GenXT

Next Generation Implantology

ROOTFORM

GenXT
Next Generation Implantology

ROOTFORM

New generation two-component GenXT implants

Implants were developed and improved
in accordance with the concept of Open Dental Community
whose members aspire to great opportunities
and appreciate operational comfort
in various clinical cases

A thorough system analysis followed by the modernization
of each element - from implant surface to packaging

Two-component Rootform implant with combined thread and reliable tapered connection is intended for single and multiple restorations with immediate and delayed loading in the upper and lower jaws in all types of bone tissue.

Implant can be placed by flap or flapless approach with subcrestal position of the implants. Implant placement is also possible immediately following tooth extraction, as long as sufficient bone tissue is available vertically and horizontally.

The implant is delivered in a sterile package with a multifunctional carrier, a two-component holder and a cover screw. A blister label has three peel-off stickers: for clinical documentation and implant passport.

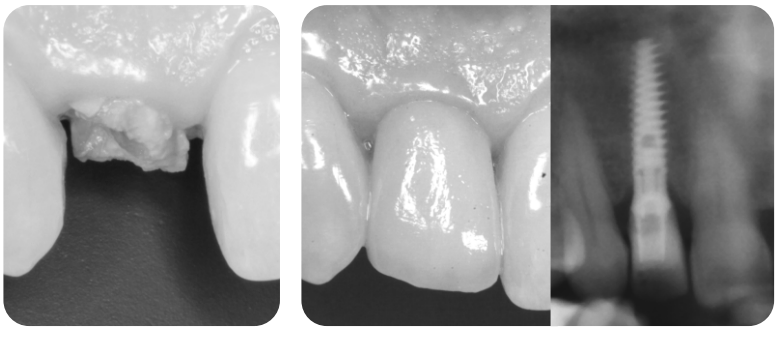
Open Dental Community

- Excellent primary stability in all bone types
- Active self-tapping thread
- Reliable tapered connection between implant and abutment

Users comment on favourite sizes

"Rootform implants have a wide range of sizes allowing me to use these implants in all types of bone and to achieve perfect stability and results. Furthermore, now the new cone connection makes my work more secure, as I no longer have to worry about screw loosening and other problems associated with conventional internal hex connection."

Dr.Malinovskij



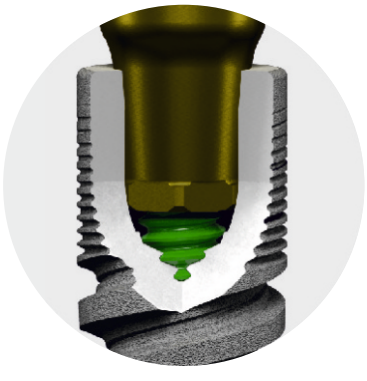
before 3-year follow-up

Variety of prosthetic solutions

from cemented fixation
to CAD-CAM multi-unit components
with screw fixation

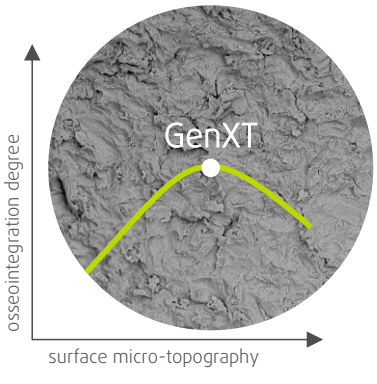
Cone connection

between implant and abutment
creates tight and reliable space
for all prosthetic solutions



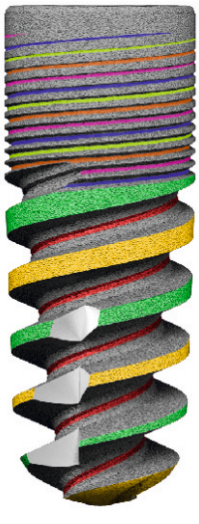
Surface

HA/TCP was used as a sandblasting
media with later etching
for surface cleaning and reaching
the optimum surface
micro-topography



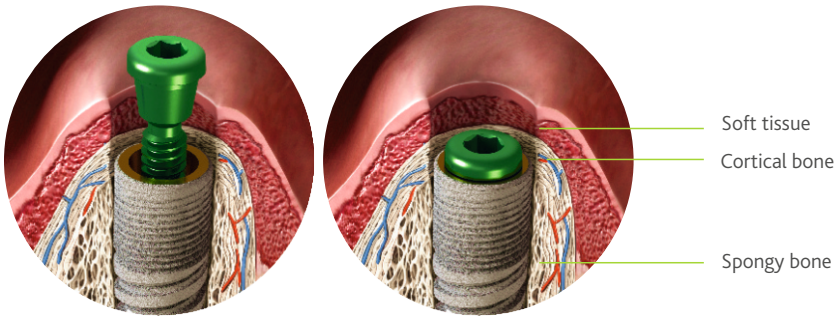
Combined thread

The combination of M,U
and microthread



Cover screw

is 0.8 mm above implant level for more convenient subcrestal positioning of the implants. Ti6Al4V material with surface polished and anodized to green colour.

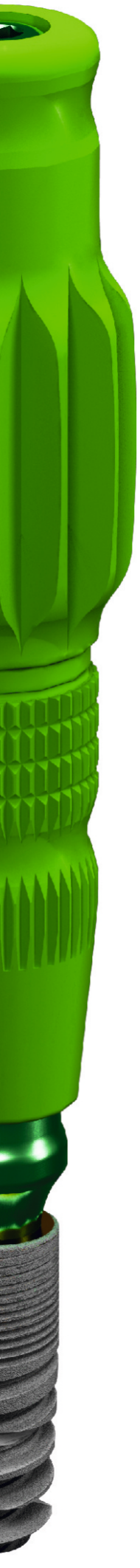


Multifunctional holder

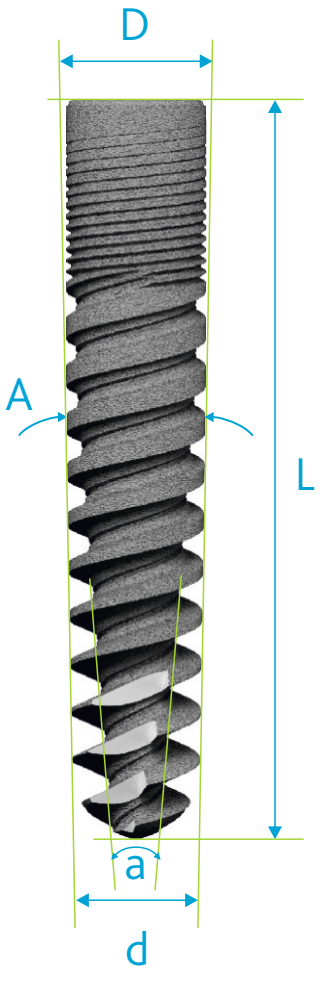
is used with insertion tool for external platform ITE.
Maximal torque should not exceed 40 N/cm.
Can be used as a temporary abutment, as a transfer for open / closed tray or as a healing abutment.
Surface is polished and anodized in green.

Plastic holder

is developed for initial implant insertion.
If access is restricted upper part of the holder can be demanteled.



R3016



R5506

Ultra-short

	D d	Ø 3.0 mm Ø 2.7 mm	Ø 3.5 mm Ø 3.1 mm	Ø 3.8 mm Ø 2.3 mm	Ø 4.2 mm Ø 2.3 mm	Ø 4.8 mm Ø 2.9 mm	Ø 5.5 mm Ø 3.6 mm
Ultra-thin	L 6 mm A~2° a~11.5°		R3506	R3806	R4206	R4806	R5506
	L 8 mm A~2° a~10.5°		R3508	R3808	R4208	R4808	R5508
	L 10 mm A~2° a~9°	R3010	R3510	R3810	R4210	R4810	R5510
	L 12 mm A~2° a~7.5°	R3012	R3512	R3812	R4212	R4812	R5512
	L 14 mm A~2° a~6.5°	R3014	R3514	R3814	R4214	R4814	R5514
	L 16 mm A~2° a~5.5°	R3016	R3516	R3816	R4216	R4816	R5516

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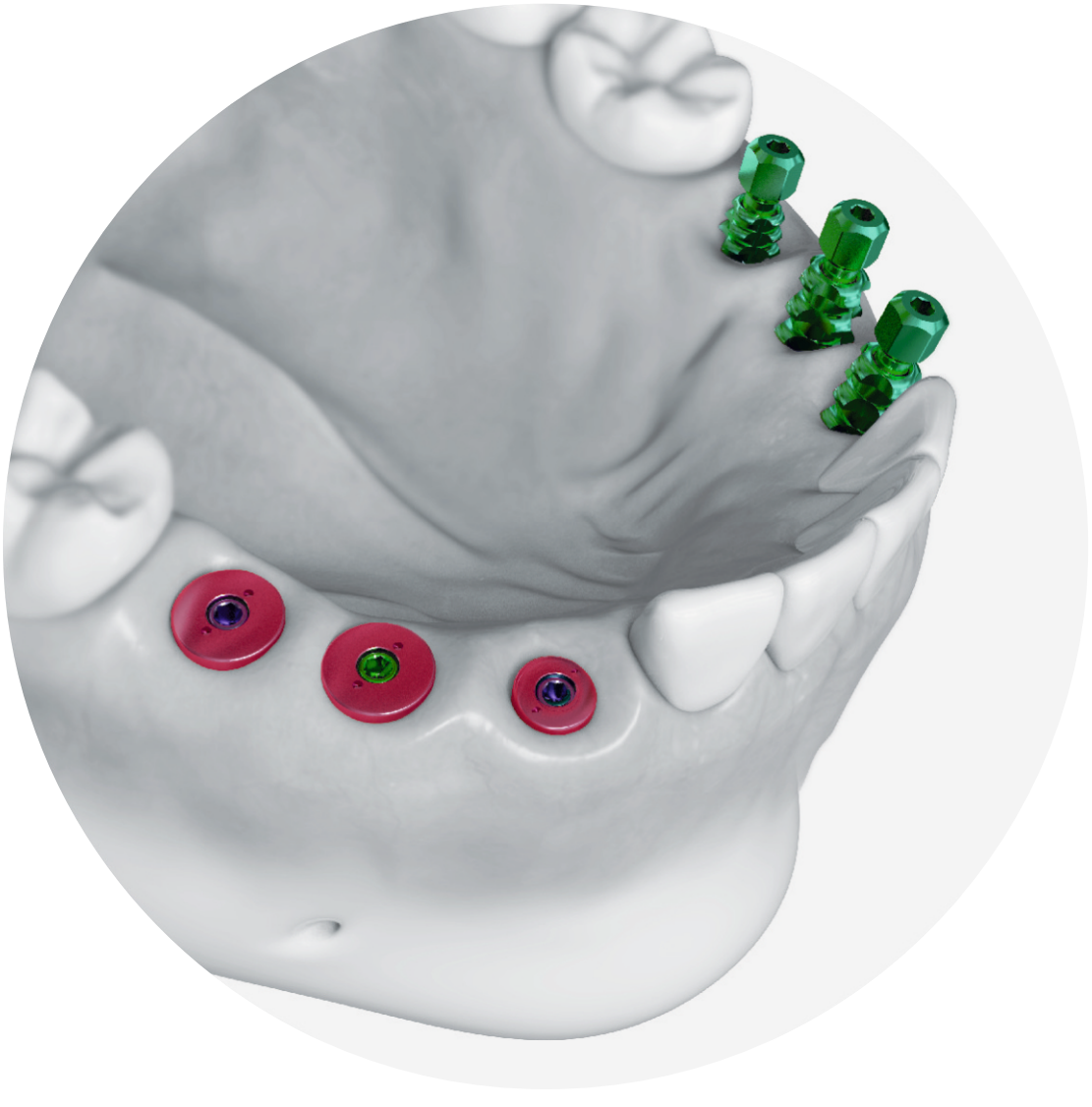
Soft tissue management and impression taking



Gingiva formers

Interface

Special holder handy interface
for comfortable intraoral work

Surface

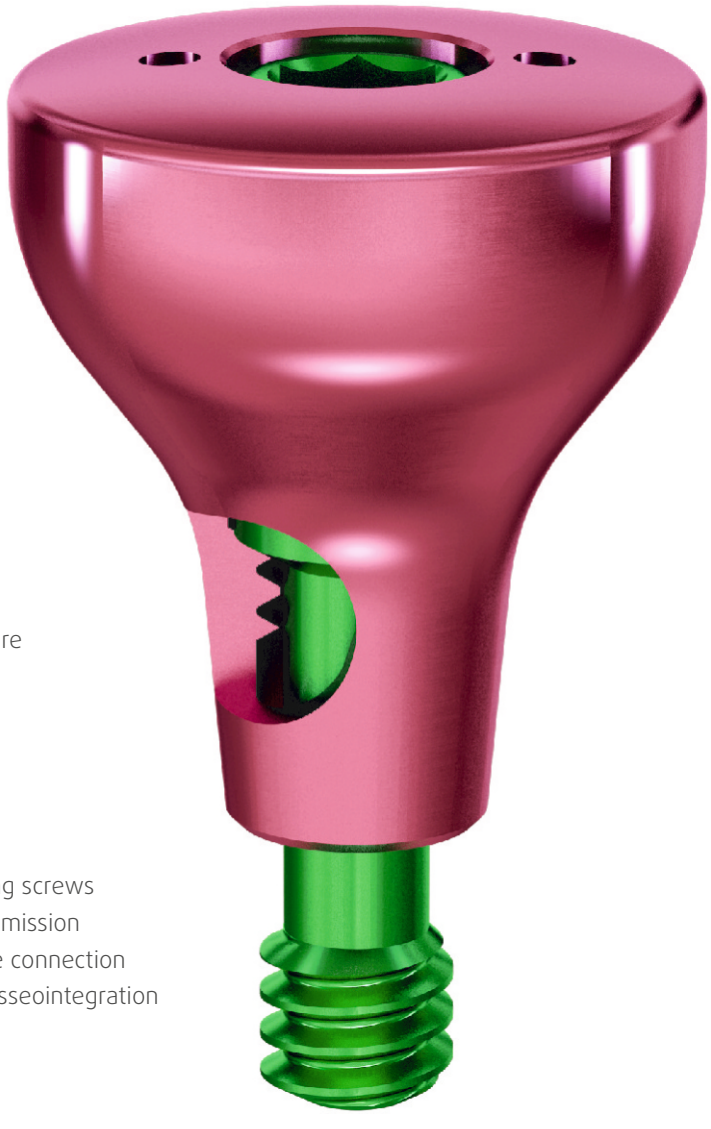
Polished surface is anodized
to the natural gingiva colour

Internal thread

allowing to remove a gingiva former
using SR tool eliminating excessive pressure
on the implant

Two-piece

Gingiva former consists of a body and fixing screws
allowing to exclude undesired torque transmission
to the implant when twisting it of the cone connection
while the implant is in the early stage of osseointegration



GF1 GF2 GFN2 GF3 GF4 GFN4

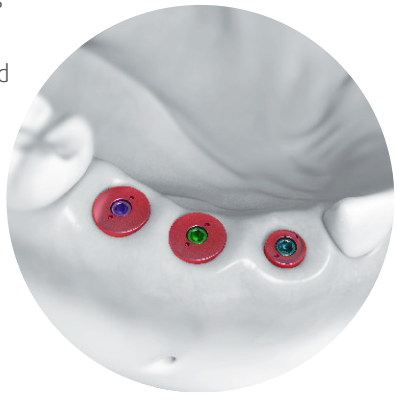
Fixing screw

Has a height-dependent color code
and covers a former like an implant cover screw
preventing the ingress of food

GF1 1 mm
GF2 2 mm
GF3 3 mm
GF4 4 mm

Anatomical gingiva formers

Should be used in all cases except narrow spaces where narrow abutments (A1N) and abutments with attachments are used. The height is selected depending on gum biotype.
Former shape corresponds to the gingival part of anatomical and transgingival abutments of the corresponding size.



GFN2 2 mm
GFN4 4 mm

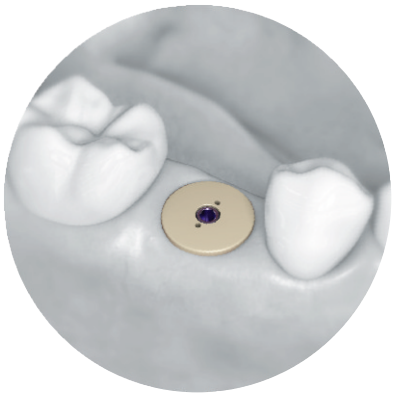
Narrow gingiva formers

Are used in cases of insufficient space to place anatomical abutments and to form the gums using straight abutments with attachment.

GFI

Individual gingiva former

Is used to create the required gingival contour in aesthetically important areas, generally along with gum contour surgical correction. Can be used as a temporary abutment. Made from biocompatible plastic.



Users comment on gingiva formers

"New gingiva formers are very comfortable with their installation taking much less time. Passive formers installation allows you to feel confident, without fear for the stability of the implant, which is especially important when working with early loading".

Dr. Fursa

Transfers for open tray

Should be used in all cases. Supplied with ST transfer screw.
Available in standard (TO, 11.5 mm) and short (TOS, 6.5 mm) versions.
Surface is polished and anodized to green color to add contrast
during impression taking. Ti6Al4V material.

Conical connection

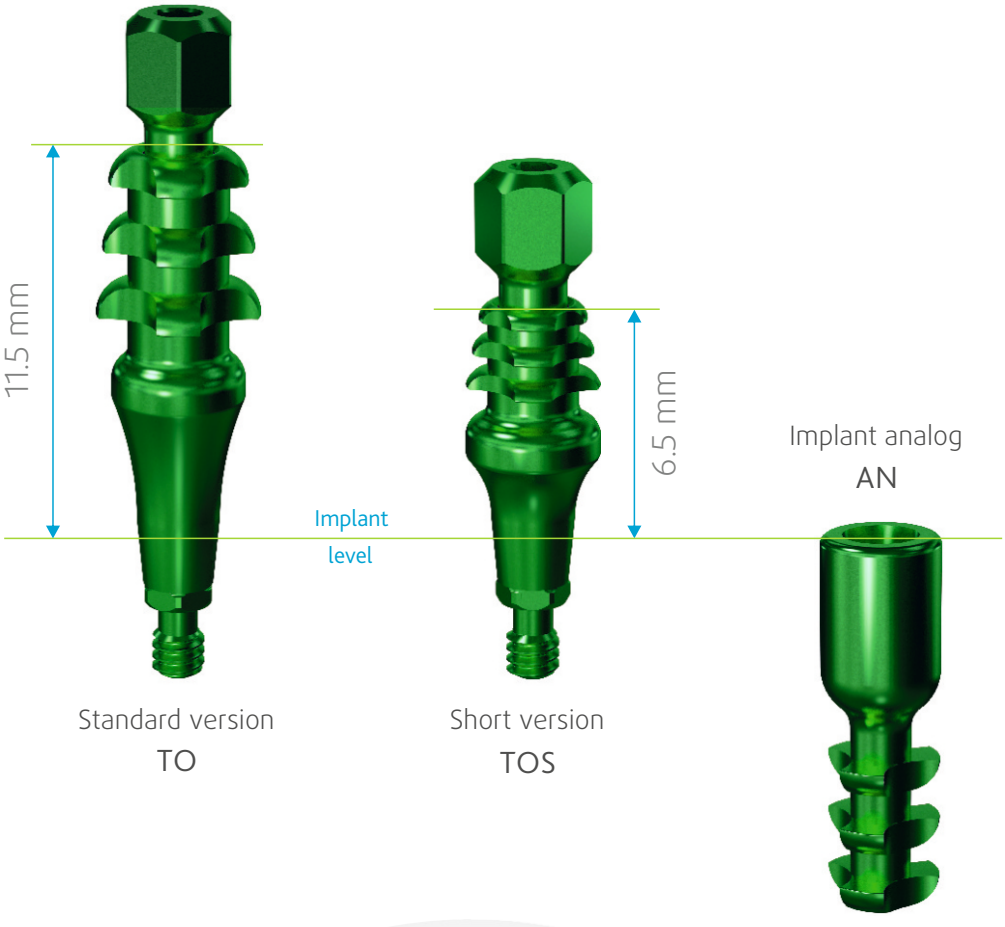
together with hex allows you to transfer the exact position of the implant into the laboratory model. In some cases, due to the taper lock it's possible to use a transfer for close tray.

Interface

with impression material has special configuration, allowing you to evenly distribute the material around the interface.

Internal thread

Simple transfer removal with a removable key (SR), eliminating undesired force on the implant in case of extra fixation


11.5 mm
6.5 mm
Implant
level
Implant analog
AN
Standard version
TO
Short version
TOS

Transfers for close tray

Two versions for different techniques of impression taking:
Via a plastic transfer cap TC, placed on transfer TR
Via direct impression taking from a transfer TOD.
Surface is polished and anodised to green color
to add contrast during impression taking.
Material - Ti6Al4V.

Interface

Precise fixation with a click
by the inner ring between transfer
and transfer cap

Internal thread

Simple transfer removal with a removable key (SR),
eliminating undesired force on the implant
in case of extra fixation

Conical connection

together with hex allows you to transfer the exact position
of the implant into the laboratory model.
In some cases, due to the taper lock it's possible
to use a transfer for close tray.

TR

TC

Straight transfer for close tray

Is used when there is insufficient clinical height in the distal parts of the upper and lower jaws and when implant axes diverge by up to 20°. Supplied with SL8 laboratory fixing screw.

The innovatory plastic cap fixation system provides an accurate cast comparable with open tray transfer. The semicircular cutout matches the anti-rotation slot and allows several transfer caps to be placed in a narrow space.

TOD

Transfer for direct impression taking

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Restorations with cement-retained, screw and hybrid fixation

Anatomical abutments

Should be used for creating cemented constructions and constructions with lateral screw fixation. The gingival part has been designed on the basis of a detailed analysis of the cervical zone of the natural tooth. The anatomical shape of the abutment allows to work with subcrestal position of the implants and significantly reduces the time usually spent on milling standard abutments.

Available in straight and angled versions.
Supplied with an individually packed laboratory fixing screw (SL8 - red) and a clinical screw (S8 - green).

Surface

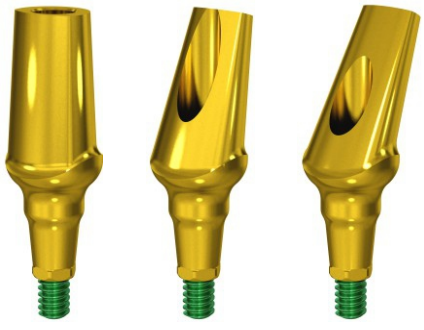
The abutment is made of Ti6Al4V, polished and anodized in gold color, allowing more aesthetics to be achieved in soft tissues

Internal thread

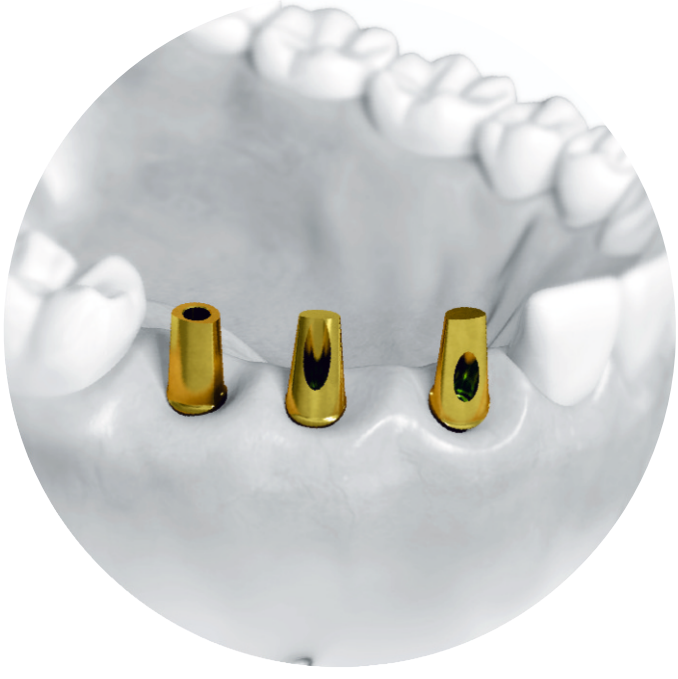
Simple abutment removal with a removable key (SR), eliminating undesired force on the implant in case of extra fixation

Conical connection

together with hex allows you to securely lock the abutment, creating a tight connection with the implant and preventing undesired micromotion.



	Straight	15°	25°
1 mm	A1	A1A15	A1A25
2 mm	A2	A2A15	A2A25
3 mm	A3	A3A15	A3A25
4 mm	A4	A4A15	A4A25



A1N

Narrow

Is used to create cemented constructions and constructions with lateral screw fixation in cases of insufficient space to place an anatomical abutment and when implants are placed at or above gum level. Supplied with an individually packed SL8 laboratory fixing screw and S8 clinical screw.

Transgingival abutment

Is used to create single cemented constructions in the masticatory area and to prepare temporary constructions for immediate implant loading.

Adjustable height only. Horizontal limiting marker prevents the abutment from being shortened by more than 4 mm, ensuring stable fixation.

Delivered with BP burnout cap to ensure precise alignment of the metal body and prevent cementing failure.

Supplied with an individually packed SL8 laboratory fixing screw and S8 clinical screw.

Conical connection

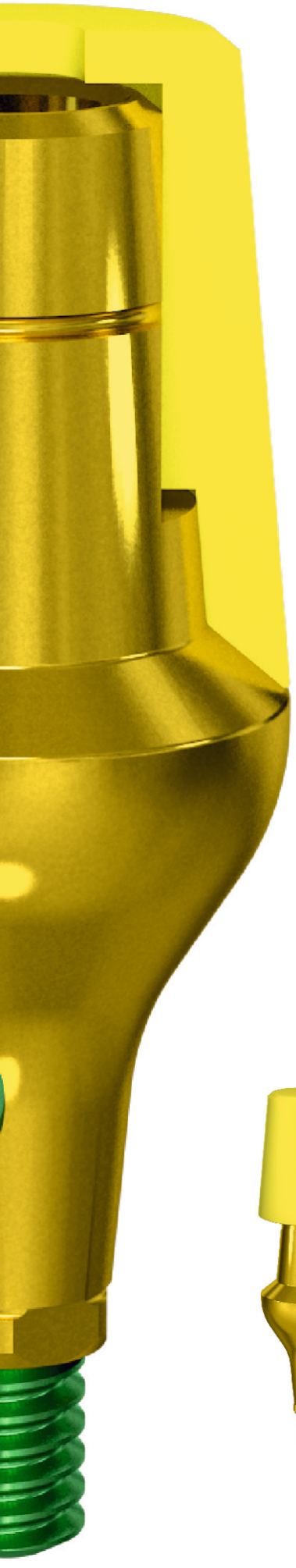
together with hex allows you to securely lock the abutment, creating a tight connection with the implant and preventing undesired micromotion.

Internal thread

Simple abutment removal with a removable key (SR), eliminating undesired force on the implant in case of extra fixation

Surface

The abutment is made of Ti6Al4V, polished and anodized in gold color, allowing more aesthetics to be achieved in soft tissues



AT1
1 mm

AT2
2 mm

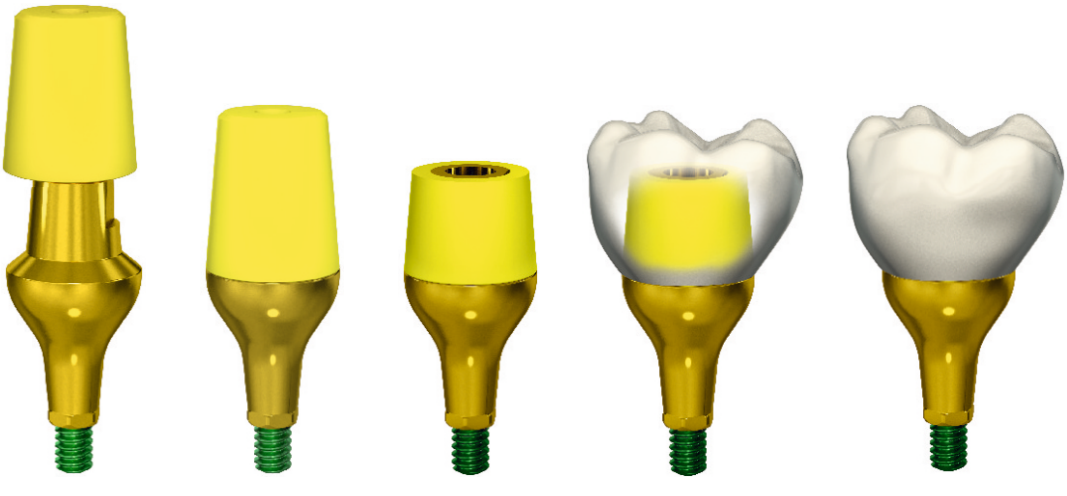
AT3
3 mm

AT4
4 mm

BP

Burnout cap

Is used to prepare a highly-accurate metal body for precise alignment and to prevent cementing failure, which is extremely important when creating single cemented constructions in the masticatory area.



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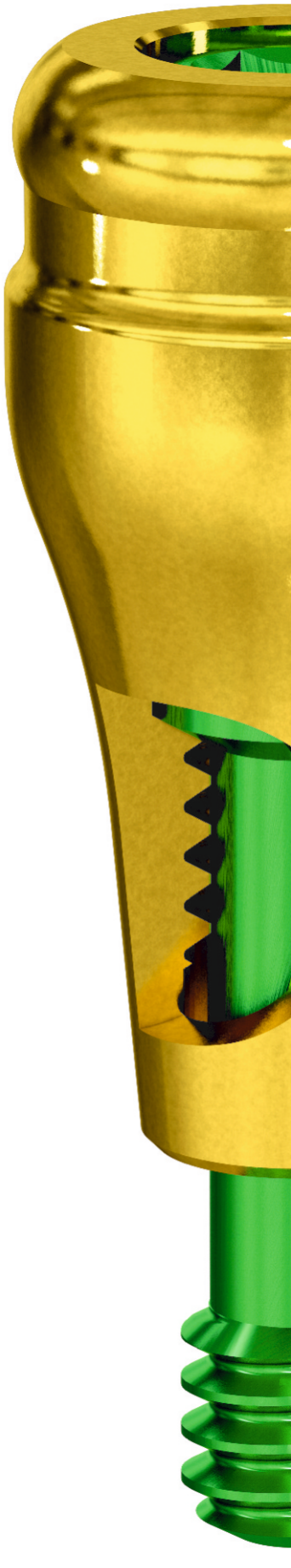
Attachment-retained restorations

Abutment with attachment

Is used to improve fixation and stabilize dentures
in the upper and lower jaws. An abutment with attachment
is used when the axes of positioned implants
diverge by up to 40°



Conical connection

allows you to securely lock
an abutment, creating a tight connection with the implant
and preventing unwanted micromotion.

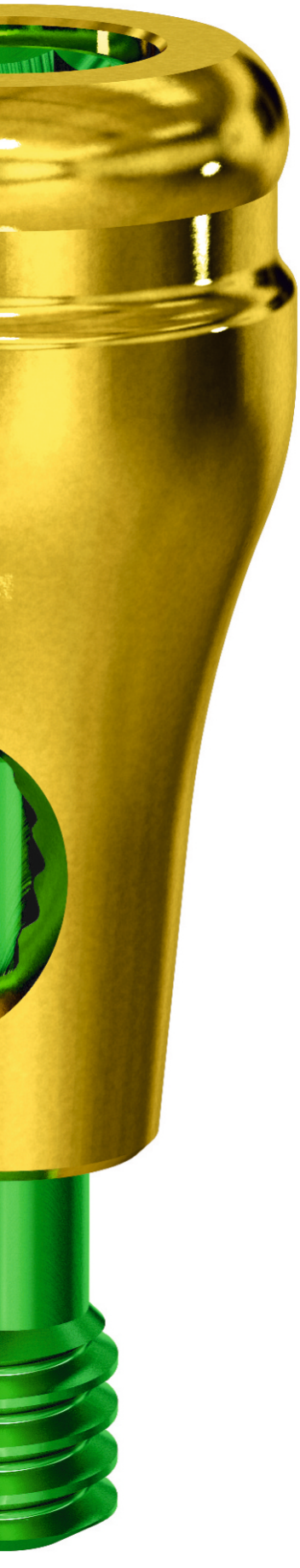
Internal thread

Simple abutment removal with a removable key (SR),
eliminating undesired force on the implant
in case of extra fixation

Surface

The abutment is made of Ti6Al4V,
polished and anodized in gold color,
allowing more aesthetics to be achieved
in soft tissues

B1	B2	B3	B4	B5
1 mm	2 mm	3 mm	4 mm	5 mm



Retention insert

Six retention inserts, color-coded according to the pull-off weight or retention value, are available for matrices fixation.

2010.710
extra-light retention

2010.713
strong retention

2010.711
light retention

2010.714
extra-strong retention

2010.712
medium retention

2010.715
ultra-strong retention

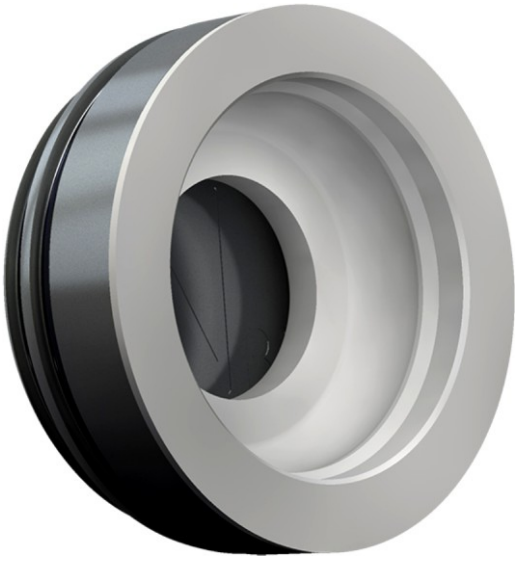
Mounting and demounting tool for retention inserts

After mounting inserts removal, they are placed inside the matrix housing as required. For this purpose mounting and demounting tool for retention inserts is used ensuring easy handling. In this way, retention inserts can be replaced without stress or damage..

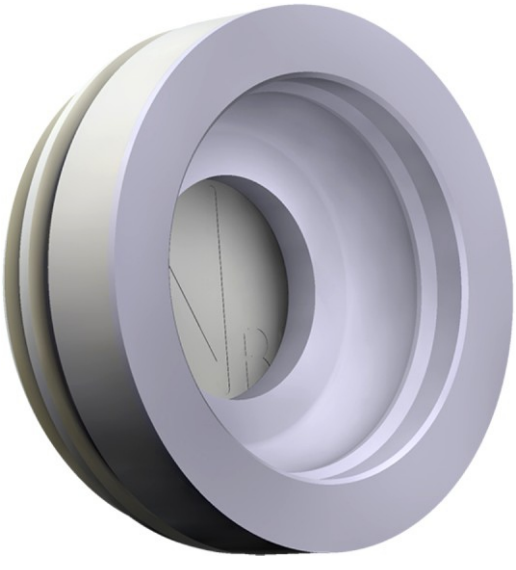
2010.741

Matrix housing

Matrix housing is available in titanium and beige plastic (PEEK).
Titanium matrix housing can be inserted in the usual manner.
Plastic version is used for extreme labial or buccal positions,
as well as in aesthetically demanding areas where treatment
has to be provided without the use of metal constructions.



2010.701
Matrix housing (Ti6Al4V)
including retention insert (PEEK)



2010.702
Matrix housing (PEEK)
including retention insert (PEEK)

2010.703

Titanium matrix housing with attachment option

Titanium matrix housing with attachment option finds its indication in low-lying or not ideally selected abutment heights. Sufficient support in denture bases can be achieved by shortening the additional fixing steps.

2010.722

Forming/fixing matrix

Forming/fixing matrix is slightly higher than complete matrix. In the process of transfer/molding into existing dentures, the matrix provides an overview of whether there will be sufficient space for the matrix with due consideration to potential obstructions such as metal reinforcements, artificial teeth etc.
Inside the mouth, the forming/fixing matrix is placed onto the abutment with attachment. A perceptible and audible "click" ensures the accurate positioning of the forming/fixing matrix. Then proceed with the pickup impression as with a working standard.
Thanks to its minimal space requirements, the forming/fixing matrix can also be used as a fixation cap for check-bites, templates, bars, provisional dentures etc.

2010.725

Mounting insert

The mounting insert serves to protect the interior of the matrix housing and to secure the cap in place during processing. Thanks to its outstanding fit and functionality, a mounting insert ensures the accurate positioning of the cap on the attachment male; it also prevents any plastic from entering into the cap during polymerization. The mounting insert must only be removed after polymerization of the cap into the denture, using removal tool for mounting inserts

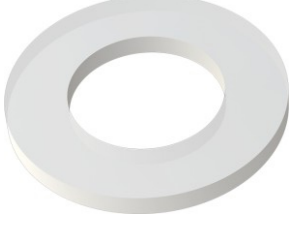
2010.731

Mounting insert removal tool, analogue holder

2010.723

Processing spacer

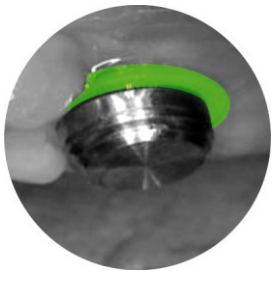
White processing spacer is the ideal space holder for the later polymer or glue fixation of the original matrix into model-cast or cast metal-reinforced dentures thanks to the slightly oversized dimensions of the matrix.
The outside surfaces of the processing spacer are slightly angled, thus creating a self-retentive gap for the admission of a matrix housing into the metal in model-cast or cast metal-reinforced structures.



2010.724

Mounting collar

White mounting collar is used for direct matrix fixation in the patient's mouth.
To this end, the mounting collar is placed below the retentive molding at the attachment male and pushed flush with the matrix that is to be glued in place.
This prevents excessive polymer or glue from attaching itself to the cylindrical neck of the abutment with attachment, with the consequence of firmly locking the denture to the screwed in abutment with attachment.



2010.721

Model analog

The neck area of the model analog -blue- is identical in size with the abutment with attachment, thus ensuring that the impression material cannot cause irritation when positioning the model analog into the impression.

2010.751

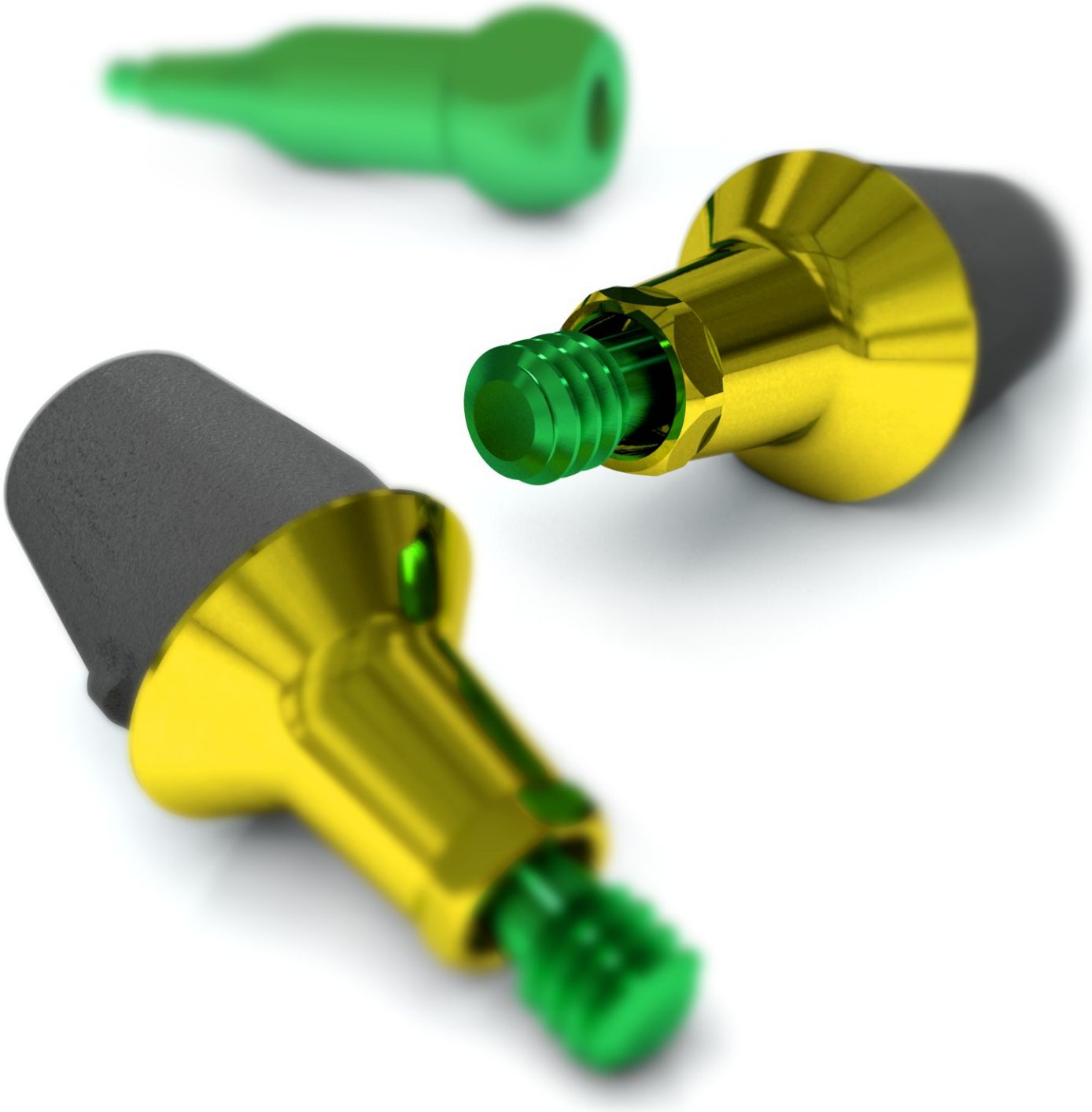
Matrix housing extractor

Extractor stands out for its simplicity and efficiency.

2010.101

Equipment box

Equipment box, specifically designed for dentists and dental technicians, stands out for its clear and user-friendly lay-out. It contains the full range of system parts as well as the three corresponding tools. The lay-out and fitting of the box ensures that all individual parts remain within their individual storage containers when the box is closed. In addition, the box is made of an extremely shock-and shatter-resistant material, that fully complies with the existing standards in the dental and laboratory practice.



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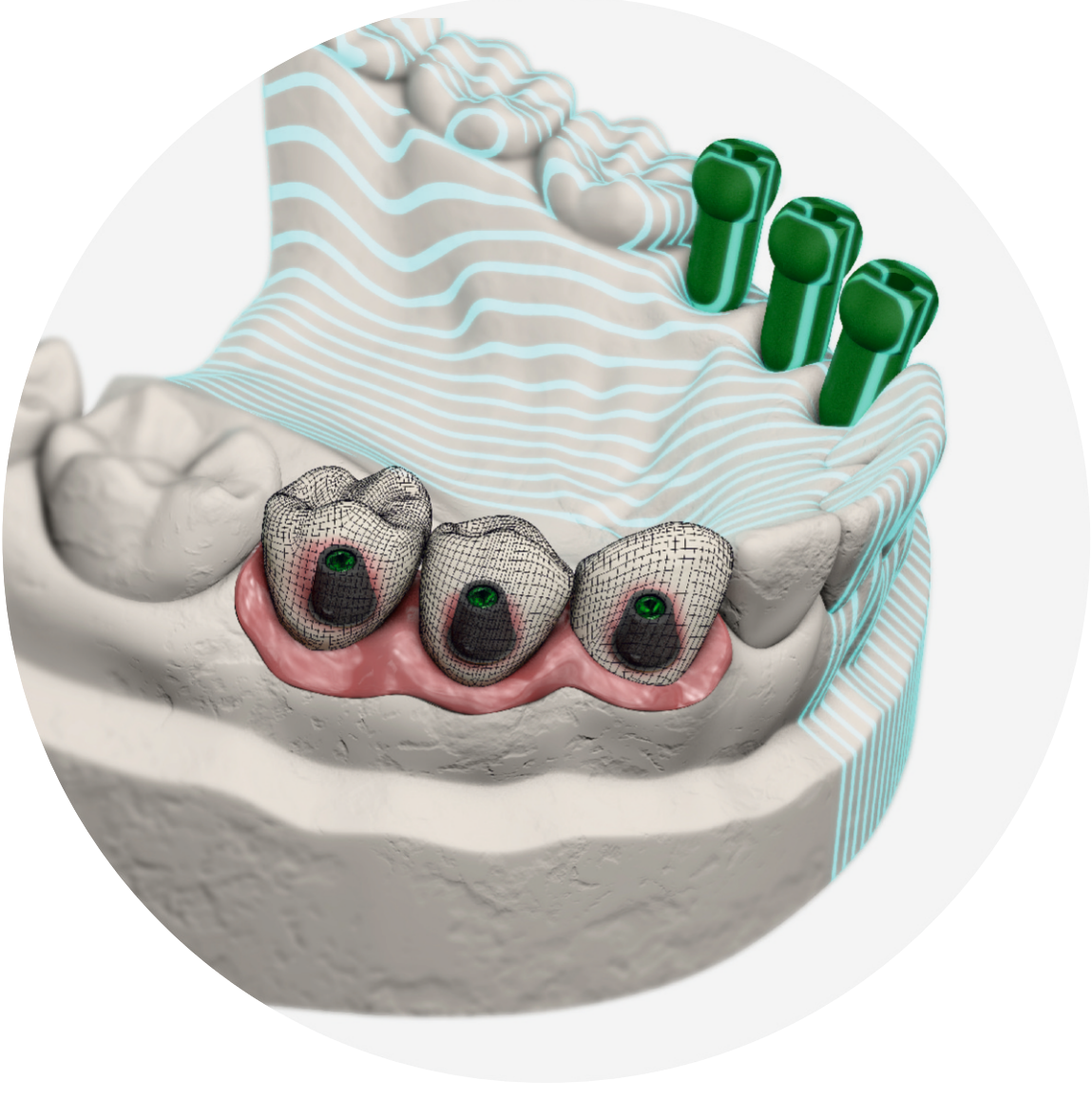
Digital restorations with cement-retained, screw and hybrid fixation

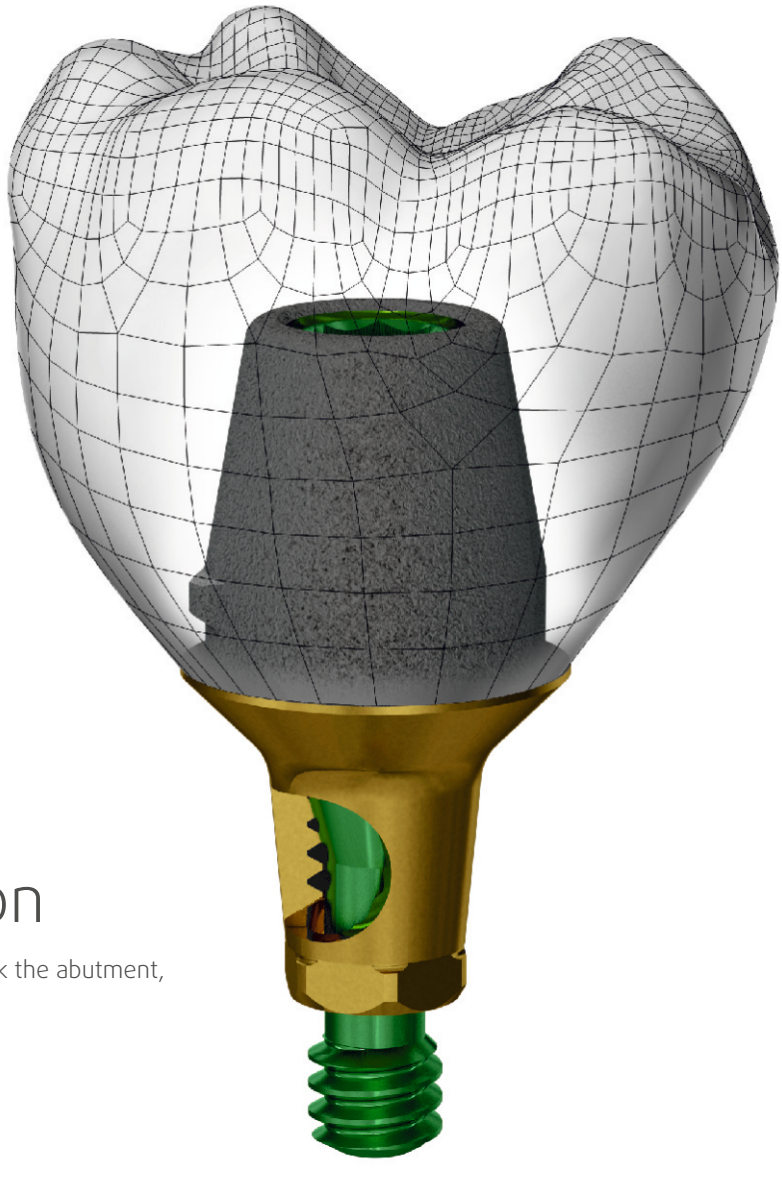


Titanium base
for individual abutments

Designed towards the latest requirements of digital dentistry.
Base design together with a particular milling protocol
can significantly reduce the time for crowns manufacture.

Surface

Sandblasted base with gingival area
and implant interface anodized
in gold color allowing to achieve
better aesthetic in soft tissues.
Titanium base is made of Ti6Al4V.



Internal thread

Simple base removal
with a removable key (SR),
eliminating undesired force on implant
in case of extra fixation

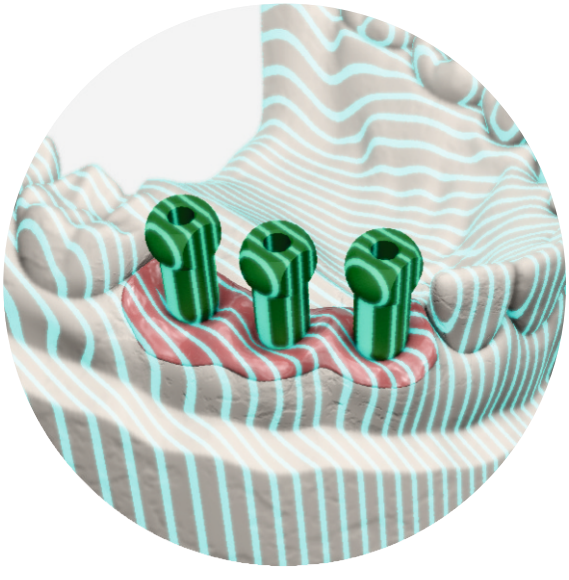
Conical connection

together with hex allows you to securely lock the abutment,
creating a tight connection with the implant
and preventing undesired micromotion.

SPCO

Scan-post for PCO titanium base

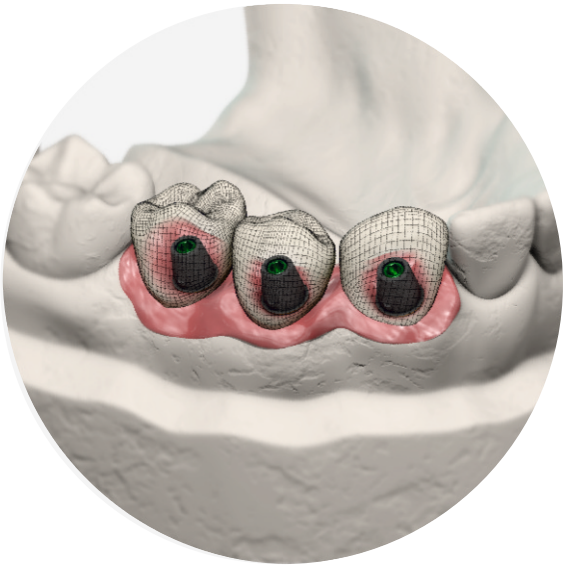
Designed in accordance with the requirements of the latest 3D scanners.
Made of Ti6Al4V, the surface is conditioned to a matt structure
for accurate results and longer life.



PCO

Titanium base for individual abutments

Is required for the manufacture of high-precision individual restorations
with cement / cement and screw-retained prostheses.
Supplied with SL8 laboratory fixing screw and S8 clinical screw.



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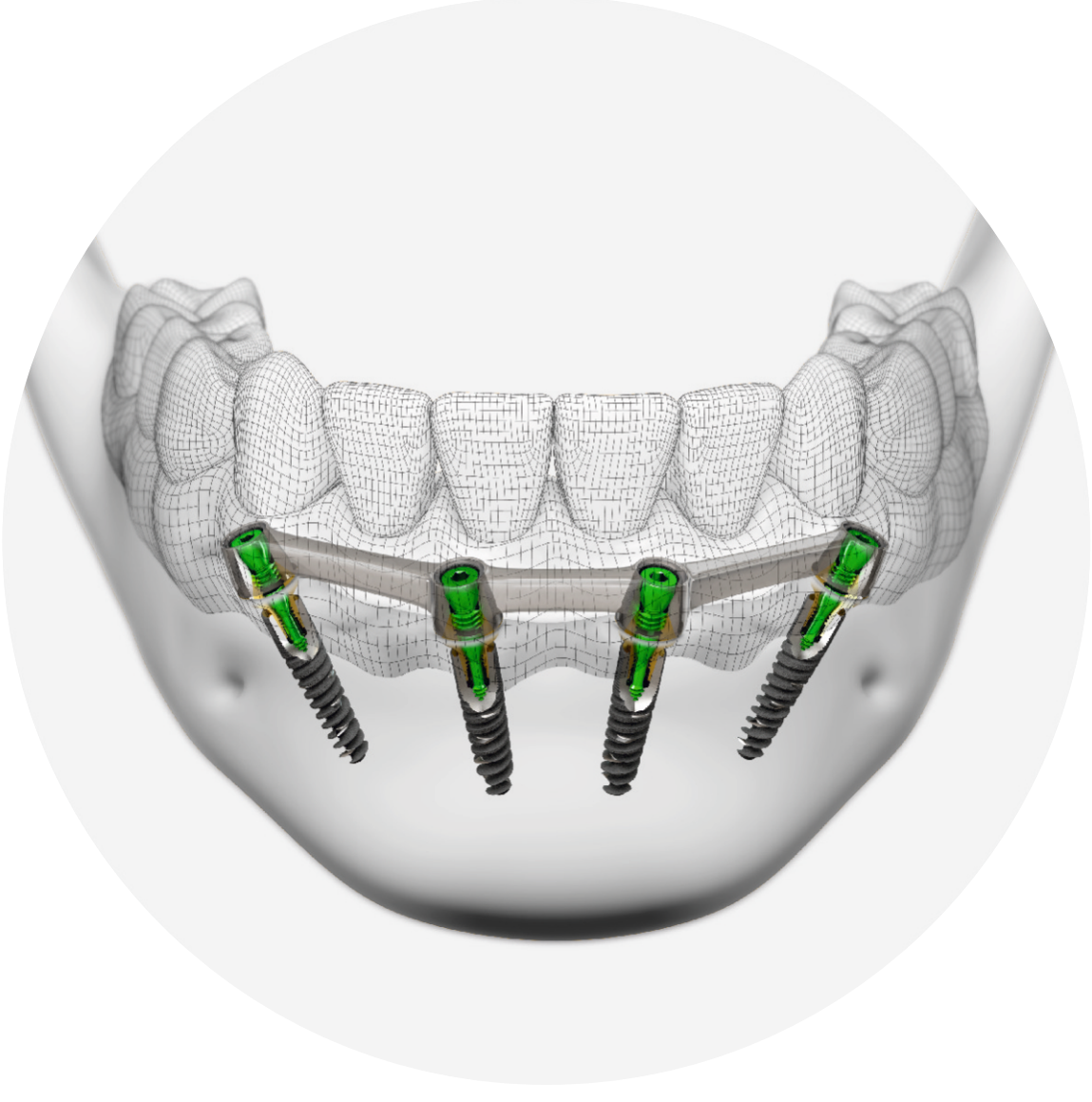
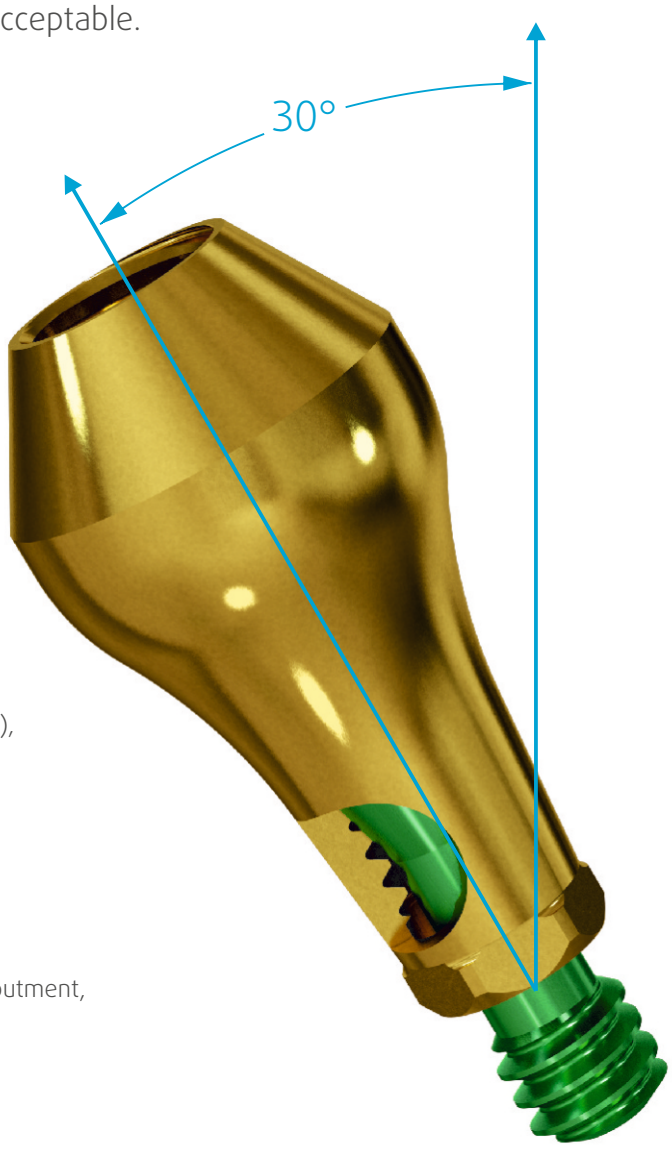
Screw-retained restorations



Multi-unit abutments

Are used for prostheses supported by two or more implants with screw-retained fixation. Platform cone of 60° allows us to produce prostheses supported by implants with non-compliant implant axes of up to 30 °. Two-component multi-unit abutment consists of a body and a fixing screw. Available in four versions with the height of a gingival area from 1 to 4 mm.
Using multi-unit abutments on model is unacceptable.



Surface

Made of Ti6Al4V, polished and anodized in gold color, allowing more aesthetics to be achieved in the soft tissues.

Internal thread

Simple multi-unit removal with a removable key (SR), eliminating undesired force on implant in case of extra fixation

Conical connection

together with hex allows you to securely lock the abutment, creating a tight connection with the implant and preventing undesired micromotion.

In the process of working with multi-unit abutments follow the rules: multi-unit is to be installed before impression taking and to not be removed by the delivery of finished prosthesis.
To obtain impression, use transfers for multi-unit abutments (TOM) and for models use analogs of multi-unit abutments (ANM).

M1
1 mm

M2
2 mm

M3
3 mm

M4
4 mm

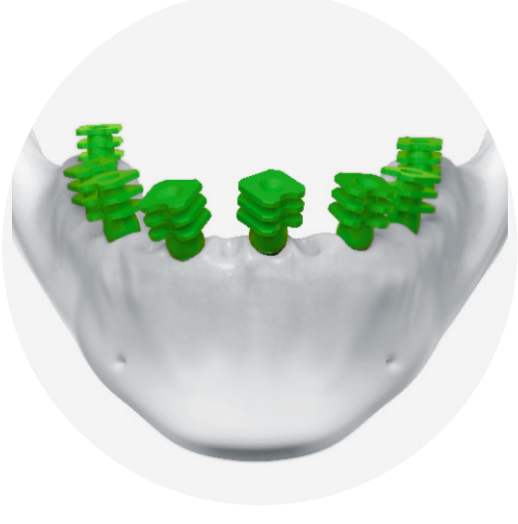
TC

TOM
Multi-unit transfers,
open tray

Multi-unit
level

TRM
Multi-unit transfers,
close tray

ANM
Multi-unit analogue



Titanium base
for individual abutments

Titanium base for multi-units is designed for the manufacture of high-precision individual restorations with hybrid screw-retained prostheses fixation. Designed towards the latest requirements of digital dentistry. Base design together with a particular milling protocol can significantly reduce the time for crowns manufacture.

Supplied with an individually packed laboratory fixing screw (SL8 - red) and a clinical screw (S8 - green).

Surface

Sandblasted base with gingival area and implant interface anodized in gold color allowing to achieve better aesthetic in soft tissues. Titanium base is made of Ti6Al4V.

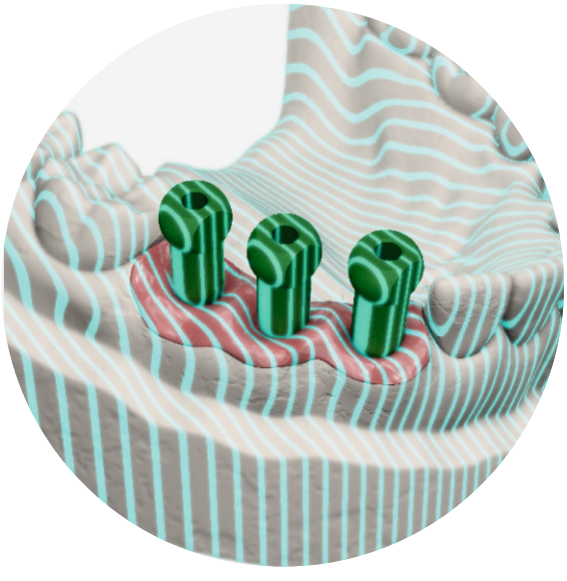
Interface

Accurate and reliable multi-unit base connection due to conical screw

Scan-post for PCOM titanium base

Designed in accordance with the requirements of the latest 3D scanners. Made of Ti6Al4V, the surface is conditioned to a matt structure for accurate results and longer life

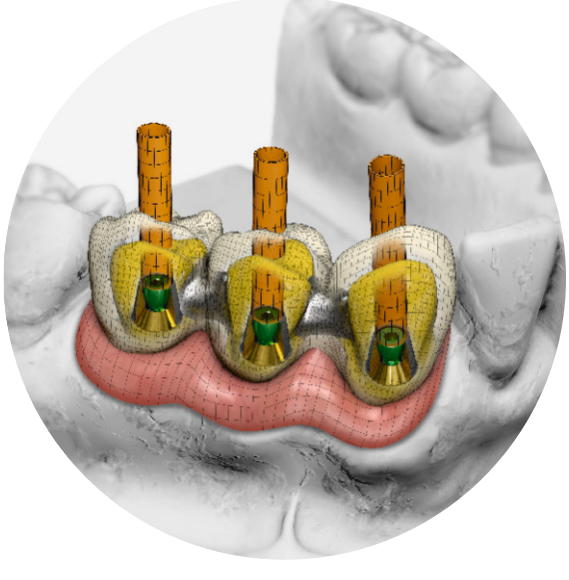
SPCOM



Titanium base for multi-unit abutment

Designed for the manufacture of high-precision restorations with screw-retained prostheses fixation. Supplied with an individually packed laboratory fixing screw (SL8 - red) and a clinical screw (S8 - green).

PCOM



Multi-unit abutments

Abutments for intraoral welding are developed in accordance with wall thickness requirements and are used for multiple restorations with screw-retained prostheses and denture reinforcement by contact welding in the mouth or laboratory model. The surface is polished, Ti6Al4V material.

Interface

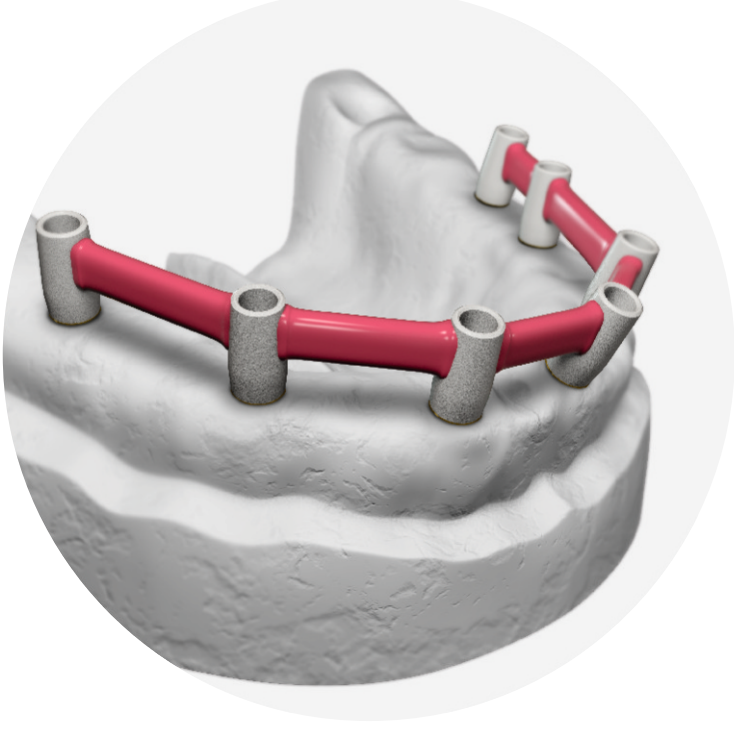
Accurate and reliable multi-unit base connection due to conical screw

AM

Burnout abutment

Manufactured on high-precision CNC-machines for accurate casting with fixation on multi-unit abutments. POM-C material. Requires special reammer after casting.

ABMU




DSTEP2

GenXT
Next Generation Implantology

ROOTFORM

Instruments

Surgical procedures

GenXT system surgical tools set includes all the necessary components for fast and easy bone preparation for implant placement

Material

All the drills are made from materials intended for the manufacture of high-precision medical instruments with increased resistance to corrosion.

Marking

Each drill has REF indication, corresponding to its size.
Pilot and universal drills have additional horizontal marks, corresponding to the drill length.

D1508

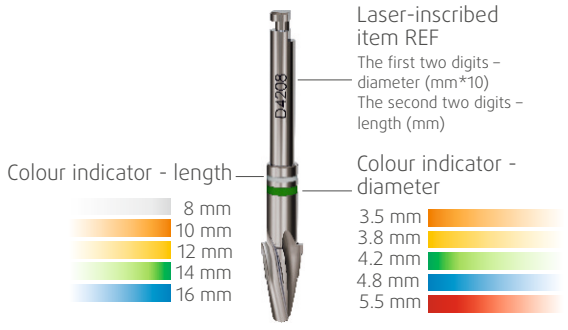
Initial drill

pike-shaped, is designed for easy-initiating drilling to prepare a hole of 1.5 mm diameter and 8 mm depth, preventing undesired pilot drill sliding at the moment bone contact.

	Ø 2 mm
8 mm	D2008
10 mm	D2010
12 mm	D2012
14 mm	D2014
16 mm	D2016
20 mm	D2020

Pilot drills

are needed to prepare a hole of 2 mm diameter and 16 mm depth, which makes it possible to use the forming drill of the first size and the appropriate length or the first DSTEP1 universal drill.
Pilot drill with stoppers are available in 8, 10, 12, 14, 16 mm lengths.



	3.5 mm	3.8 mm	4.2 mm	4.8 mm	5.5 mm
8 mm		D3808	D4208	D4808	D5508
10 mm	D3510	D3810	D4210	D4810	D5510
12 mm	D3512	D3812	D4212	D4812	D5512
14 mm	D3514	D3814	D4214	D4814	D5514
16 mm	D3516	D3816	D4216	D4816	D5516

Form drills

are necessary for preparation of the hole corresponding to configuration of the implant after applying a pilot drill of the appropriate length. For cases of drilling in hard bone it's necessary to use the next drill size or DSTEP2 cortical drill. The principle of cutting for form drills corresponds to the one of the reamers. All drills are color-coded for length and width.

Universal drills

designed for experienced users able to control drilling depth using horizontal marks on the drill. The combination of pilot drills with two universal drills of special configuration allows to place any implant with a special protocol.

Guide pin

P2

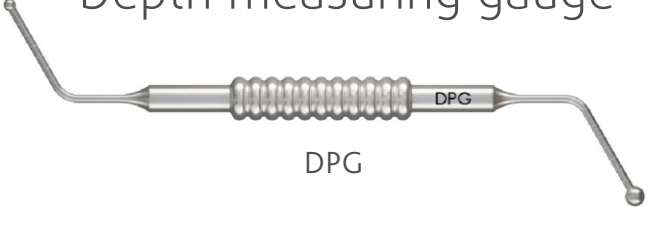
Punch

	TP4	TP5	TP6
Ø	4.0 mm	5.0 mm	6.0 mm

Drill extender

ET

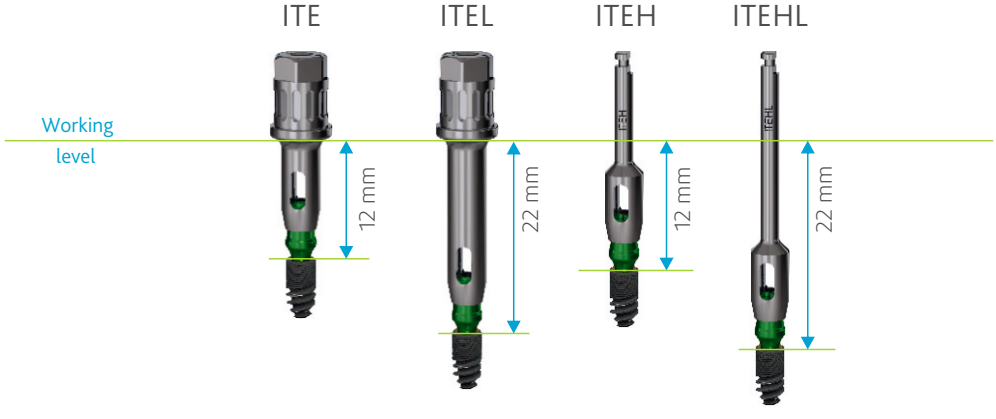
Depth measuring gauge



DPG

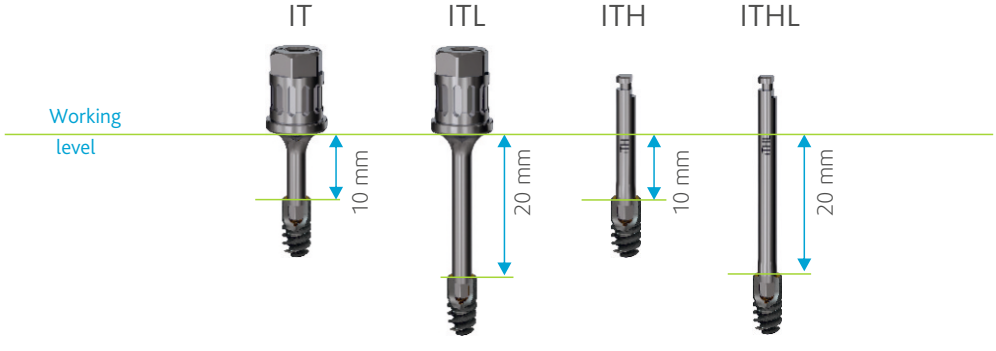
Insertion tool for external platform

applied for implant insertion with TW50 torque wrench or a handpiece with a force of up to 40 Ncm after initial positioning with combined carrier.



Insertion tool for internal platform

applied for implant insertion with TW50 torque wrench or a handpiece.
To use the insertion tool for internal platform a fixing screw must be removed and abutment removal tool must be screwed (SR), after which a bigger torque can be applied to the implant to reach the required depth of implant placement.



SDM SDML

Hex screwdriver, manual

for convenient and fast work with a surgical screw and gingival formers.
Hexagon taper allows to securely fix a screw on the screwdriver and prevent falls.
Available in short (SDM) and long (SDML) versions.

SDH SDHL

Hex screwdriver for angled handpiece

for convenient and fast work with a surgical screw, gingival formers and abutments.
Hexagon taper allows to securely fix a screw on the screwdriver and prevent falls.
Available in short (SDH) and long (SDHL) versions.

SD SDL

Hex ratchet screwdriver

for convenient and fast work with a surgical screw, gingival formers and abutments.
Hexagon taper allows to securely fix a screw on the screwdriver and prevent falls.
Available in short (SD) and long (SDL) versions.

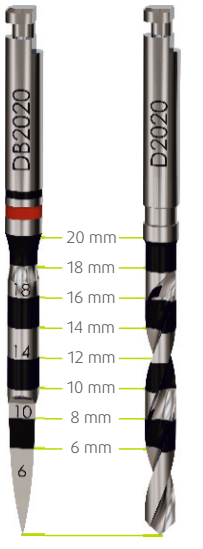
SR

Suprastructures removal tool

used for simple removal of gingival former, abutment and carrier which were fixed in the implant or implant analog with a force. To use the tool a fixing screw must be removed and suprastructures removal tool must be screwed.

Pilot drills

DB2020 D2020



Pike Twist

Ø 2 mm
20 mm

Universal drills

DSTEP1 DSTEP2

Ø 3.5 mm

Form drills

DC3516 DC5508

Insertion tools

external platform internal platform

ITE IT

Hex

driver

SDL

Removal tool

for suprastructures

SR

GenXT
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