









Instructions for use for SDS2.2 dental implants

Scope: Art.Nr. SDS2.2_38xx(-xx) - SDS2.2_46xx(-xx)(_6x8) - SDS2.2_54xx(-xx) - SDS2.2_7011 (not available in the US)

Caution: U.S. federal law restricts this device to sale by or on order of a dental professional

Package content/materials: Disposable set in sterile packaging containing

SDS2.2 dental implant/TZP-A zirconium oxid ceramics SDS2.2 insertion tool/stainless steel SDS2.2 cover screw/PEEK



All product contained in this set are disposable and All product contained must **not** be reused!

Intended use

SDS dental implants are designed to artificially replace the tooth root in the human jaw. They serve as an attachment point for prosthetic dentures. They are implantable products for permanent use. They are not suitable for reuse after a single application.

SDS Insertion Tools single-use are sterile single-use instruments delivered with the SDS Dental Implant for inserting the SDS Dental Implants into the jawbone. They can be operated manually or with the surgical contra-angle handpiece and are not suitable for reuse after single use.

Product description:

The SDS2.2 dental implants are an implant system for providing the human jaw with artificial tooth root replacements. The implants are made of TZP-A (Tetragonal Zirconia Polycrystal) zirconia ceramic according to ISO 13356. The SDS2.2 dental implants serve as an attachment point for the prosthetic restoration and are also suitable for patients with metal intolerance

The insertion tool single use SDS2.2_ITscrewST_single-use is already mounted on the implants. This enables both contact-free removal of the SDS2.2 dental implant from the sterile packaging and insertion into the prepared drill tunnel. The packaging unit also includes the SDS2.2 cover screw. which protects the interface of the SDS2.2 dental implant during the healing phase for up to 180 days.

Drill galleries are prepared with the SDS Implantology instrument set according to the SDS drill protocols (see senarate instructions for use for SDS Implantology instrument set and SDS2.2 drill protocols).

The SDS2.2 Dental Implant System also includes various SDS2.2 standard abutments and standard screws to fix the standard abutments during cementation. After insertion of the standard abutments, they allow cementation of prosthetic restorations.

SDS2.2 implants can either heal transgingivally without a temporary restoration or, if the primary stability achieved is adequate for the corresponding functional loading, be immediately restored with a temporary restoration. A healing period of 3 months is recommended for good bone quality and 6 months for cancellous bone quality.

Product variants:

SDS2.2 implants are available with different implant shoulder designs:









(balcony shoulder)

SDS2.2 xxxx-ov SDS2.2 xxxx-ba *not available in the US

These different designs allow for insertion in interdental gaps of different dimensions. The same surgical technique is used for the different implant shoulder designs.

Indications for use:

SDS2.2 dental implants are intended as artificial replacements to be placed in the human upper and lower iaw to provide anchor points for the prosthetic restoration. They are indicated for transgingival healing. The implants are indicated for immediate loading when good primary stability is achieved and with appropriate occlusal loading. Additional information for the use of SDS2.2 dental

implants:

 Indicated for situations where implants are connected by interlocking or bridge restoration · SDS2.2_46xx/SDS2.2_54xx are permitted as

single-tooth implant for incisors, cuspids, premolars and

- molars and for bridge restorations SDS2.2 7011 (not available in the US) are permitted for molars (e.g. for taproots)
- SDS2.2 dental implants must be inserted at tissue-level

Contraindications:

Existing medical conditions or poor general health can limit the possibility to insert dental implants surgically. Bruxism and insufficient bone quality/quantity requires specific measures to ensure treatment success. SDS implants are not suitable for applications in which the risk of excessive bending moments exists (e.g. extended crowns, extension bridges, bridges with more than one pontic unit).

- Small diameter implants and angled standard implant posts are not recommended for the posterior region
- SDS2.2 dental implants may not be used in bone-level SDS2.2 38xx may not be used in bridge restorations
- · SDS2.2_38xx may not be used for upper central incisors,
- cuspids and molar region · Bone not completely healed (residual ostitis/NICO)
- · Serious and systemic health problems in patient
- Bruxism
- · Untreated periodontitis, poor oral hygiene, untreated abscess or bone infection
- · Crown-length greater than the osseointegrated threaded segment
- Cantilever bridges/extension crowns (mesial or distal)
- · Pontic width between two bridge abutments bigger than one premolar width
- · Connection of tooth with implant

The patient must be informed of risks, side-effects and possible complications as well as of necessary precautions in connection with SDS2.2 dental implants. Anatomical and general health conditions can have negative impact on dental implants.

Known risk factors:

- Poor bone quality · Poor oral hygiene
- Diseases like blood disorders or untreated hormonal disorders
- · Alcohol or drug abuse
- · Nicotine abuse
- · Stress during the healing phase
- Side effects/possible adverse reactions: · Pain, swelling, infection of soft- and hard tissue
- Dysaesthesia/paraesthesia
- · No osseointegration

- Loss of osseointegration
- · Bone defects necessitating bone grafting · Perforation of sinus, mandibular base, floor of the
- mouth or lower alveolar canal Damage to neighboring teeth/tooth roots
- Excessive bone loss which might necessitate surgical intervention
- Aesthetic problems
- Fracture of implant

Serious incidents related to the product must be reported immediately to the manufacturer as well as to the competent national authority

Preparation:

Intensive diagnostics of the oral cavity must be performed ahead of every implant procedure. It is necessary to take and assess appropriate X-rays (OPG/DVT/CT) to clarify anatomical structures. Expected physiological chewing forces and any parafunctional habits must be considered in selecting the implant.

Application:

Use the attached insertion tool single use to remove the SDS2.2 dental implants from the sterile packaging without touching them and then insert them into the prepared drill holes. They are inserted manually into the jaw bones using the SDS torque ratchet or mechanically using the SDS adapter insertion tool ISO attachment. Do not apply more than 35 Ncm torque.

Remove the disposable insertion tool. Insert and hand-tighten (max. 5 Ncm) the SDS2.2 cover screw by using the accessory SDS2.2 screwdriver. Remove cover screw after healing and attach SDS2.2 standard implant post by cementation. Screw retaining of SDS2.2 standard implant post during the cementation process with SDS2.2 standard PEEK screw is mandatory to ensure implant post is fixed at final position during cementation. SDS recommends cementation with Ketac™Cem Automix (observe IFU and user manual of the manufacturer). See separate IFU for SDS2.2 standard implant posts/standard screws and user manual for cementation procedure.

Remove SDS2.2 standard screw before the cement is completely cured (only applicable for the US). After installation, SDS2.2 standard implant posts enable cementation of prosthetic restorations. Standard surgical procedures must be applied. Incorrect surgical techniques can lead to functional failure of the implant and bone loss in the supporting bone structure or other side effects.

The products are intended for use by qualified dentists who have received extensive theoretical and practical instruction in the product and its application from SDS Swiss Dental Solutions. SDS products cannot be purchased without proof of the mandatory product training

The products may only be used in dental clinics and surgeries and therefore in appropriately clean and sterile

The operator is responsible for selecting the implant after thorough diagnosis of the oral cavity and study of any X-ray images for the assessment of osseous structures (OPG/ DVT/CT). Expected physiological chewing forces and any parafunctional habits must be taken into consideration when selecting the implant.

Combination with other products:

The products are intended for exclusive use within the SDS system; combination with other implant systems is not indicated unless explicitly approved by SDS.

✓! Warnings:

- · The operator is responsible for checking the sterile package and implant for damage before use as well as for the materially and technically correct handling of the implants. Do not use products if the primary packaging or packaging seal is damaged
- · It is prohibited to use products beyond their use-by date

- · If the implant is exposed to pressure beyond its capacity, excessive bone loss or fracture of the implant can occur
- · SDS products must always be secured to prevent aspiration/ingestion in case of intraoral use
- Observe the operating instructions of the device manufacturer for laser applications
- Appropriate hygienic measures must be observed when handling the implants. Contact with objects which could damage the implants must be avoided.

MRI safety instruction:

The SDS2.2 dental implant system has not been evaluated for safety and compatibility in the Magnetic Resonance (MR) environment. It has not been tested for heating, migration or image artifact in the MR environment. The safety of the SDS2.2 dental implant system in the MR environment is unknown. Scanning a patient who has this device may result

Storage and handling:

SDS implants are provided in sterile packaging and must be stored in original packaging under conditions stated on the label. They must be protected against external influences. like impact, shock and falling when transported in the facility. Do not use the implants if the inner package is moist, damaged or partially/fully open.

Cleaning and disinfection:

SDS implants are provided in sterile packaging and are intended for single use; they must not be reused! For hygienic, technical and quality reasons, SDS implants must not be sterilized or disinfected either.

Adhere to the general requirements for the disposal of medical devices when disposing of SDS implants, the packaging material and any accessories.

Additional information for grinding SDS2.2 implants:

- · The SDS2.2 implant shoulder must not be prepared before insertion of the implant
- · SDS recommends preparation of the SDS2.2 implant shoulder if necessary after final osseointegration of the implant before the impression taking procedure
- Do not grind SDS2.2 38xx implants
- Only prepare SDS2.2 46xx/SDS2.2 54xx in the visible/ aesthetic area of the implant shoulder to adjust them to the contours of the gingiva. The outer diameter of the implant shoulder may be reduced by a maximum of 0.5
- The reduced circle segment must not exceed 5mm and the reduction of the implant shoulder must not exceed



Adhere to the following preparation rules: · Use single-use, sterile fine-grain diamond bur,

granulation 46 µm (redring)

· Spray jet cooling not less than 50 ml/min

- · Observe the operation instructions of the diamond bur manufacturer for maximum speed (NB: pay attention to the transmission of your angle piece)
- Application pressure on the rotating instrument must not exceed 20N

✓! Warranty:

The SDS product may only be used according to the manufacturers instructions. The operator is responsible for ensuring that the product is used for its intended purpose and must also assess whether the product is suited to the patients particular situation. SDS implants may only be used in combination with SDS products or products which are authorized by SDS. The SDS warranty is invalidated by the use of third-party products that are not approved by SDS. Liability will not be accepted for products that have been modified, misused or fitted incorrectly

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EC REP

Syllibols			
REF	order number		
LOT	LOT number		
MD	medical device		
[]i	observe instructions for use		
STERILE R	radiation sterilization		
	single sterile barrier system		
2	not reusable	i	Fig imi the
STEP LEE	do not re-sterilize		typ
®	do not use if package is damaged		
<u>^!\</u>	attention		
$rac{rac}{rac}$	dry storage		
$R_{N_{only}}$	sale by or on the order of a dental professional only		
Σ	use-by date		
سا	date of manufacture		

Until the EUDAMED modules are fully available, the Summary of Safety and Clinical Performance report is available for viewing at www.swissdentalsolutions.com (subject to approval by the notified body).

manufacturer

torage temperature

protect against sunlight

representative in the EC

CE mark with number of notified body

Packaging removal of SDS2.2 dental implant:

SDS2.2 sterile dental implant shall be removed immediately prior to implant placement. The sterile dental implant must be placed immediately after opening the blister and must not be placed or stored in the sterile field/ surgical tray or elsewhere before implantation. Do not touch the implant. If the dental implant is touched it is non sterile and must be discarded



Fig. 4: clinician (sterile) grips the sterile blister inlay with the mounted dental implant with thumb and index finger without touching the outer surface of the blister



Fig. 8: clinician removes the insertion tool with the assembled dental implant from the inlay by simply rotating the implant downwards and thus removing it from the attachment clip without touching the inlay with the implant



Fig. 1: non-sterile dental assistant opens SDS2.2 dental implant primary packaging in non-sterile area and removes he blister; clinician checks label to identify correct implant





Fig. 9: clinician removes the insertion tool with the assembled dental implant from the inlay by simply rotating the implant downwards and thus removing it from the attachment clip without touching the inlay with the implant



Fig. 2: non-sterile dental assistant opens sealed blister-lid without touching the sterile inner surface of blister or sealing



Fig. 3: non-sterile dental assistant presents opened blister to the clinician without touching the sterile inner surface of blister or sealing edge



Fig. 7: clinician grips the insertion tool with thumb and index

finger of the other hand

Fig. 6: clinician turns up the side with the implant



Fig. 10: insertion tool with assembled dental implant ready for insertion into the drill-hole: SDS2.2 dental implant may not be modified by grinding before insertion into the drill hole and appropriate wound closure, adhere to SDS preparation rules





For technical support and further informationplease contact:

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