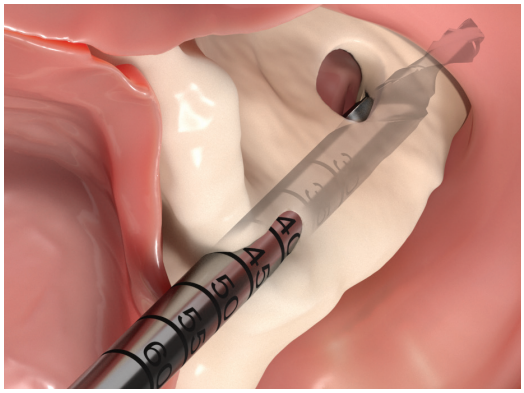
4 Enlarge osteotomy

Purpose: Enlarge the osteotomy using the appropriate diameter soft bone drill taken to planned implant length.

Advancing the step drills beyond implant depth could compromise implant insertion torque.

Instruments to use:

- 3.8mm Zygoma Drills (DZS38S, DZS38M, DZS38L)
- 4.2mm Zygoma Drills (DZS42S, DZS42M, DZS42L)
- 800 rpm

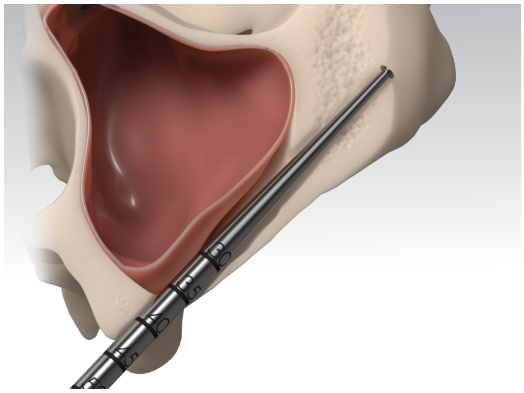


5 Complete osteotomy

Purpose: If necessary, based on bone density, the osteotomy can be enlarged further using the appropriate diameter dense bone drill.

Instruments to use:

- 3.8mm Zygoma Drills (DZD38S, DZD38M, DZD38L)
- 4.2mm Zygoma Drills (DZD42S, DZD42M, DZD42L)
- 800 rpm



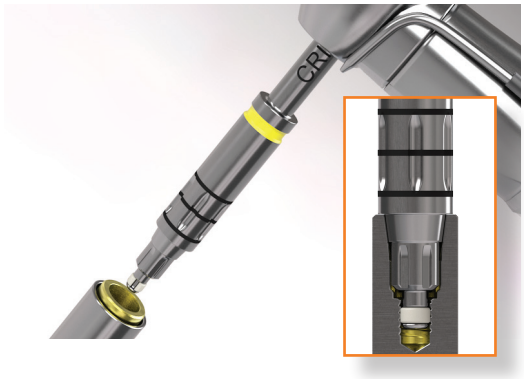
6 Verify depth

Purpose: Check the depth of the finalized osteotomy.

Note: *When selecting implant length, keep in mind that the selected multi-unit abutment will add length along the implant axis. Therefore, depending on the desired prosthetic height, it may be necessary to plan for the implant platform to land slightly below the alveolar crest.*

Instruments to use:

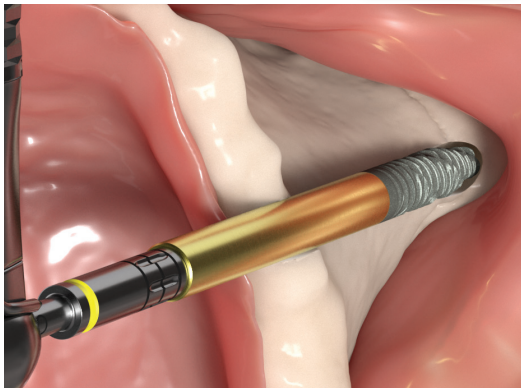
- Zygoma Depth Probe (ZDP)



1 Implant pick-up

With the Conical Implant Driver (CRIDHL or CRIDHS) attached to the handpiece, insert the driver into the implant until it is fully engaged and remove the implant from the titanium cylinder.

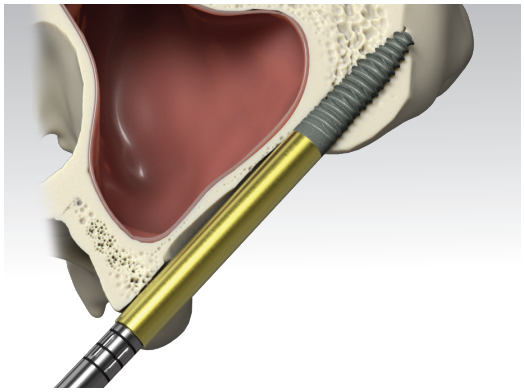
To pick up the implant, align the driver's cams with the implant's conical connection grooves and press firmly to engage the PEEK snap ring.



2 Begin implant placement

With the implant retained by the driver, carry the implant to the prepared surgical site.

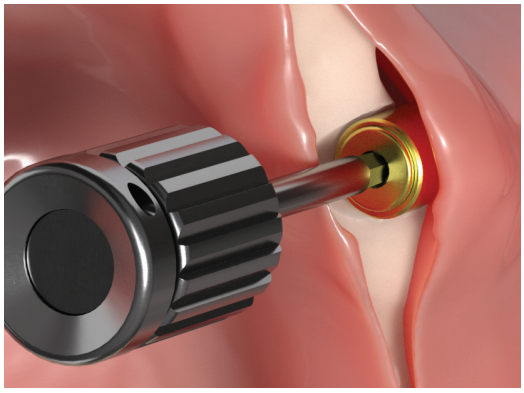
Important:
If too much resistance is felt during insertion, reverse the implant to relieve pressure and reinsert into the osteotomy. If excessive torque is still encountered and the dense bone drill was not used while preparing the osteotomy, it may be necessary to remove the implant and enlarge the osteotomy using the dense bone drill.



3 Complete implant placement

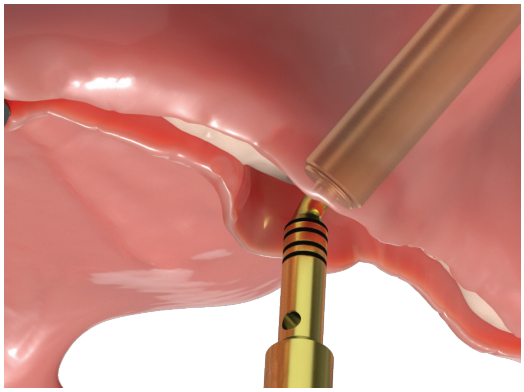
If required, complete implant insertion using the Manual Driver (ZPMD) or Torque Wrench (STW80) with a compatible Conical Implant Driver (CRIDRL or CRIDRS).

When seating the implant, use the corresponding dimples on the driver to orient them to match the position of the grooves on the implant connection. When reaching the planned insertion depth, one of the six grooves should face in the vestibular direction.



4 Apply cover screw for delayed loading

For delayed loading procedures, apply the cover screw using the .050" Manual Hex Driver (HD050M) and suture the gingiva.



1 Place try-in

Place Conical Multi-unit Abutment Try-in (CRTRY45, CRTRY52, CRTRY60) into the implant to determine appropriate correction angle and gingival height.

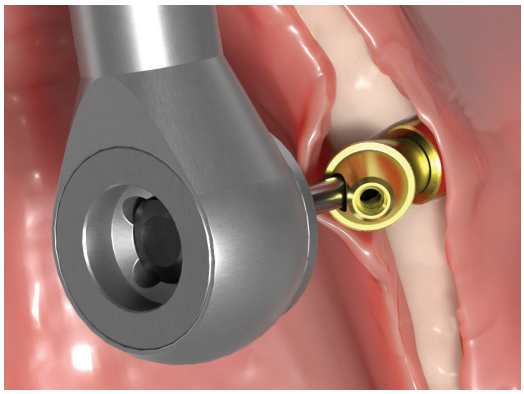
To engage the implant, align the cams of the try-in with the implant's conical connection grooves and press firmly to engage the PEEK snap ring.



2 Deliver implant

Use preassembled delivery handle and .050" Hex Driver to place the selected conical multi-unit abutment in the correct orientation to ensure the abutment is fully seated.

Important:
Abutment screw may not be captured by delivery handle for multi-unit abutments. Abutment screw may be delivered using the .050 Hex Driver.



3 Tighten to final torque

The final torque for the conical multi-unit abutment screw should be 20 Ncm.

Ordering & warranty information

BioHorizons Lifetime Warranty on Implants and Prosthetics for Clinicians: All BioHorizons implants and prosthetic components include a Lifetime Warranty. BioHorizons implant or prosthetic components will be replaced if removal of that product is due to failure (excluding normal wear to overdenture attachments).

Additional Warranties: BioHorizons warranties surgical drills, taps and other surgical and restorative instruments.

(1) Surgical Drills and Taps: Surgical drills and taps include a warranty period of ninety (90) days from the date of initial invoice. Surgical instruments should be replaced when they become worn, dull, corroded or in any way compromised. Surgical drills should be replaced after 12 to 20 osteotomies.[5]

(2) Instruments: The BioHorizons manufactured instrument warranty extends for a period of one (1) year from the date of initial invoice. Instruments include drivers, implant site dilators and BioHorizons tools used in the placement or restoration of BioHorizons implants.

Return Policy: Product returns require a Return Authorization Form, which may be acquired by contacting Customer Care. The completed Return Authorization Form must be included with the returned product. For more information, please see the reverse side of the invoice that was shipped with the product.

Disclaimer of Liability: BioHorizons products may only be used in conjunction with the associated original components and instruments according to the Instructions for Use (IFU). Use of any non-BioHorizons products in conjunction with BioHorizons products will void any warranty or any other obligation, expressed or implied.

Treatment planning and clinical application of BioHorizons products are the responsibility of each individual clinician. BioHorizons strongly recommends completion of postgraduate dental implant education and adherence to the IFU that accompany each product. BioHorizons is not responsible for incidental or consequential damages or liability relating to use of our products alone or in combination with other products other than replacement or repair under our warranties.

Distributed Products: For information on the manufacturer's warranty of distributed products, please refer to their product packaging. Distributed products are subject to price change without notice.

Validity: Upon its release, this literature supersedes all previously published versions.

Availability: Not all products shown or described in this literature are available in all countries. BioHorizons continually strives to improve its products and therefore reserves the right to improve, modify, change specifications or discontinue products at any time.

Any images depicted in this literature are not to scale, nor are all products depicted. Product descriptions have been modified for presentation purposes. For complete product descriptions and additional information, visit store.biohorizons.com.

References

1. *Semper Hogg W, Zulauf K, Mehrhof J, Nelson K. The influence of torque tightening on the position stability of the abutment in conical implant-abutment connections. Int J Prosthodont 2015;28:538-41*

2. *EI0209 - Instruments-EN.FDA*

Notes

Direct Offices

BioHorizons USA
888-246-8338 or 205-967-7880

BioHorizons Canada
866-468-8338

BioHorizons Spain
+34 91 713 10 84

BioHorizons UK
+44 (0)1344 752560

BioHorizons Chile
+56 (2) 23619519

BioHorizons Italy
800-063-040

BioHorizons Mexico
800-953-0498

Distributors

For contact information in our 90 countries, visit biohorizons.com



shop online at
store.biohorizons.com

BioHorizons®, Laser-Lok®, MinerOss®, AutoTac®, Mem-Lok®, TeethXpress®, IntraSpin®, L-PRF® and Xpression® are registered trademarks of BioHorizons Implant Systems Inc. Genate™ is a trademark of BioHorizons. Unigrip™ is a trademark of Nobel Biocare AB. Zimmer® Dental ScrewVent® and Tapered ScrewVent® are registered trademarks of Zimmer, Inc. AlloDerm SELECT™, AlloDerm SELECT GBR™ and NovoMatrix™ are trademarks of Allergan, an AbbVie company. Grafton® DBM is a registered trademark of Medtronic, Inc. Cytoplast® is a registered trademark of Osteogenics Biomedical, Inc. Puros Dermis is a registered trademark of Zimmer Biomet. Mucograft is a registered trademark of Ed. Geistlich Sogne Ag Fur Chemische Industrie. Symbios PerioDerm is a registered trademark of Dentsply Sirona. Hu-Friedy® is a registered trademark of Hu-Friedy Mfg. Co., LLC. Spiralock® is a registered trademark of Spiralock Corporation. Pomalux® is a registered trademark of Westlake Plastics Co. Locator® is a registered trademark of Zest Anchors, Inc. Delrin® is a registered trademark of E.I. du Pont de Nemours and Company. Bio-Gide® is a registered trademark of Edward Geistlich Sohne AG Fur Chemische Industrie. BioMend® is a registered trademark of Zimmer Biomet Dental. Not all products shown or described in this literature are available in all countries. We are proud to be registered to ISO 13485:2016, the international quality management system standard for medical devices, which supports and maintains our product licences with Health Canada and in other markets around the globe. Original language is English. ©BioHorizons Implant Systems Inc. All Rights Reserved.

L02113

biohorizons camlog

REV B MAR 2026