Zeramex XT
User guide

XT

ZERAMEX

www.zeramex.com

Zeramex XT

XT

Dear user,
Welcome to Zeramex.

The Zeramex XT implant system is a pioneer in the field of two-piece, reversible screw-retained and 100% metal-free ceramic implants.

The root-shaped design of the Zeramex XT implants achieves high primary stability and offers optimal prosthetic flexibility thanks to its unique internal connection.

The uncomplicated portfolio offers all the options to choose from. Find out all about the completely digital workflow for the Zeramex implant systems today. Improve patient satisfaction and facilitate your work in the process.

Our experts will be glad to help you if you have any questions.

Zeramex XT

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Contents

Caution!

The Zeramex XT system is not compatible with previous Zeramex T generations. If you have any questions or concerns, please don't hesitate to contact us:

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info@zeramex.com

System overview

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The system for all common indications, particularly well suited for front tooth restorations.

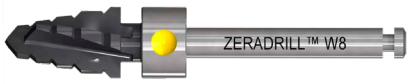
Tools

Zeradrill

The reusable drill with carbon coating (DLC)

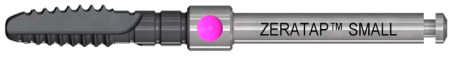
T35608

T36608

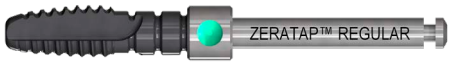


T37608

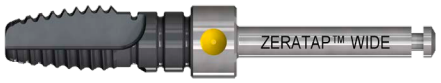
Zeratap



T35620

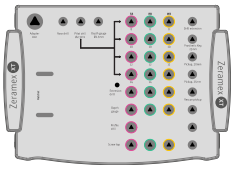


T36620



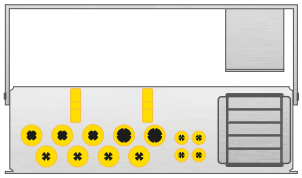
T37620

Surgical Kit



XT48850

Prosthetic Kit



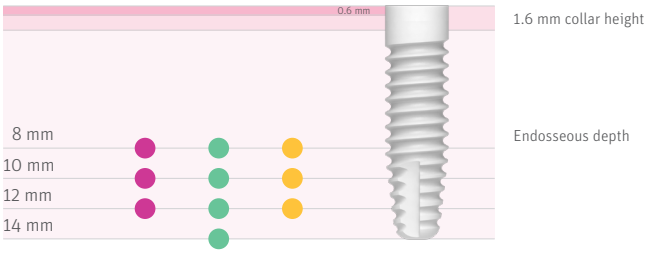
XT48860

Colour coding and sizes

Example of implant

Regular ø4.2 × 14 mm

ø Platform	3.85 mm	4.2 mm	5.5 mm
ø Endosseous	3.5 mm	4.2 mm	5.5 mm
Collar height	1.6 mm	1.6 mm	1.6 mm
Optional	0.6 mm	0.6 mm	0.6 mm



SB = Small Base
RB = Regular Base
WB = Wide Base

Imaging and Connection Tools

Surgery

Implant

Pick-up

Prosthetic

Healing cap

Prosthetic key

System overview

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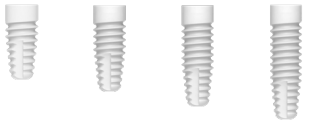
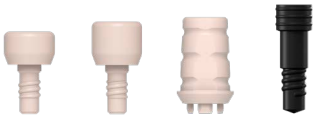
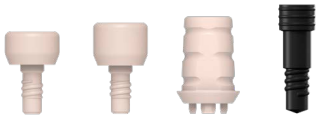
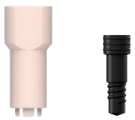
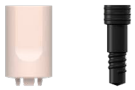
Implants (ø endosseous) Material: ATZ	**Zeramex XT ø3.5 mm SB**	**Zeramex XT ø4.2 mm RB**	**Zeramex XT ø5.5 mm WB**
	 XT15508 XT15510 XT15512	 XT16508 XT16510 XT16512 XT16514	 XT17508 XT17510 XT17512
Prosthetic platform	**SB ø3.85 mm**	**RB ø4.2 mm**	**WB ø5.5 mm**
Healing caps Material: PEEK	 SB35500	 RB36500	 WB37500
Soft Tissue Management Gingiva former, provisional abutments Material: PEEK, Vicarbo	 SB35503 SB35504 SB35530	 RB36503 RB36504 RB36530	 WB37503 WB37504 WB37530
Taking an impression open/closed Material: PEEK-CW30, Aluminium	 SB35510 SB35512 SB35513	 RB36510 RB36512 RB36513	 WB37510 WB37512 WB37513
Digital impression taking Scanbody Material: PEEK, PEEK-CW30	 SB35514	 RB36514	 WB37514
Standard Abutments/ Abutments Digital Workflow including screw Material: ATZ, Vicarbo	 SB15501 SB15502 SB15515  SB15535 SB15536	 RB16501 RB16502 RB16515  RB16535 RB16536	 WB17501 WB17502 WB17515  WB17535 WB17536
Docklocs® Abutments Material: ATZ, Vicarbo **Suitable for all platforms SB/RB/WB**	 SB15542	 SB15543	 SB15544
Laboratory auxiliary parts Material: Aluminium, PEEK green, PEEK-CW30	 SB35522 RB36554 RB36521	 RB36522 RB36554 RB36521	 WB37522 RB36554 RB36521
Screw Material: Vicarbo	 RB16550		

Docklocs® is a registered trademark of MEDEALIS GmbH, DE.
Locator® is a registered trademark of Zest Anchors, Inc., USA.

The Zeramex XT implant

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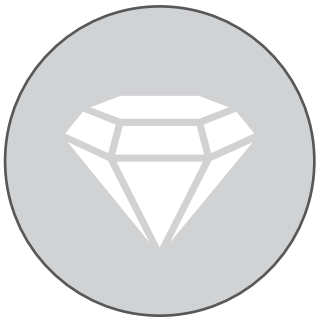
The ceramic implant

The Zeramex XT implant: a milestone in the family of two-piece, reversible screw-retained Zeramex ceramic implants. The root-shaped design of the Zeramex XT ensures high primary stability. The new internal connection enables maximum prosthetic flexibility.



Hot isostatic post-compacted (HIP) ATZ

The Zeramex XT implant is manufactured from hard and hot isostatic post-compacted (HIP) ATZ blanks. No thermal process (sintering) or finishing takes place after the final shaping of the outer and inner geometry of the implant. This ensures a high degree of precision and further changes in the material structure are prevented. This manufacturing process is very complex and requires a great deal of experience and know-how.

“Bolt-in-Tube” – the simple and strong ceramic connection

The “Bolt-in-Tube” connection for Zeramex XT implants provides certainty when taking impressions and for temporary and permanent prosthetic restorations. The design elements of this connection have been selected to provide very high stability, while taking into account the typical material properties of ceramics.

The special geometry with the four interlocks and high precision enables fast and easy insertion and alignment of the abutment.

The core of the connection is the Vicarbo screw. It acts as a bolt, which anchors the abutment in the implant. The extremely hard ceramic is combined with a very stiff, carbon fibre-reinforced high-performance polymer. Similar to reinforced concrete, the ceramic absorbs the compressive forces, while the Vicarbo screw counteracts tensile and bending forces.

Root-shaped with internal connection

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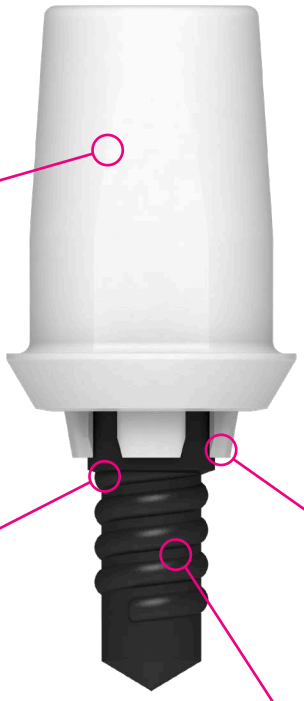
Prosthetic flexibility
The Zeramex XT implant system offers a high degree of prosthetic flexibility thanks to straight and angled abutments.



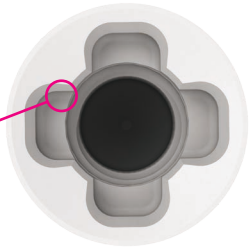
Screw head ø2.8 mm

Four interlocks
The four interlocks provide precise anti-rotation protection. The “Bolt-in Tube” connection prevents force from being transmitted via the interlocks. These four retaining elements help the abutment to be securely and quickly placed in the implant.

“Bolt-in-tube”
The “Bolt-in-Tube” connection prevents traction from being exerted on the ceramic. Forces are absorbed by the Vicarbo screw which functions as a bolt.

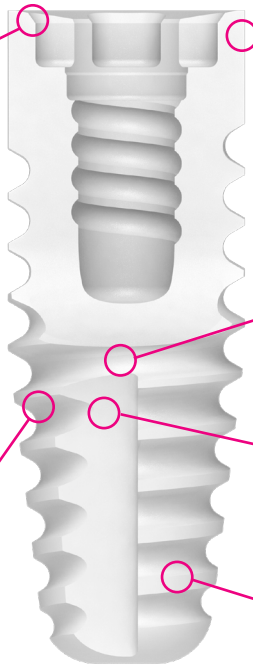
Vicarbo screw
The Vicarbo screw is a precision screw to optimally capture occlusal forces. When tightened, it grips the existing contour of the thread thanks to the significantly different hardnesses of the ceramic and screw.

Internal connection
The four cross-shaped retaining elements provide the ideal torque on insertion so that the implant can be screwed in without stress peaks being exerted on the bone.



Variable placement depth
The Zeramex XT implant is placed 1.6 mm supracrestal (optional 0.6mm) and offers high prosthetic flexibility.

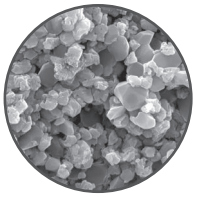
The **slightly bevelled contact surface** of the implant was developed to facilitate centring and placement of the abutment and auxiliary parts.



High primary stability
The thread design and cylindrical-conical implant shape achieve high primary stability.

Zerafil surface
Excellent osseointegration with the hydrophilic, sandblasted and etched Zerafil surface. Surface treatment up to collar height of 0.6 mm.

500µm



2µm

Resservoir for bone grafts
The reservoir for bone grafts at the implant tip simplifies the placement of the implant.

Zirconia dioxide ATZ-HIP material
Innovative material for high stress and biocompatibility.

Case planning in 5 steps

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1. Preparation phase

As with any surgical procedure, implantation also requires proper professional preparation. Preparation includes a thorough dental and general health examination which includes taking X-ray images and a detailed discussion with the patient regarding their prior medical history. Conventional, prosthetic and periodontal preparatory treatment should be completed before initiating the implant therapy. The options and intentions for later prosthetic restoration (item 5) should be included in the discussion from the start. Use this baseline to work out the individual therapy plan and create a protocol. CT and DVT can be used to gather information about bone conditions which are difficult to diagnose. The bone and its quality decide ultimately on the position and number of implants.

2. Implant selection

Implant length and diameter are based on X-ray images. Always use the implant with the largest possible diameter. The vestibular wall thickness must be at least 1 mm, however, to preserve adequate blood circulation. If this is not possible, bone grafting will be necessary.

3. Bone preparation

It is essential to follow the drilling protocol starting on page 20. You must provide constant cooling during drilling because temperatures higher than 42 °C may alter bone structure and affect osseointegration!

Important!

Insert the drill only to the specified marking. The implant is not self-tapping; always use a thread cutter. If the cortical bone is very hard, use the Zeradrill extension. Follow the corresponding drilling protocols. Replace drills after about 20 implantations or in case of reduced cutting performance.

4. Implant insertion

We recommend tightening the implant by hand and not tightening at more than 15 rpm. The implant is placed 1.6mm supracrestal, but can optionally be sunk deeper (0.6mm supracrestal). The edge of the implant must be easily accessible in order to correctly tighten the abutment after the initial healing phase. Very good primary stability is important. Use a healing cap to cover the implant after the placement and close the gums. A gingiva former can be used directly in exceptional cases. The minimum required healing period is 3 months for the lower jaw and 6 months for the upper jaw.

Comply with protocol torque

We recommend a screw-in torque of 20–30 Ncm. The maximum torque for ø3.5 mm SB implants is 35 Ncm. For ø4.2 mm RB and ø5.5 mm WB implants, the maximum torque is 45 Ncm. Never exceed this torque.

5. Prosthetic restoration

A range of standard abutments, CADCAM abutments, customized abutments and Zeramex Docklocs® abutments for removable prostheses is available for prosthetic restorations. Find out more on page 27 onwards. Prosthetic restoration.

Distances at bone level

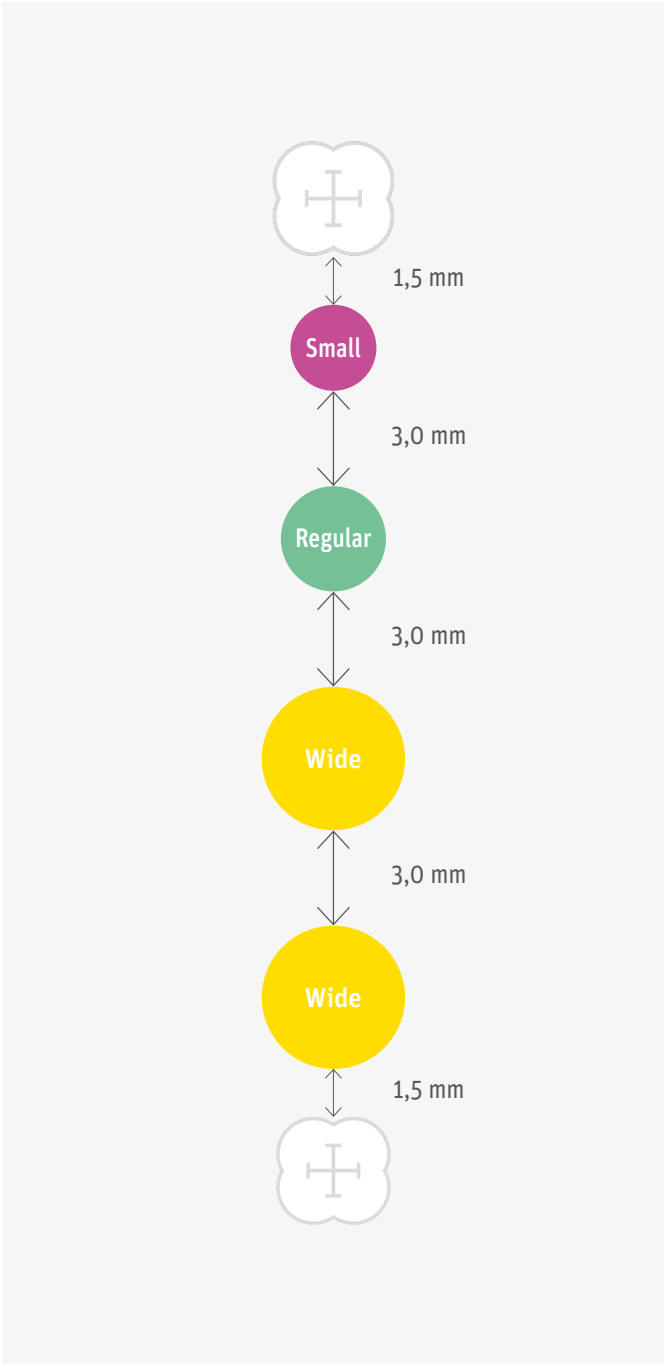
XT

Distance to adjacent tooth at bone level

A minimum distance of **1.5 mm** between the implant shoulder and the adjacent tooth is required at bone level (mesial and distal).

Distance to adjacent implant at bone level

A minimum distance of **3 mm** between two adjacent implant shoulders (SB/RB/WB) (mesiodistal) is required.



Surgical tools

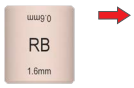
XT

Important!

Follow the corresponding drilling protocols. Replace drills after about 20 implantations or in case of reduced cutting performance.

Information:

Drillstops are supplied with the tray.

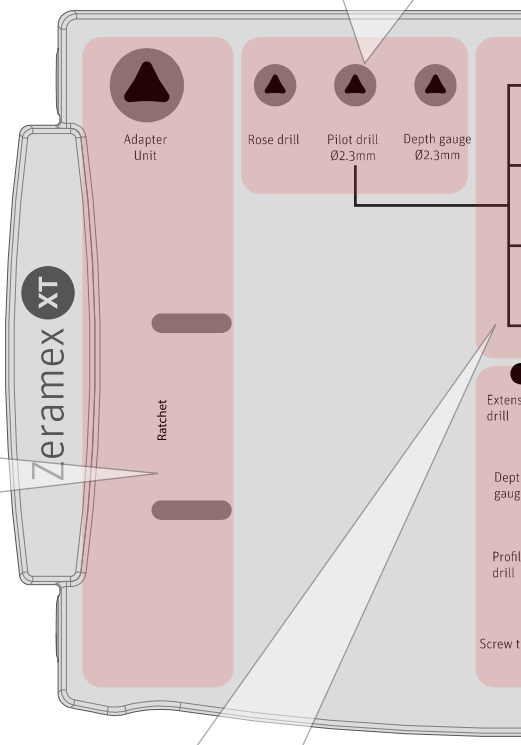


1,6 mm supracrestal

0,6 mm supracrestal

Rosedrill

ø2 mm
(P35601)



Ratchet

Ratchet Adapter Unit Short
(P48932)

Surgical Ratchet
(P48935)

Zeradrill

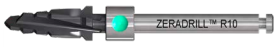
S8 (8 mm)
(T35608)

R8 (8 mm)
(T36608)

W8 (8 mm)
(T37608)

S10 (10 mm)
(T35610)

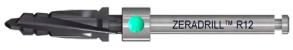
R10 (10 mm)
(T36610)



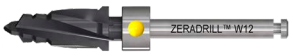
W10 (10 mm)
(T37610)

S12 (12 mm)
(T35612)

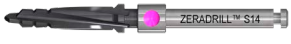
R12 (12 mm)
(T36612)



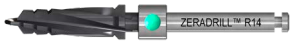
W12 (12 mm)
(T37612)



S14 (14 mm)
(T35614)



R14 (14 mm)
(T36614)



Zeradrill

Pilot ø2.3 mm
(T35602)

Depth gauge

Depth gauge ø2.3 mm
(T38650)

Extension

Drill Extension
(C7650*)

Pick-up

Pick-up (20 mm)
(XT36620)

Pick-up (25 mm)
(XT36625)

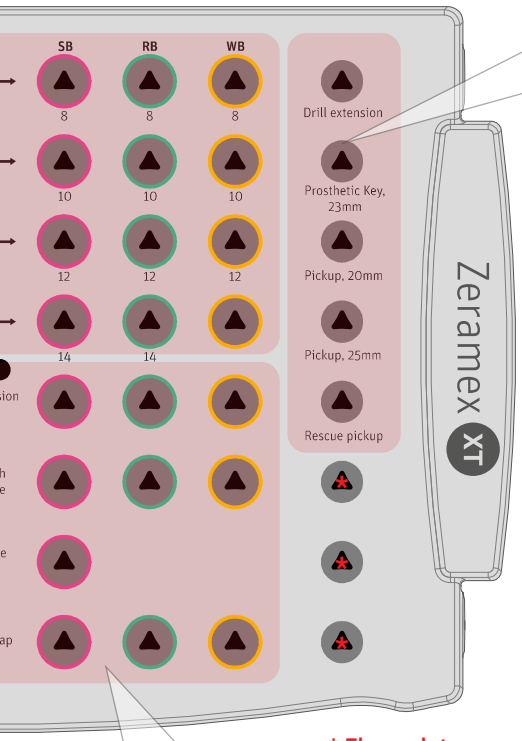
Rescue Pick-up
(XT36622)

Prosthetic key

Prosthetic key (19 mm)
(XT38619)

Prosthetic key (23 mm)
(XT38623)

*Art. KI589B for Switzerland

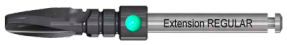


*** These slots are reserved for system expansion.**

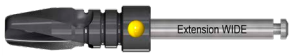
Zeradrill Extension

Small ø3.5 mm
(T35622)

Regular ø4.2 mm
(T36622)



Wide ø5.5 mm
(T37622)

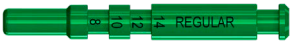


Profile Drill SB

Small ø3.5 mm
(XT35630)

Depth gauges

Small/Regular/Wide
(T38650)



Zeratap

Small ø3.5 mm
(T35620)

Regular ø4.2 mm
(T36620)

Wide ø5.5 mm
(T37620)

Sterilisation and instrument care

XT

EN ISO 17664

Reprocessing of medical devices/general requirements
Refer to the legal and hygiene regulations which are valid for medical office practices and hospitals in your country. This applies in particular to specifications for the effective denaturation of prions. Treatment always involves a risk of contamination and infection. Take preventive measures to actively eliminate the risk or to reduce it as much as possible.

These measures include:
- Evaluation of the risks that accompany the medical intervention, decision on appropriate protective measures.
- Development of schematic/systematic procedures for the workflow, in order to prevent contamination and injuries.
- Careful recording of each patient's medical history to be aware of the risk of infection.

All medical devices that have been used, but also opened and laid out for use, are to be considered contaminated and reprocessed hygienically. Organise the transport of these in such a way that no staff members, co-workers or third parties are endangered. All personnel must wear the appropriate protective clothing and gloves.

Medical products may corrode if they are stored in a physiological saline solution. Instruments are to be submerged fully in the sterilisation trays, without air bubbles. The use of demineralised water to rinse instruments after disinfection is absolutely essential to prevent water spots and the formation of crystals. These disrupt the subsequent sterilisation process.

You are responsible for the sterility of the products you use. For this reason, you must only use validated procedures for the cleaning, disinfection, and sterilisation; you must ensure regular maintenance of your equipment, and observe all process parameters in every cycle Please note the shelf life of products in sterile packaging (manufacturer's data sheet). Reprocessing ends with the release for use. Sterilisation indicator and sterilisation date must be recorded on every sterile packaging.

Important!
Products that are delivered in non-sterile condition (e.g. drills and abutments) must be sterilised before they are used on a patient the first time. After use, all reusable medical devices must be reprocessed in accordance with the described procedure.

Automated reprocessing
For automated cleaning to be effective, it must be preceded by manual cleaning. This removes large impurities (blood, tissue and bone fragments). Rinse instruments under cold, running water immediately after use, and use a fine nylon brush to clean off the large impurities. Then place the instruments in the cleaning tray of your disinfection and cleaning device.

Ultrasonic cleaning (optional)
If the instruments are very soiled and it is not possible to remove large impurities manually, cleaning in an ultrasonic bath is recommended. Important: The cleaning agent must be compatible with the products. Please observe the application times and concentrations specified by the manufacturer.

Automated cleaning
Only use properly suited cleaning and disinfection equipment for automated cleaning tasks. This should be validated by the user on the basis of established cleaning processes. Place parts in the cleaning tray in accordance with instructions provided by the manufacturer of the equipment. There are commercially available cleaning and disinfection agents. We recommend: "neodisher MediClean" and "neodisher Z" as the neutralising agent (both from Dr. Weigert, Hamburg). Follow the manufacturer's information regarding dosage and use. We recommend fully demineralised water to clean instruments and for the final rinsing procedure. The selected cleaning and disinfection program should run with the optimal temperature for removal of blood (45–55 °C).

Example of a cleaning program:

• Pre-rinse with cold water	4 min
• Clean with alkaline cleaning agent at 45–55 °C	10 min
• Neutralisation	6 min
• Intermediate rinse	3 min
• Disinfection	5 min
• Drying (max. 130 °C)	5 min

Before the sterilisation process, check the cleaned, dried and disinfected parts for corrosion and damage.

Manual reprocessing
Place the products in a disinfectant solution after use to prevent them from drying out and as a personal protection measure. Remove large impurities (blood, tissue and bone fragments). To do this, take the instruments from the tray and clean them under cold, running water with a fine nylon brush. Never use a metal brush or steel wool for this step!

Ultrasonic cleaning (optional)

If the instruments are very soiled and it is not possible to remove large impurities manually, cleaning in an ultrasonic bath is recommended. Important: The cleaning agent must be compatible with the products. Please observe the application times and concentrations specified by the manufacturer.

Cleaning

Before cleaning the products, rinse them under a flow of cold, demineralised water. Disassemble all products that can be taken apart. A suitable cleaning agent is, for example, “neodisher MediClean” (Dr. Weigert, Hamburg). Place the products in a fresh cleaning bath, in accordance with the manufacturer’s information. Clean the parts with a nylon brush. Rinse the products several times with demineralised water and check for corrosion or damage.

Disinfection

Place the products that need to be disinfected in a fresh disinfectant bath. The liquid must cover them completely. ID 212 instrument disinfection (Dürr System Hygiene) is a suitable disinfectant, for example.

Rinsing and drying

After disinfecting the products, rinse thoroughly with demineralised water. Use residue-free compressed air to dry the instruments.

Sterilisation

Re-assemble the dismantled medical devices before you start the sterilisation procedure. Sort the separately cleaned and disinfected products into the appropriate sterilisation tray. You may also sterilise products individually.

Then pack the filled trays and/or the individual products in a non-reusable bag suitable for use in a steam steriliser (single or double bags) and/or in a sterilisation container. Bags for use in steam sterilisation processes must meet the specifications of DIN EN ISO 11607 / ANSI/AAMI ST79 / AAMI TIR12:2010.

Examples: a non-reusable sterilisation bag (single or double bag) with temperature tolerance of at least 134 °C (274 °F) and vapour permeability that allows adequate protection from mechanical damage, or else a sterilisation container, which must undergo regular maintenance according to the specifications of the manufacturer.

Instruments such as drills, thread cutters and depth gauges have dedicated positions in the Zeramex XT Surgery Tray (XT48850/XT48854), where they can be placed for sterilisation. Sterilisation is achieved in the autoclave at 132 °C / 270 °F / or 134 °C / 274 °F for the duration of at least 18 minutes holding time and subsequent vacuum drying. The parts should then be marked with a sterilisation date and placed in dry and dust-free storage.

CE	0050		Caution
REF	Article number		Expiry date
LOT	Batch code		Observe the instructions for use
	Do not reuse		Date of manufacture
NON STERILE	Non-sterile		Manufacturer
STERILE	Sterilisation by steam or dry heat		Do not use if the packaging is damaged
	Keep away from direct sunlight		
	Keep dry	MD	Medical device
UDI	Unique Device Identifier	EC REP	EU authorised representative
SBS	Sterile barrier system	SBS	Double packaging with single internal sterile barrier
	Do not resterilise	STERILE R	Gamma sterilisation
Rx only	CAUTION: US federal law restricts the sale of this product to a physician or on his/her order.		
SB ø3.5mm	Implant Small ø3.5 mm SB	RB ø4.2mm	Implant Regular ø4.2 mm RB
WB ø5.5mm	Implant Wide ø5.5 mm WB		

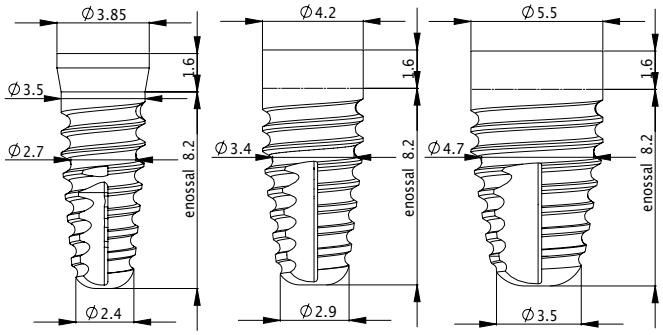
Technical Information

Zeramex Implants

Labelling and colour coding

The implants are colour-coded on the packaging.

SB ø 3,5 mm RB ø 4,2 mm WB ø 5,5 mm



Example of 8 mm implants SB/RB/WB

Description

The Zeramex XT implant is an innovation in the family of two-piece, reversible screw-retained Zeramex ceramic implants. With the root-shaped design of the Zeramex XT implant, the available space in the jaw can be used in the best possible way.

Indication

Information on indications is available in the instructions for use (IFU) at ifu.zeramex.com.

Material

ATZ-HIP white

Order information

SB ø3.5 mm

- XT15508 Zeramex XT ø3.5 mm SB, 8 mm (9.8 mm)
- XT15510 Zeramex XT ø3.5 mm SB, 10 mm (11.6 mm)
- XT15512 Zeramex XT ø3.5 mm SB, 12 mm (13.6 mm)

RB ø4.2 mm

- XT16508 Zeramex XT ø4.2mm RB, 8 mm (9.8 mm)
  XT16510 Zeramex XT ø4.2 mm RB, 10 mm (11.6 mm)
- XT16512 Zeramex XT ø4.2 mm RB, 12 mm (13.6 mm)
- XT16514 Zeramex XT ø4.2 mm RB, 14 mm (15.4 mm)

WB ø5.5 mm

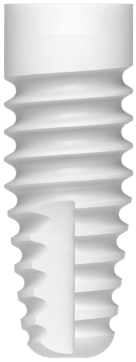
- XT17508 Zeramex XT ø5.5 mm WB, 8 mm (9.8 mm)
- XT17510 Zeramex XT ø5.5 mm WB, 10 mm (11.6 mm)
- XT17512 Zeramex XT ø5.5 mm WB, 12 mm (13.6 mm)

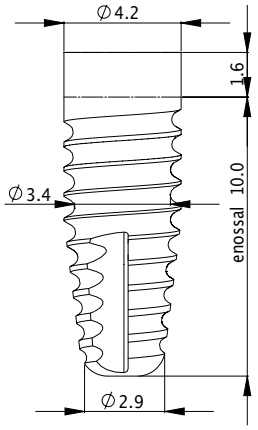
Technical information

Zerafil surface

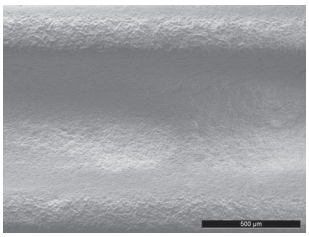
Labelling

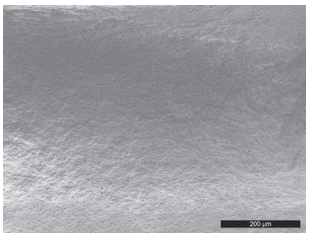
Zerafil is available for all Zeramex implants and not specifically labelled.

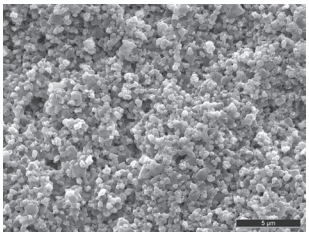


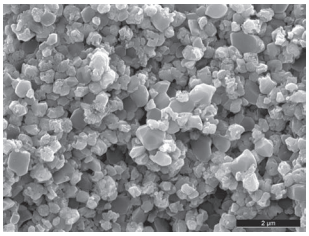


Bsp. 10 mm Implantat RB









Description

The Zerafil surface is a micro-structured implant surface that enables optimum, quick and safe osseointegration of the implants.

Blasting with high-grade corundum lends the surface its macrostructure; subsequent acid etching lends it its microstructure, which is key to osseointegration.

Acid etching guarantees a pure implant surface and ensures the required hydrophilic properties.

Design

The endosseous section of the implant features the Zerafil surface. The neck section (0.6 mm) is polished smooth and not structured with Zerafil.

Osseointegration

The success rate of Zeramex XT implants with a Zerafil surface is 98 %[1)], and bears witness to the decisive osseointegration thanks to the optimum surface structure.[2)] The morphology of the hydrophilic Zerafil implant surface supports the migration and attachment of osteoblasts directly on the surface.[3)]

1) Statut janvier 2020, données internes de la surveillance du marché
2) Chappuis V, Cavusoglu Y, Gruber R, Kuchler U, Buser D, Bosshardt DD./Osseointegrazione della zirconia in presenza di cellule giganti multinucleate. 2016
3) Jank S, Hochgatterer G./Success Rate of Two-Piece Zirconia Implants: A Retrospective Statistical Analysis. 2016

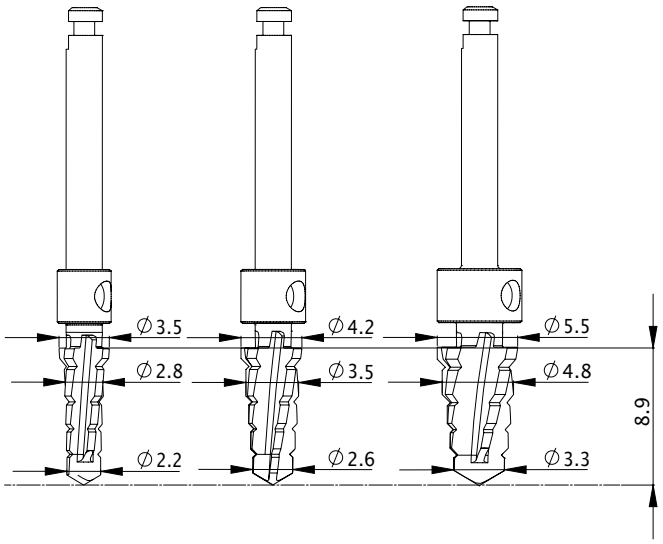
Technical Information

XT

Zeradrill drill

Labelling and colour coding

The size of the drill is marked on the packaging and the shaft, and appropriate colour coding is applied.



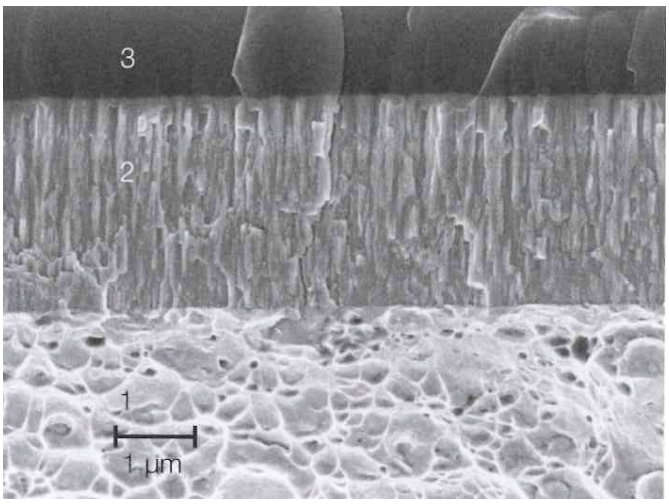
Example of 8 mm drill

Description

The Zeradrill drill guarantees very good bone preparation for the implant with maximum protection of the surrounding tissue and cells.

The use of hardened medical-grade stainless steel as the base material allows the heat generated by drilling to be efficiently conducted away.

The reusable Zeradrill drills feature a metal-free, amorphous diamond-like carbon (DLC) coating that provides a particularly smooth surface, high wear resistance and efficient heat dissipation.



Material

1. Medical-grade stainless steel
2. Protective layer
3. DLC carbon coating* (a-C:H)

*DLC (Diamond-like Carbon) High-performance coating made of diamond-like carbon

Zeramex XT
Surgical phase

XT

ZERAMEX

www.zeramex.com

Surgical phase

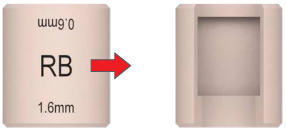
Planning the insertion depth with the drill stop

Drill stop

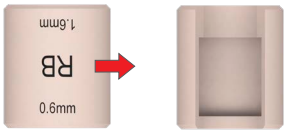
The drill stop allows the drilling depth to be precisely controlled. The drill stop is placed on the drill sleeve. It allows you to insert the implant 1.6mm or 0.6mm supracrestal.

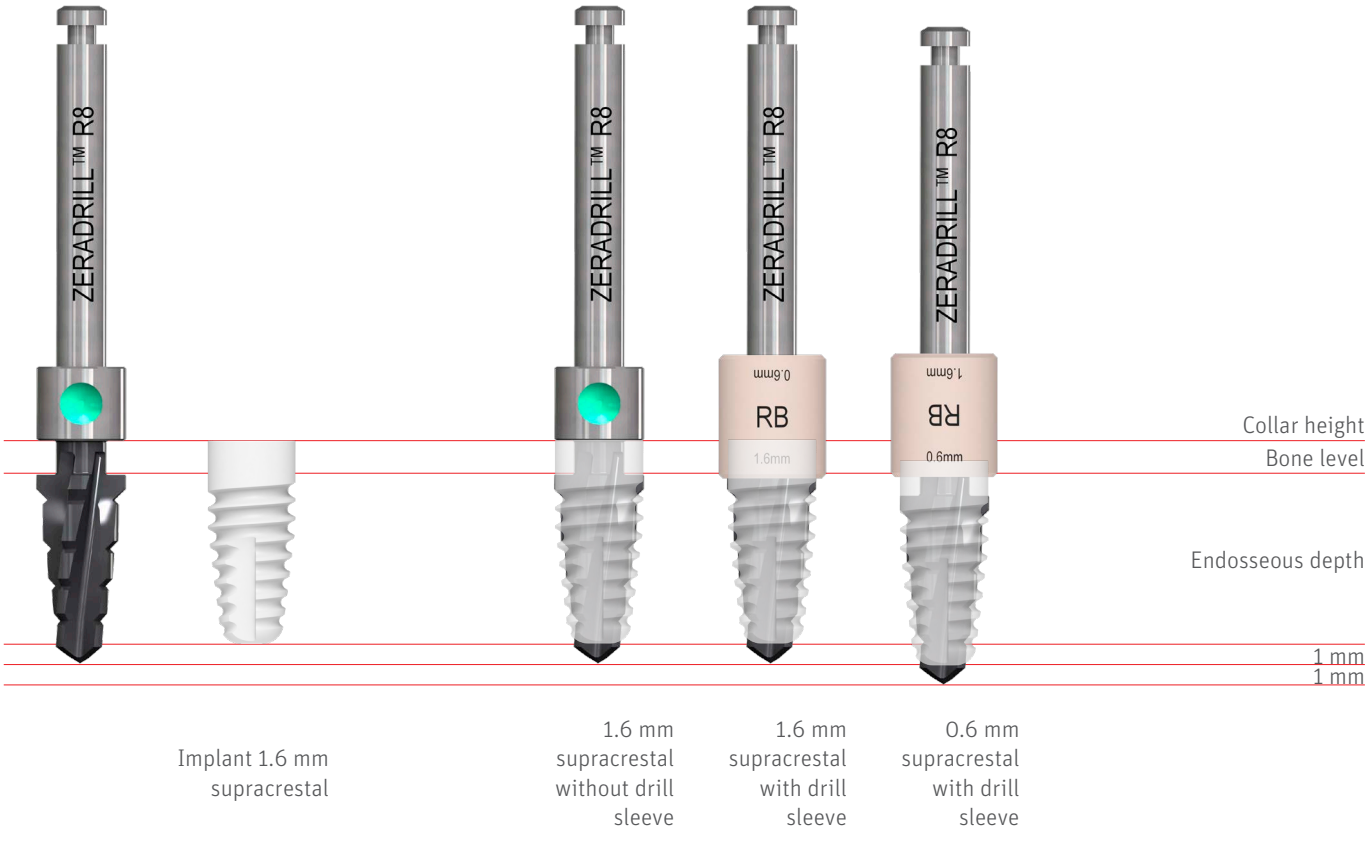
Note: Correct position for insertion depth:

1.6 mm supracrestal



0.6 mm supracrestal





Surgical phase

XT

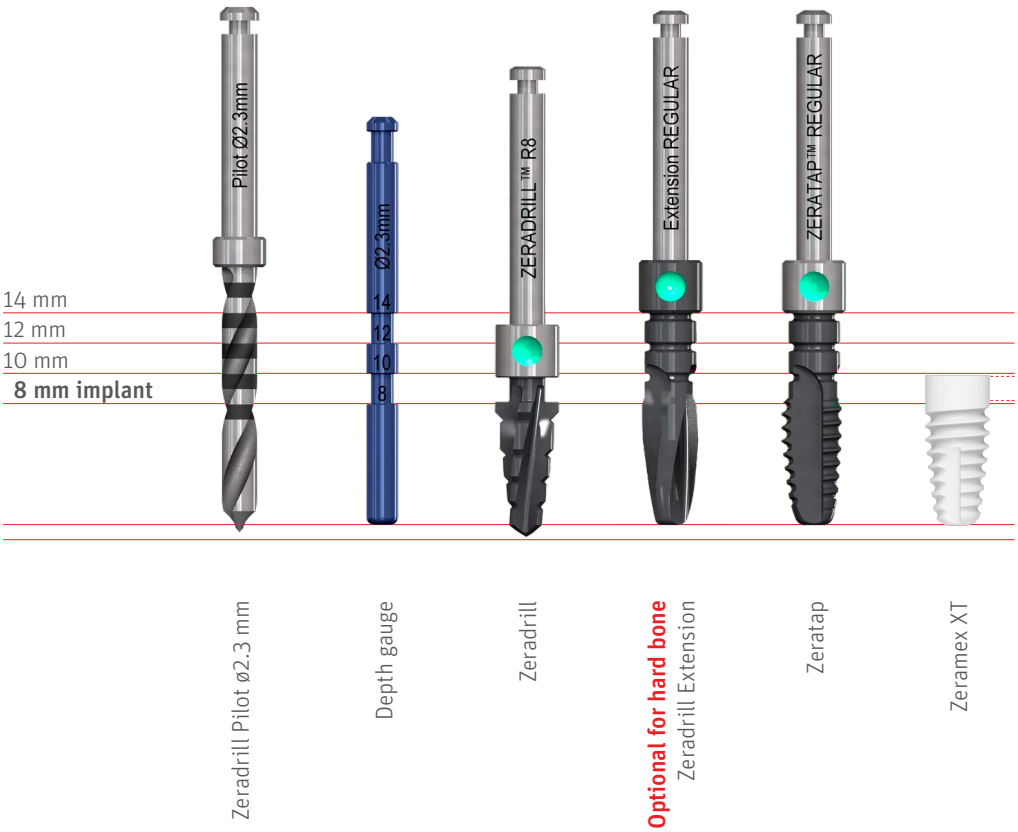
Diameter

The diameter is indicated on each tool by a colour code.

Depth marks

Example of implant

Regular ø4.2 × 8 mm
1.6 mm supracrestal



1.6 mm collar height

Endosseous depth 8 mm

1 mm

Caution!

The drilling depth is up to 1mm deeper than the corresponding implant.

Sterilisation before surgery

Surgical preparation includes steam sterilisation of the surgical tray (surgical instruments) at 132 °C / 270 °F or 134 °C / 274 °F / for: 18 minutesv

Important!

If the drills and instruments are used more than once, place them in the saline solution during the treatment.

Surgical phase

XT

Drill tunnel for insertion depth 0.6 mm supracrestal

Optional insertion depth up to **0.6 mm** supracrestal

Zeradrill Pilot ø2.3 mm
max. 800 rpm

Depth gauge

Zeradrill R8 (Regular 8 mm)
max. 600 rpm

Optional for hard bone
Zeradrill Extension Regular
max. 600 rpm

Zeratap Regular ø4.2 mm
max. 15 rpm

Zeramex XT RB
ø4.2 mm x 8 mm

Important!

The effective drilling depth is up to 2 mm longer than the defined implant length.

Example of implant

Regular ø4.2 × 8 mm
0.6 mm supracrestal

0.6 mm collar height

Endosseous depth 9 mm
Drill hole depth **10 mm**

1 mm

Article number	Selected implant length	Pilot Drill drill hole depth	Zeradrill	Extension	Zeratap	Screw-in depth	Effective hole depth
XT15508 XT16508 XT17508	8 mm	9 mm	Up to sleeve	9 mm	9 mm	0.6 mm Supracrestal	10 mm
XT15510 XT16510 XT17510	10 mm	11 mm	Up to sleeve	11 mm	11 mm	0.6 mm Supracrestal	12 mm
XT15512 XT16512 XT17512	12 mm	13 mm	Up to sleeve	13 mm	13 mm	0.6 mm Supracrestal	14 mm
XT16514	14 mm	*	*	*	*	*	*

*** For a length of 14 mm, we recommend that the implant is not placed 0.6 mm supracrestal.**

Surgical phase

Drill protocol ø3.5 mm SB (1.6 mm supracrestal)

Rosedrill ø2,3 mm
max. 800 rpm

Zeradrill Pilot ø2.3 mm
max. 800 rpm

Zeradrill S8 (Small 8 mm)
max. 700 rpm

Optional for hard bone
Zeradrill Extension Small
max. 700 rpm

Zeratap Small ø3.5 mm
max. 15 rpm

Zeramex XT SB
ø3.5 mm x 8 mm

Attention!: Indications:
- Lateral incisors in the upper jaw
- Anterior teeth in the lower jaw
- Completely for Docklocs for *removable dentures for 4 implants in the lower jaw and 6 implants in the upper jaw

Example of implant

Small ø3.5 × 8 mm

SB
ø 3.5 mm

14 mm
12 mm
10 mm
1.6 mm collar height

Endosseous depth 8 mm

1 mm

Note:
Optionally, the implant can also be positioned 0.6 mm supracrestal (instead of 1.6 mm). The drill and thread cutter must be drilled 1 mm deeper in this case.

Endosseous ø3.5 mm

SB
ø 3.5 mm

Important!

With ø3.5 mm implants, do not exceed a torque of 35 Ncm.

Caution!

Use the tap according to the bone quality.

*Our alternative to the LOCATOR® technique

Surgical phase

XT

Drill protocol 3.5 mm SB (0.6 mm supracrestal)

Rosedrill ø2,3 mm
max. 800 rpm

Zeradrill Pilot ø2.3 mm
max. 800 rpm

Zeradrill S8 (Small 8 mm)
max. 700 rpm

Optional for hard bone
Zeradrill Extension Regular
max. 700 rpm

Zeramex Profile Drill SB
max. 350 rpm

Zeratap Small ø3.5 mm
max. 15 rpm

Zeramex XT SB
ø4.2 mm x 8 mm

Attention! Indications:
- Lateral incisors in the upper jaw
- Anterior teeth in the lower jaw
- Completely for Docklocs for *removable dentures for 4 implants in the lower jaw and 6 implants in the upper jaw

Example of implant

Regular ø3.5 × 8 mm

SB
ø 3.5 mm

14 mm
12 mm
10 mm
0.6 mm collar height

Endosseous depth 9 mm

1 mm

Note: If the implant is placed 0.6 mm supracrestal, the drill and thread cutter must be drilled 1 mm deeper. A profile drill (XT35630) is also required.

Endosseous ø3.5 mm

SB
ø 3.5 mm

Important!

With ø3.5 mm implants, do not exceed a torque of 45 Ncm.

Caution!

Use the tap according to the bone quality.

*Our alternative to the LOCATOR® technique

Surgical phase

Drill protocol ø4.2 mm RB

Rosedrill ø2,3 mm
max. 800 U/min

Zeradrill Pilot ø2.3 mm
max. 800 U/min

Zeradrill S8 (Small 8 mm)
max. 700 U/min

Zeradrill R8 (Regular 8 mm)
max. 600 U/min

Optional for hard bone
Zeradrill Extension Wide
max. 600 U/min

Zeratap Wide ø4.2 mm
max. 15 U/min

Zeramex XT RB
ø5.5 mm x 8 mm

Example of implant

Regular ø4.2 × 8 mm

RB
ø 4.2 mm

14 mm
12 mm
10 mm
1.6 mm collar height

Endosseous depth 8 mm

1 mm

Note: Optionally, the implant can also be positioned 0.6 mm supracrestal (instead of 1.6 mm). The drill and thread cutter must be drilled 1 mm deeper in this case.

Endosseous ø4.2 mm

RB
ø 4.2 mm

Important!

With ø4.2 mm implants, do not exceed a torque of 45 Ncm.

Caution!

Use the tap according to the bone quality.

Surgical phase

Drill protocol ø5.5 mm WB

Rosedrill ø2 mm
max. 800 U/min

Zeradrill Pilot ø2.3 mm
max. 800 U/min

Zeradrill S8 (Small 8 mm)
max. 700 U/min

Zeradrill R8 (Regular 8 mm)
max. 600 U/min

Zeradrill W8 (Wide 8 mm)
max. 500 U/min

Optional for hard bone
Zeradrill Extension Wide
max. 500 U/min

Zeratap Wide ø5.5 mm
max. 15 U/min

Zeramex XT WB
ø5.5 mm x 8 mm

Example of implant

Wide ø5.5 × 8 mm

WB
ø 5.5 mm

14 mm
12 mm
10 mm
1.6 mm collar height

Endosseous depth 8 mm

1 mm

Note: Optionally, the implant can also be positioned 0.6 mm supracrestal (instead of 1.6 mm). The drill and thread cutter must be drilled 1 mm deeper in this case.

Endosseous ø5.5 mm

WB
ø 5.5 mm

Important!

With ø5.5 mm implants, do not exceed a torque of 45 Ncm.

Caution!

Use the tap according to the bone quality.

Surgical phase

Handling

1.

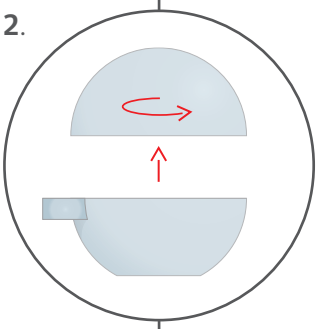
1. Contents

Box contents: Implant in a spherical packaging with matching healing cap.

Important!

Check the required implant dimensions before opening the package.

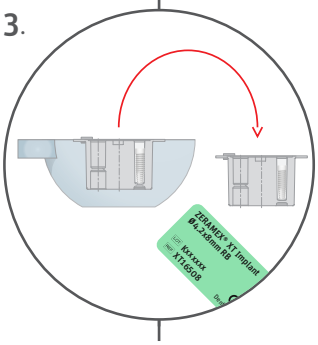
2.



2. Open sphere

Open the sphere by twisting.

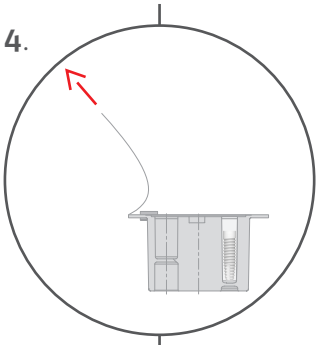
3.



3. Remove

Remove the sterile secondary blisters (low microbial contamination) and patient labels from the sphere.

4.

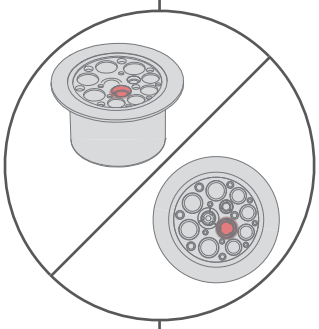


4. Open blister

Break the seal shortly before use (interior is sterile).

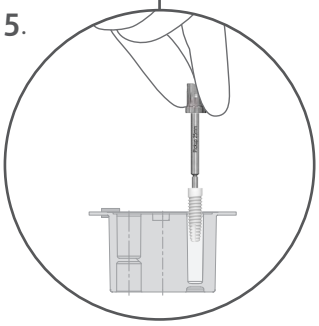
Important!

The healing cap designed to match the implant is also included in the sterile secondary blister in the designated cavity.



SB ø 3.5 mm | RB ø 4.2 mm | WB ø 5.5 mm

5.



5. Pick up implant

Pick up the implant using the pick-up tool (insert in the ratchet adapter; snap in the square socket). It is recommended to put the Healing Cap on the sterile area and to pick up the implant using the prosthetic key or pick-up.

Required material

Pick-up (XT36620/XT36625), **Ratchet Adapter Unit Short** (P48932)

Surgical phase

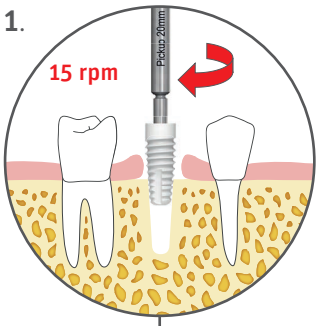
Scan me!

XT

Implant

Insert

1.



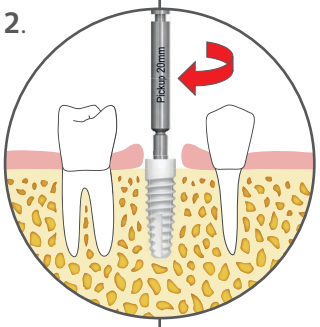
1. Screw in

Slowly screw the implant into the precut drill hole.

Important!

Never use the rescue pick-up for insertion.

2.



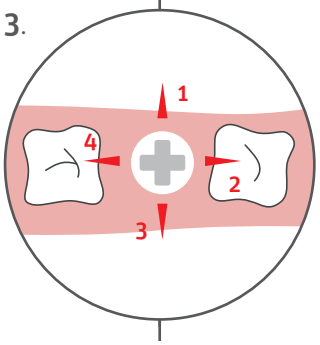
2. Tighten

Tighten the implant using the ratchet.
Recommendation: 20 - 30 Ncm
SB max. 35 Ncm
RB/WB max. 45 Ncm

Important!

Due to the conical design, torque is only exerted in the last two rotations.

3.

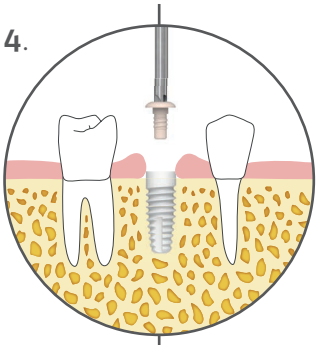


3. Positioning

= The arrows show the possible positions of the angled abutment. Take this into account when inserting the implant.

Seal

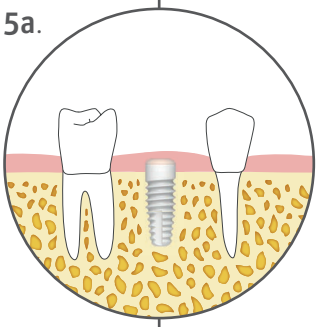
4.



4. Seal

Seal the implant with the healing cap using the prosthetic key (XT38619/XT38623/XT38628) and carefully tighten the healing cap (**max. 5 Ncm**).

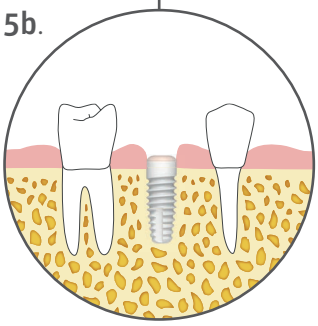
5a.



5a. Version 1

Closed healing (recommended).

5b.



5b. Version 2

Open healing; note closely adjacent gingiva.

Comply with protocol torque

The maximum torque for all SB implants is **35 Ncm**. The maximum torque for RB and WB implants is **45 Ncm**. Never exceed this torque. The pick-up has a predetermined breaking point of approximately 50 Ncm. Maximum speed: **15 rpm**.

Zeramex XT
Prosthetic restoration

XT

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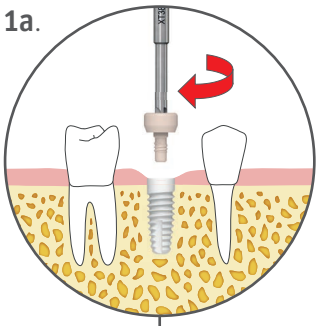
Soft tissue management

XT

Gingiva former

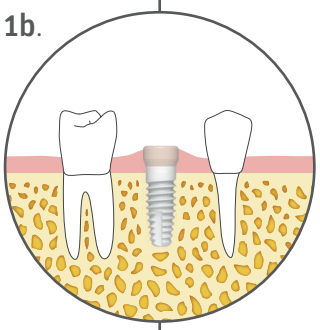
1a.



Comply with protocol torque

Force does not need to be applied to insert the gingiva former. Carefully screw in to the full depth.

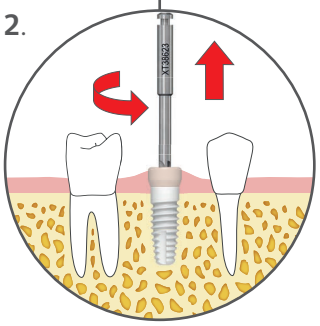
1b.



1a/b. Insert

Place the gingiva former on the prosthetic key and carefully screw in clockwise to the full depth under slight pressure. **(max. 5 Ncm)**.

2.



2. Remove

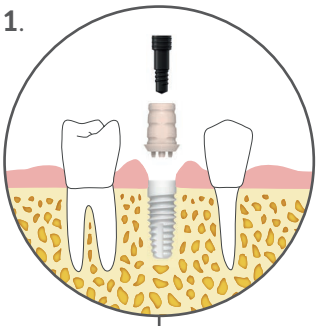
To remove the gingiva former, insert the prosthetic key and turn counterclockwise.

Required material

Gingiva former (SB35503/SB35504/RB36503/RB36504/WB37503/WB37504),
Prosthetic key (XT38619/XT38623/XT38628)

Temporary restoration

1.



1. Position

Position the temporary abutment and tighten with the prosthetic key **(max. 15 Ncm)**.

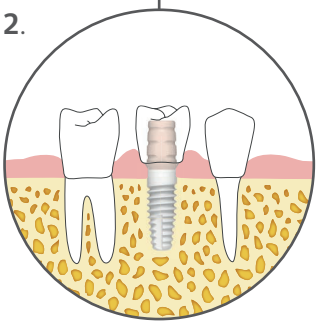
Important!

The maximum wearing time of the temporary abutment is **180 days**.

General information

Bear in mind that polymer prosthetic components have a different feel than metal to the user. Familiarise yourself with this beforehand.

2.



2. Process

If necessary, work on the provisional extra-orally and provide it with a provisional crown.

Processing the provisional restoration

It is preferable to machine the polymer with fine-grain diamond-coated instruments at a high speed. This is done extra-orally with slight pressure and effective cooling.

Required material

Provisional restoration (SB35530/RB36530/WB37530),
Prosthetic key (XT38619/XT38623/XT38628)

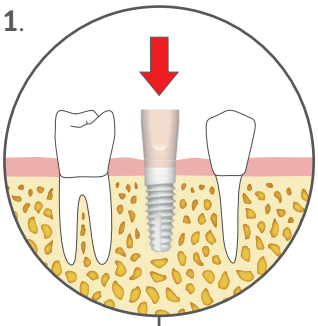
Digital impression taking

XT

Intraoral scan

In the surgery

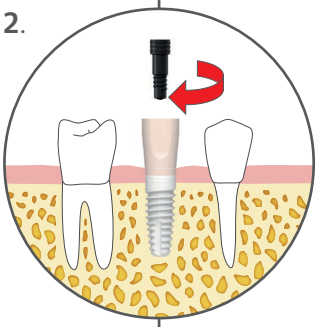
1.



1. Positioning

Thoroughly clean the implant connection. Place the corresponding scan abutment (Scanbody SB/RB/WB) on the implant and ensure that the surface is clearly visible to the scanner during positioning.

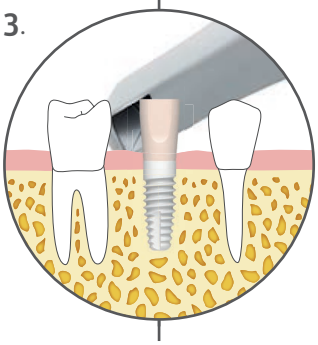
2.



2. Screw tight

Tighten the scan abutment (Scanbody SB/RB/WB) with the corresponding screw **(max. 5 Ncm)** and ensure it is firmly in place.

3.



3. Taking an impression

Perform the scanning procedure according to the instructions of the system used. Send digital scan data to the laboratory to create the 3D print model with associated analogue cavity.

Information!

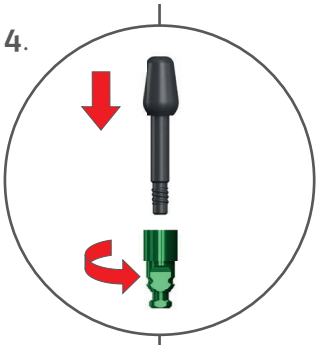
Alternatively, a master model can also be digitised in a 3D laboratory scanner for further processing.

Information!

Method suitable for common CADCAM systems.

In the lab

4.



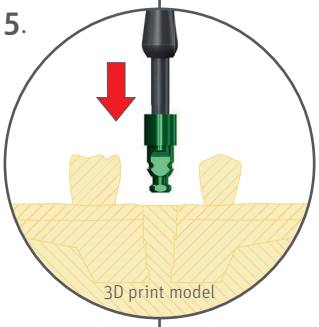
4. Connecting

Screw in the Digital Implant Replica Placer (insertion instrument) by hand in a clockwise direction.

Important!

Check the analogue cavity in the print model for structural defects and residues.

5.



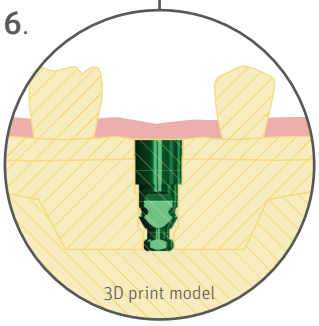
5. Fitting

Insert and centre the Digital Implant Replica into the cavity. Then press the Digital Implant Replica down with sufficient pressure until it clicks into place. The basally visible surface should be flush with the print model. Check Digital Implant Replica for tight fit.

Important!

Repeated removal and insertion of the replica in the same model may cause wear to the snap-in function.

6.



6. Restoration

The individual secondary part for occlusal screw-in restorations (from page 36) is available for the digital workflow. Digital scan data can be processed directly in exocad and 3Shape software (complete integration).

Required material

Scanbody incl. Screw (SB35514/RB36514/WB37514), **Digital Implant Replica Placer** (RB36521), **Digital Implant Replica** (SB35522/RB36522/WB37522)

Conventional impression taking

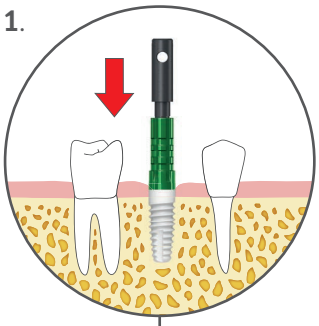
Scan me!

XT

Open tray

In the surgery

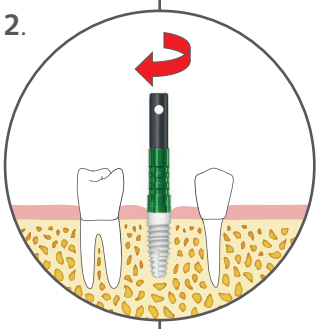
1.



1. Position

Place the locking pin with the transfer sleeve on the implant shoulder under slight pressure while turning until it snaps into the hex head socket, rests securely on the implant shoulder, and can no longer be rotated.

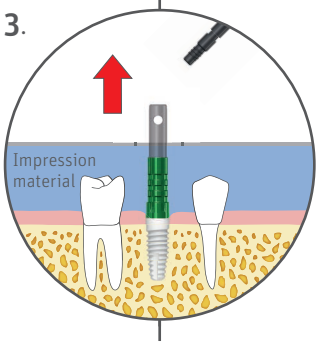
2.



2. Screw tight

Secure the transfer sleeve with one hand. Tighten the locking pin clockwise by hand, and check the position for a form-fit. In case of doubt, take an X-ray.

3.



3. Taking an impression

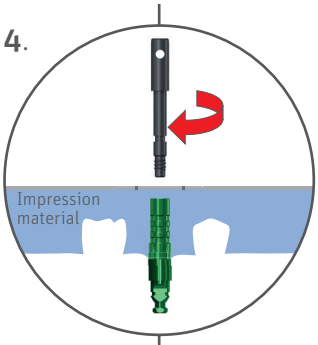
Create the impression with an open tray. Unscrew and remove the locking pin. Remove the impression and send with the locking pin to the dental technician.

Important!

The transfer sleeves must be snapped into the inner edge and mate securely. To check, apply a slight counter-movement.

In the lab

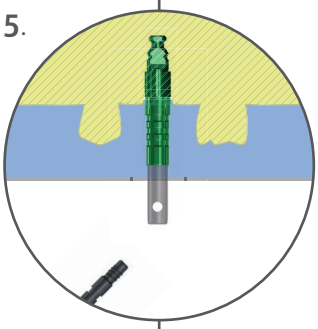
4.



4. Connecting

Position the transfer sleeve on the replica shoulderunder slight pressure while twisting until it snaps into the hex head socket of the digital implant replica, rests securely on the shoulder and can no longer be rotated. Tighten the locking pin clockwise by hand.

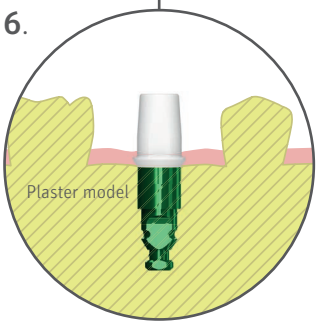
5.



5. Creating model

Check that the transfer with the screw-fitted digital implant replica is securely seated. Create master model. Remove the locking pin before removing the impression.

6.



6. Restoration

Select an abutment based on the prosthetic requirements and the preferred surgical method. Straight and angled abutments, CADCAM and customized abutments are available, along with Zeramex Docklocs® Abutments (from page 49).

Required material

Transfer Open Tray (SB35510/RB36510/WB37510), **Digital Implant Replica** (SB35522/RB36522/WB37522)

Information!

The four **retaining elements** of the implant must be correctly aligned when selecting an **angled abutment** (User Instructions Surgery, page 26, fig. 3), otherwise we recommend using a **customized abutment** instead (page 42).

Conventional impression taking

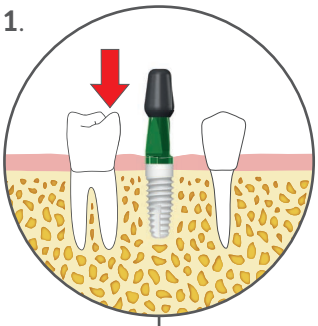
Scan me!

XT

Closed tray

In the surgery

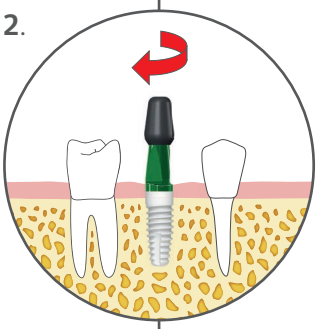
1.



1. Positioning

Place the transfer sleeve on the implant shoulder under slight pressure while turning until it snaps into the hex head socket, rests securely on the implant shoulder, and can no longer be rotated.

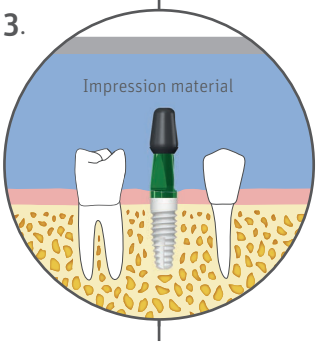
2.



2. Tighten

Tighten the locking pin clockwise by hand, and check the position for a form-fit.

3.



3. Taking an impression

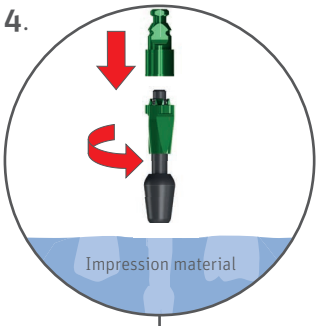
Take an impression with a closed tray and remove. Unscrew the locking pin, remove the transfer from the implant and send to the dental technician with the impression.

Important!

The transfer sleeves must be snapped into the inner edge and mate securely. To check, apply a slight counter-movement.

In the lab

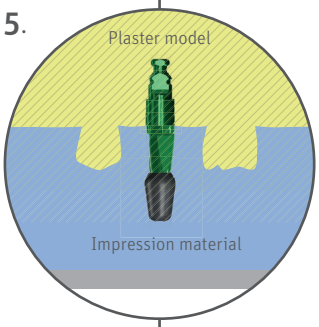
4.



4. Connecting

Position the transfer sleeve on the replica shoulder under slight pressure while twisting until it snaps into the hex head socket of the digital implant replica, rests securely on the shoulder and can no longer be rotated. Tighten the locking pin clockwise by hand.

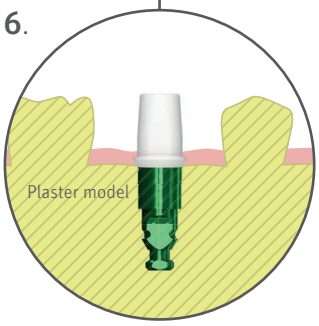
5.



5. Repositioning and creating model.

Reposition the transfer with the screw-fitted digital implant replica and check that it is securely seated. Create master model.

6.



6. Restoration

Select an abutment based on the prosthetic requirements and the appropriate surgical method. Straight and angled abutments, CADCAM and customized abutments are available, along with Zeramex Docklocs® Abutments (from page 49).

Required material

Transfer Closed Tray (RB36512/WB37512) or (RB36513/WB37513), **Digital Implant Replica** (SB35522/RB36522/WB37522)

Caution!

Closed impression taking is not recommended for the front section of the maxilla or in the case of angulation greater than 15°.

Prosthetic process

XT

Field of use

Information on fields of use and indications is available in the instructions for use (IFU) at www.zeramex.com.

1 Preparation phase

Prosthetic restoration is governed by the overall approach for achieving the best possible results. Integral functionality, aesthetics and patient comfort are the primary considerations. A detailed dental analysis (including X-rays) taking into account the patient's medical history is the foundation for this. Create the treatment plan based on the main considerations.

2 Gingiva management

A "pink" appearance reflects healthy gums. It is essential to treat any gum disorders in advance. Soft tissue grows well around zirconia oxide, which is of great relevance, especially in the anterior region. A natural emergence profile is individually created using a gingiva former or a provisional, and the "black triangle" is a thing of the past.

3 Abutment/implant connection

There are two basic pathways to metal-free, aesthetically and biologically flawless restoration:
- Screwed prosthetic restoration (page 34)
- Cemented prosthetic restoration (page 38)

The range of metal-free prosthetics is extensive and satisfies the stringent requirements with regard to aesthetics and functionality. The Zeramex XT implant with its various abutments is ideal for nearly every situation.

4 Workflow

The Zeramex XT implant system seamlessly integrates with conventional procedure using manual, direct and indirect impressions.

SB ø 3.5 mm — The prosthetic parts marked pink are for the SB platform (3.5 mm implant).

RB ø 4.2 mm — The prosthetic parts marked green are for the RB platform (4.2 mm implant).

WB ø 5.5 mm — The prosthetic parts marked yellow are for the WB platform (5.5 mm implant).

Note: The exceptions are the screws (RB16550/ RB36554/RB36550/RB36514). Please note the information on pages 48-50.

Vicarbo Screw RB16550

Try-In Screw RB36554

Provisional Screw RB36550

Prosthetic tools

Important!

Products must be secured against aspiration when handled intraorally!

SB ø 3.5 mm RB ø 4.2 mm WB ø 5,5 mm

Ratchet

Important!

Always store the ratchet untightened.

Surgical Ratchet
(P48935)

Adapter Unit Short
(P48932)

Prosthetic key

Prosthetic key 19 mm
(XT38619)

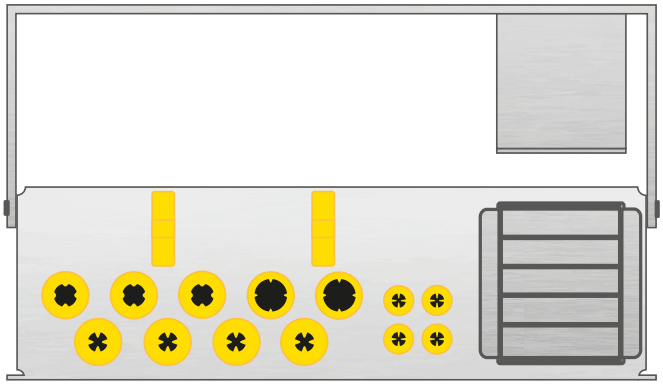
Prosthetic key 23 mm
(XT38623)

Prosthetic key 28 mm
(XT38628)

Prosthetic kit

Prosthetic kit
(XT48860)

Prosthetic kit, incl. Ratchet
(XT48865)



Screw-retained connection

XT

SB ø 3.5 mm

RB ø 4,2 mm

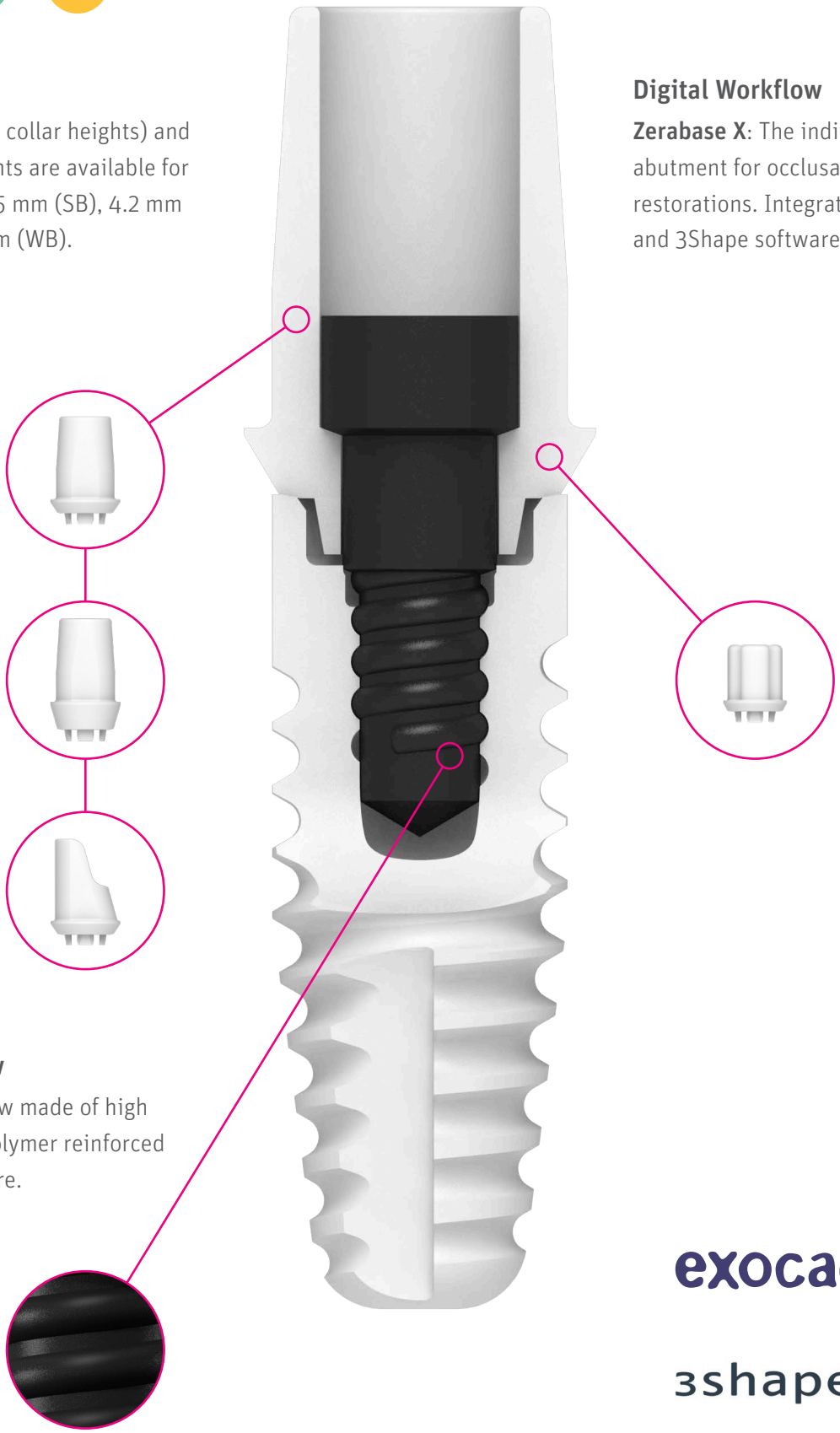
WB ø 5,5 mm

Abutments

Straight (in two collar heights) and angled abutments are available for the implants 3.5 mm (SB), 4.2 mm (RB) and 5.5 mm (WB).

Digital Workflow

Zerabase X: The individually shaped abutment for occlusal screwed restorations. Integration in exocad and 3Shape software.



Vicarbo screw

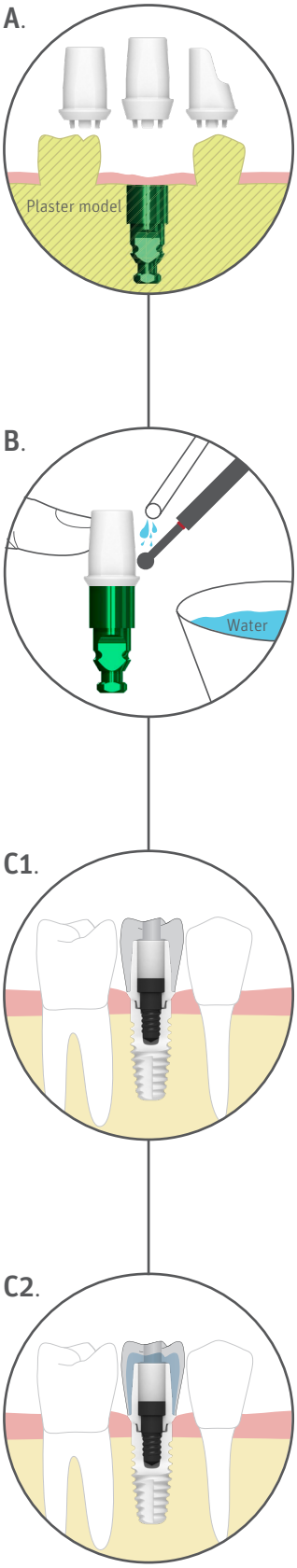
The strong screw made of high performance polymer reinforced with carbon fibre.

exocad

3shape

Screw-retained prosthetic restoration

XT



A. Select the suitable abutment.

B. If necessary, individually machine the abutment. Only process the abutment under sufficient, continuous cooling with slight pressure. Local overheating causes micro-fissures and destruction of the abutment.

Important!
Please note the information on machining abutments on page 47!

C. All XT abutments are approved for the following: Adhesion, milling and pressing. You can choose a monolithic crown (C1) or a full-ceramic crown on a zirconia dioxide cap (C2).

C1. Monolithic crowns made of various optimised polymers or zirconia dioxide.

C2. All-ceramic crowns made of layered or pressed ceramic on a zirconia dioxide cap.

Fabricating supraconstructions in the lab

The Zeramex XT system offers reversible screwing into zirconia dioxide. The internal thread makes it possible to screw prosthetic parts and zirconia dioxide abutments into implants. The anti-rotation protection on the platform allows secondary parts to be securely and precisely positioned, and the lab screw ensures that they are firmly seated.

Everything you need for the lab at a glance

- Every abutment is supplied with the appropriate Vicarbo screw.
- Every Vicarbo screw may only be tightened once up to the maximum torque.
- The torque for the **Vicarbo screw** for the SB/RB/WB platform is always **25 Ncm**!
- For work in the lab, we offer **Try-In Screws** that may not be tightened more than **5 Ncm**.
- Adapt your approach to the anatomical situation and do not use over-dimensioned crowns or connections to natural teeth (hybrid restoration).
- Do not use “floating crown attachments” with an abutment.
- When grinding the abutment, an additional replica can be used as a holder. Counterpressure with the fingers reduces vibration.

Tip: Use an individual positioning wrench for angled abutments or complex restorations

Scan me!

Important!
It is essential to consider the minimum layer thickness according to the manufacturer’s instructions for the specific crown material.

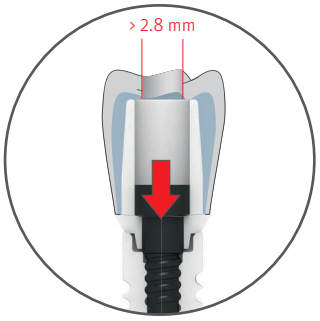
Screw-retained prosthetic restoration

XT

SB ø 3.5 mm

RB ø 4,2 mm

WB ø 5,5 mm



The diameter of the screw channel for the Vicarbo screw for the **SB/RB/WB platform must be › 2.8 mm**.

The diameter of the screw channel for the reduced-diameter version must be **› 2.2 mm**.

Caution!

When sealing the screw channel, do not use any gels or liquids containing chlorine.

Occlusal screw-retained connection in the patient's mouth

Restoration with placeholders

When using placeholders, make sure that the screw channel diameter allows the Vicarbo screw to be inserted into and removed from the abutment and crown at any time, even when the crown is already tightly cemented to the abutment.

You can make your own positioning aids/placeholders: **SB/RB/WB platform: › 2.8 mm**

Screw channel with a reduced diameter

You can also use screw channels with a reduced diameter instead of placeholders. With this, the screw channel diameter can be reduced to **› 2.2 mm**. The prosthetic key (XT38619/XT38623/XT38628) can be used as a placeholder.

Important!

- When using reduced-diameter screws, the Vicarbo screw must be inserted in the abutment in the laboratory before the crown is secured onto the abutment.
- The Vicarbo screw cannot be screwed in or out after the crown has been cemented.
- When cementing the crown, excess cement must not enter the screw channel of an inserted screw (insert cotton wad or a similar placeholder that can be removed from the screw channel).
- If the abutment is shortened, make sure that the Vicarbo screw has sufficient vertical space to be screwed in and out.

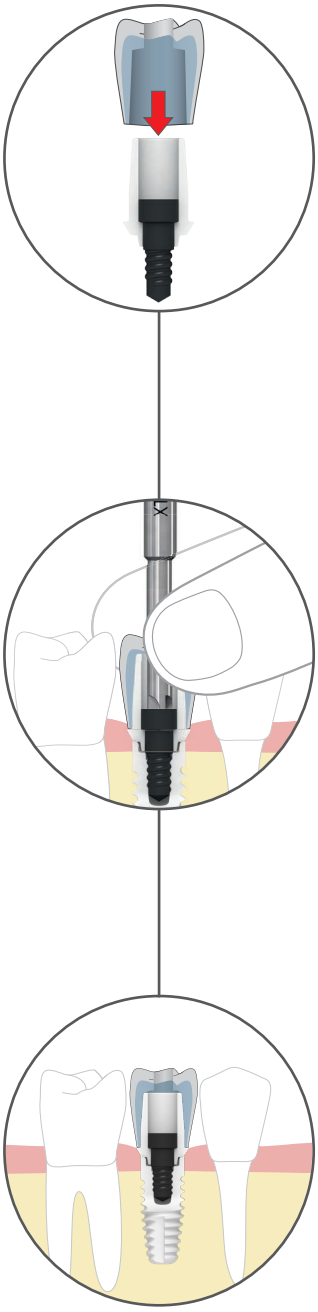
Screw-retained prosthetic restoration

XT

Comply with protocol torque

The unique torque for the Vicarbo screw for all platforms is **(SB/RB/WB): 25 Ncm.**

SB ø 3.5 mm RB ø 4,2 mm WB ø 5.5 mm



1a.

1b.

Occlusal screw-retained connection in the patient's mouth

1a.

The cap can be veneered by pressing or layering. Select the diameter of the screw channel for later screwing depending on the procedure:

- SB/RB/WB abutments: › 2.8 mm
- **Reduced diameter: › 2.2 mm***

*Important!

When using reduced-diameter screws, the screw must be inserted in the abutment before the crown is cemented onto the abutment. Please note the information on page 36.

1b.

Place the abutment with the cemented crown on the implant. Apply slight pressure to fit the abutment/crown until it snaps into place in the correct position. Hold the abutment/crown and tighten the screw in the screw channel by applying pressure from the occlusal direction. **Use the prosthetic key and the torque ratchet (SB/RB/WB: 25 Ncm)**. Use a probe and/or X-ray to check if the abutment is correctly seated.

Required material

Abutment incl. Vicarbo screw (SB15501/SB15502/SB15515), (RB16501/RB16502/RB16515), (WB17501/WB17502/WB17515), **Zerabase X incl. Vicarbo screw** (SB15535/SB15536), (RB16535/RB16536), (WB17535/WB17536), **Prosthetic key** (XT38619/XT38623/XT38628)

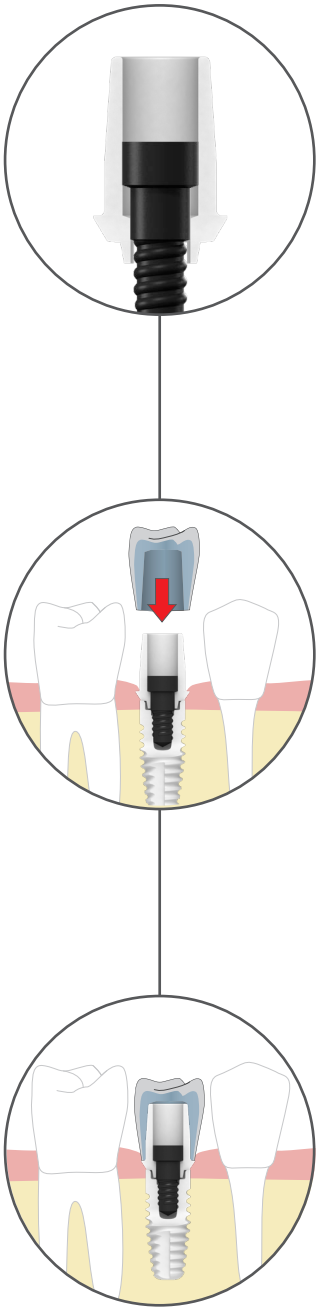
Cemented prosthetic restoration

XT

Comply with protocol torque

The unique torque for the Vicarbo screw for all platforms is **(SB/RB/WB): 25 Ncm.**

SB ø 3.5 mm RB ø 4.2 mm WB ø 5.5 mm



2a.

2b.

Cementing the crown in the patient's mouth

Note: If a screw channel is not possible or required, the crown can be produced in the laboratory without a screw channel.

2a.

The Vicarbo screw is picked up with the prosthetic key and inserted into the abutment. The abutment can now be transferred onto the implant with the prosthetic key. **Note**: Hold the abutment and screw tight > No locking! Before tightening the screw, press it downward. Use the prosthetic key and the torque ratchet to tighten the screw. **(SB/RB/WB: 25 Ncm)**. Use a probe and/or X-ray to check if the abutment is correctly seated.

Note: An individual positioning wrench may need to be made.

2b.

The cap can be veneered by pressing or layering. Cement the finished crown onto the tightly screwed abutment, and remove any excess cement.

Note: There is a specific screw for each abutment. Please note the technical data for Zeramex screws on pages 48-50.

Required material

Abutment incl. Vicarbo screw (SB15501/SB15502/SB15515), (RB16501/RB16502/RB16515), (WB17501/WB17502/WB17515), Zerabase X incl. Vicarbo screw **(SB15535/SB15536), (RB16535/RB16536/RB16530/RB16531), (WB17535/WB17536/WB17530/WB17531),** Prosthetic key **(XT38619/XT38623/XT38628)**

Platform switching

XT

To prevent potential crestal bone loss or to increase the soft tissue volume around the implant platform, the excellent prosthetic flexibility of the Zeramex XT system allows platform switching with two options available.

SB ø 3.5 mm RB ø 4.2 mm WB ø 5.5 mm

1.

SB ø 3.5 mm

Zeramex XT SB Abutments
SB15501/SB15502/SB15515

Zeramex XT RB Implants
XT16508/XT16510/XT16512/XT16514

RB ø 4.2 mm

Examples
SB 15501
XT16510

2.

RB ø 4.2 mm

Zeramex XT RB Abutments
RB16501/RB16502/RB16515

Zeramex XT WB Implants
XT17508/XT17510/XT17512

WB ø 5.5 mm

Examples
RB 16501
XT17510

Zeramex XT Platform Switching options

1.

It is possible to place a Zeramex XT SB abutment (SB15501/SB15502/SB15515/SB15535/SB15536/SB15551) on any Zeramex XT RB implant (XT16508/XT16510/XT16512/XT16514).

2.

It is possible to place a Zeramex XT RB abutment (RB16501/RB16502/RB16515/RB16535/RB16536/RB16530/RB16531/RB16551) on any Zeramex XT WB implant (XT17508/XT17510/XT17512) .

Caution!

There is no option for platform switching for Zeramex XT WB implants with Zeramex XT SB abutments.

Screw-retained prosthetic restoration CADCAM

XT

Zerabase X for customized abutments

Screw-retained all-ceramic restorations

Zeramex allows you to combine metal-free dentures with highly efficient workflows. Zerabase X provides you with the basis for your individually shaped abutment for occlusal screwed restorations. Work with your preferred work process and use Exocad or 3Shape software for digital workflows.

High flexibility

- Design the abutment the way you want it
- Individual shaping facilitates optimum aesthetics
- Residual cement can be removed easily and safely since preparation margins can be shaped ideally
- Design the abutment in a way that achieves ideal crown support and a stable fit
- Suitable for screw-retained and cement-retained restorations

Work processes

The adhesive base Zerabase X allows you to work using your preferred work process.

Conventional work process

- Creating wax-up for moulded or milled restorations

Digital work process (digital design in exocad or 3Shape software)

- Machined abutment → scanning without Scanbody and designing in the software
- Non-machined abutment → scanning in Scanbody and designing in the software

Production

The cap or crown will be milled in your laboratory, in the milling centre of your choice, or chair-side

Leading software

Zerabase X is integrated in exocad and 3Shape.

exocad: The library will be updated automatically to include Zerabase X Abutments.
Exception: Systems from Zirkonzahn and Amann Girrbach require that files be imported manually

3Shape: Please download the files from our website and import them into your system.

Information!

You can find all files on our website:**www.zeramex.com**.

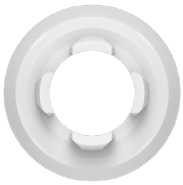
exocad 3shape

Screw-retained prosthetic restoration CADCAM

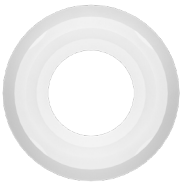
XT

Zerabase X
engaged/non-engaged

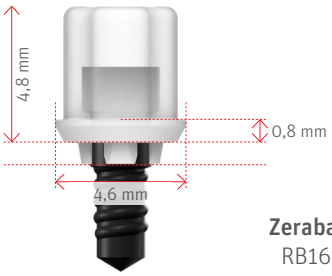
Scanbody



Zerabase X for crowns



Zerabase X for bridges and bars



Zerabase X
RB16535

Features & Benefits

Zerabase X Abutment

- Precise, stable original connection for high stability
- Retentive element and phase for precise placing of cap or crown
- Adhesion surfaces for optimum retention and adhesion of the restoration

Zeramex Scanbody

- Ideal geometry for precise digital recording
- Stable polymer for multiple use in the laboratory
- Scanbody tightening torque: **max. 5 Ncm**

Note: Please do not grind the scanbody. There is a possibility, that the system could no longer recognise it.

The right match for your indication

Zerabase X for crowns (engaged):

The four interlocks secure the position on the implant.

Zerabase X for bridges and bars (non-engaged):

No protection against rotation

Processing information & material

Processing information

- Final tightening torque of abutment with Vicarbo screw: SB, RB and WB: **25 Ncm** (in lab, use Try-In Screws: **max. 5 Ncm**)
- CTE for ZrO_2 ATZ: 9×10^{-6}/K
- Adhesion using commercially-available adhesives

Material

- Zerabase X Abutments: ATZ
- Zeramex Scanbody: PEEK
- Screw: Vicarbo (carbon-fibre-reinforced high-performance polymer)

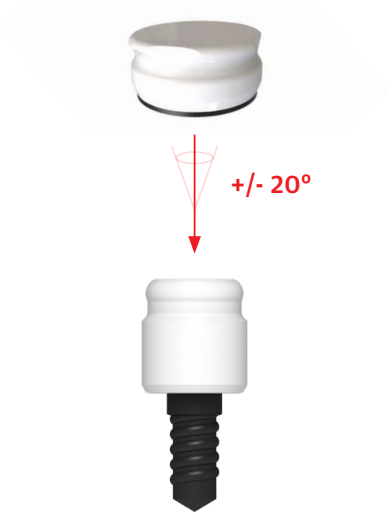
Zeramex Docklocs® Abutments

XT

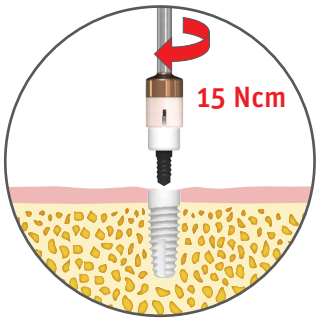
Do not overtighten

The unique torque for the Vicarbo screw of the Docklocs® Abutments for all platforms is **(SB/RB/WB): max. 15 Ncm.**

SB ø 3.5 mm RB ø 4.2 mm WB ø 5.5 mm



1.



2.

Sequence

Zeramex Docklocs® is a pre-finished connection system to secure removable restorations based on a snap connection.

Note: Zeramex Docklocs® Abutments are available in three heights (2 mm/3 mm/4 mm) and fit on all platforms (SB/RB/WB).

1. Divergences

The Zeramex Docklocs® system offers the option of integrating a dental prosthesis for implantation that diverges by up to 20°. This means that deviations between two implants of **up to 40°** can be corrected.

2. Insert the Zeramex Docklocs® Abutment

Ensure that the implant shoulder is not covered by hard or soft tissue. Screw the Zeramex Docklocs® Abutment with the Zeramex Docklocs® Insertion Instrument (XT38227) into the implant and tighten by hand. Tighten the abutment with the ratchet, the ratchet adapter and the Zeramex Docklocs® Insertion Instrument to **15 Ncm**.

Note: Horizontal alignment of all Zeramex Docklocs® Abutments makes the insertion of the prosthesis easier for the patient.

Zeramex Docklocs® Abutments

XT

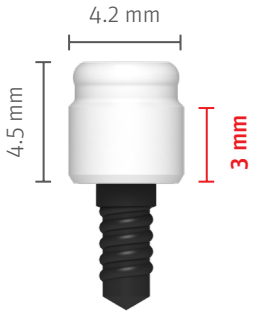
Technical data

The Zeramex Docklocs® system consists of a Zeramex Docklocs® Abutment, the matching insertion instrument, a Zeramex Docklocs® housing, a Zeramex Docklocs® blockout ring, a Zeramex Docklocs® lab analogue, a Zeramex Docklocs® impression post and three exchangeable Zeramex Docklocs® polyamide retention inserts (PA12) with different colour-coded retention values and pull-off forces.

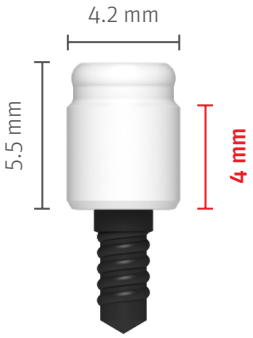
SB ø 3.5 mm RB ø 4.2 mm WB ø 5.5 mm

Zeramex Docklocs® Abutments (2 mm/3 mm/4 mm)

Zeramex Docklocs® Abutment 2 mm
(SB15542)

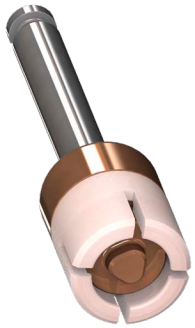


Zeramex Docklocs® Abutment 3 mm
(SB15543)



Zeramex Docklocs® Abutment 4 mm
(SB15544)

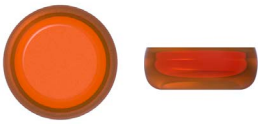
Zeramex Docklocs® Insertion Instrument



Zeramex Docklocs® Insertion instrument
(XT38227)

Zeramex Docklocs® Retention inserts

Red: 0.45 kg (Extra-light retention)
(XT38205)



Orange: 0.91 kg (Light retention)
(XT38206)

Green: 1.81 kg (Strong retention)
(XT38207)

Note: The Zeramex Docklocs® retention inserts can be exchanged without tension using a conventional assembly and disassembly instrument for retention inserts.

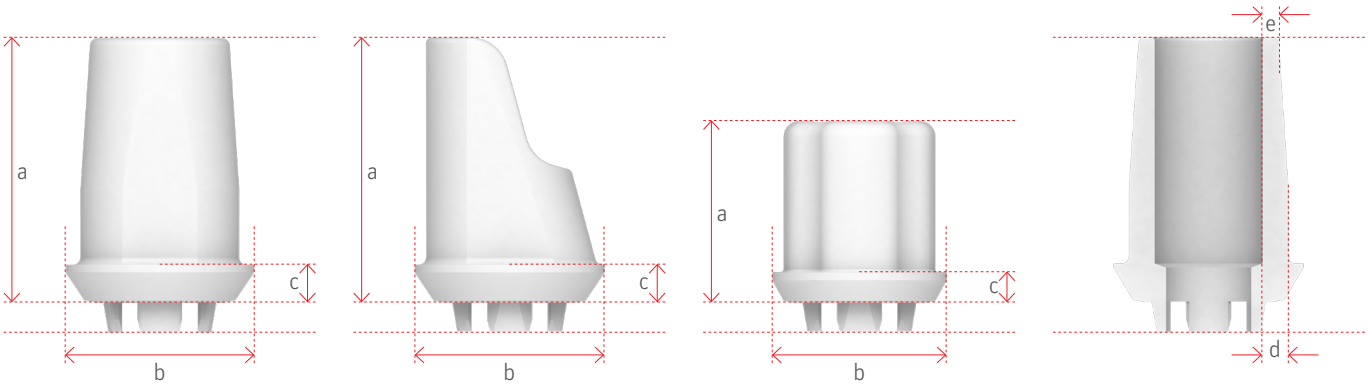
Docklocs® is a registered trademark of MEDEALIS GmbH, DE and our alternative to the LOCATOR® technique.

Zeramex Docklocs® Zirconia Housing

Zeramex Docklocs® Zirconia Retention Housing
(XT38230)

Technical data for Zeramex XT abutments

XT



SB ø 3.5 mm

		a	b	c	d	e
SB15501	Zeramex XT Abutment SB Straight, 1 mm	7.0	4.6	1.0	0.7	0.6
SB15502	Zeramex XT Abutment SB Straight, 2 mm	8.0	4.6	2.0		
SB15515	Zeramex XT Abutment SB Angular 15°, 1 mm	7.0	4.6	1.0		
SB15535	Zeramex XT Zerabase X SB, Engaging for crown	4.8	4.6	0.8	0.4	–
SB15536	Zeramex XT Zerabase X SB Non-engaging, for bridge	4.8	4.6	0.8		

All dimensions in millimetres

RB ø 4.2 mm

		a	b	c	d	e
RB16501	Zeramex XT Abutment RB Straight, 1 mm	7.0	5.0	1.0	0.7	0.6
RB16502	Zeramex XT Abutment RB Straight, 2 mm	8.0	5.0	2.0		
RB16515	Zeramex XT Abutment RB Angular 15°, 1 mm	7.0	5.0	1.0		
RB16535	Zeramex XT Zerabase X RB, Engaging for crown	4.8	4.6	0.8	0.4	–
RB16536	Zeramex XT Zerabase X RB Non-engaging, for bridge	4.8	4.6	0.8		

All dimensions in millimetres

WB ø 5.5 mm

		a	b	c	d	e
WB17501	Zeramex XT Abutment WB Straight, 1 mm	7.0	6.0	1.0	0.7	0.6
WB17502	Zeramex XT Abutment WB Straight, 2 mm	8.0	6.0	2.0		
WB17515	Zeramex XT Abutment WB Angular 15°, 1 mm	7.0	6.0	1.0		
WB17535	Zeramex XT Zerabase X WB, Engaging for crown	4.8	5.6	0.8	0.4	–
WB17536	Zeramex XT Zerabase X WB Non-engaging, for bridge	4.8	5.6	0.8		

All dimensions in millimetres

Grinding Standard Abutments

XT

Do not overtighten

The unique torque for the Vicarbo screw for all platforms **(SB/RB/WB)** is: **25 Ncm.**

SB ø 3.5 mm RB ø 4.2 mm WB ø 5.5 mm

Example of abutment

Zeramex XT Abutment RB Straight, 1 mm
RB16501

Material

ZrO_2 ATZ-HIP
Composition:
- ZrO_2: 76%
- Al_2O_3: 20%
- Y_2O_3: 4%

Flexural strength: >1'700 MPa (average 2'000 MPa)
CTE for ZrO_2 ATZ: 9 × 10–6/K

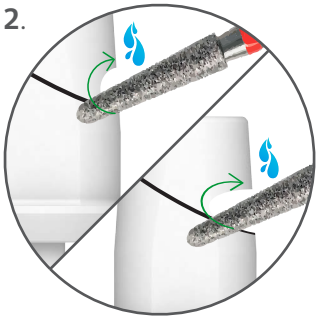
Procedure

- Conical part **(4.0 mm)** may be shortened.
- Only process under sufficient, continuous water cooling with slight pressure.
- Use high speed **(water-cooled turbine)** and fine grain size (red-ring diamond, smaller than 50 µm).

1.

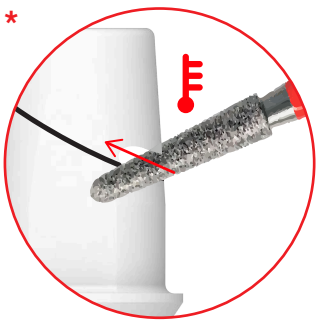
1. Marking (record) of the "Preparation process"

2.



2. Adequate procedure with handpiece: Lightly encircle the preparation position, then expand it in a vertical, V-shaped movement until it is cut through.

*



*** Caution!**

Do not cut through zirconia dioxide that is the same thickness of the instruments or grinding tool.

Risk of overheating!

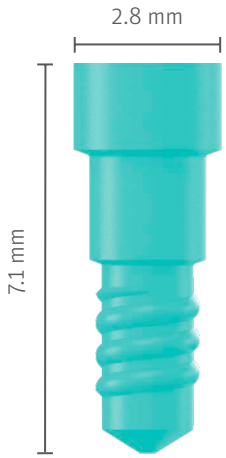
Technical data for Zeramex XT screws

XT

Important distinguishing feature of Zeramex XT screws:

- The Try-In Screw and Vicarbo Screw have no grooves on the screw head and are shorter than the Provisional Screw
- The screw head diameter for the Vicarbo Screw & Try-In Screw is 2.8 mm
- All screws are suitable for Small (SB), Regular (RB) and Wide Base (WB).

SB ø 3.5 mm RB ø 4.2 mm WB ø 5.5 mm



Vicarbo Screw

RB16550

Matches:
SB/RB/WB Abutment

Distinguishing feature:
Length: 7.4 mm
No grooves on screw head
Black

Tightening torque:
25 Ncm

Material:
Vicarbo

Caution:
This screw is intended for the final treatment and may only be used once! It can be tried on with a max. 15 Ncm torque.

Try-In Screw

RB36554

Matches:
SB/RB/WB Abutment

Distinguishing feature:
Length: 7.1 mm
No grooves on screw head
Green

Tightening torque:
5 Ncm

Material:
PEEK

Caution:
This screw may only be used in the laboratory and not for the definitive fit!

Provisional Screw

RB36550

Matches:
SB/RB/WB provisional

Distinguishing feature:
Length: 8.6mm
Ring on screw head
Black

Tightening torque:
15 Ncm

Material:
Vicarbo

Caution:
This screw may only be used for the temporary restoration!

Technical data for Zeramex XT screws

XT

Vicarbo Screw
(RB16550)
Tightening torque:
25 Ncm

Try-In Screw
(RB36554)
Tightening torque:
5 Ncm

Provisional Screw
(RB36550)
Tightening torque:
15 Ncm

SB ø 3.5 mm | RB ø 4.2 mm | WB ø 5.5 mm

SB straight, 1 mm
(SB15501)

RB straight, 1 mm
(RB16501)

WB straight, 1 mm
(WB17501)

SB straight, 2 mm
(SB15502)

RB straight, 2 mm
(RB16502)

WB straight, 2 mm
(WB17502)

SB angular, 1 mm
15° (SB15515)

RB angular, 1 mm
15° (RB16515)

WB angular, 1 mm
15° (WB17515)

SB Zerabase X
Crown (SB15535)

RB Zerabase X
Crown (RB16535)

WB Zerabase X
Crown (WB17535)

SB Zerabase X
Bridge (SB15536)

RB Zerabase X
Bridge (RB16536)

WB Zerabase X
Bridge (WB17536)

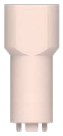
SB ø 3.5 mm | RB ø 4,2 mm | WB ø 5,5 mm

SB Provisional
(SB35530)

RB Provisional
(RB36530)

WB Provisional
(WB37530)

SB ø 3.5 mm | RB ø 4,2 mm | WB ø 5,5 mm



SB Scanbody
(SB35514)

RB Scanbody
(RB36514)

WB Scanbody
(WB37514)

The metal-free innovation: Vicarbo screw

XT

Our objective was to offer a 100% metal-free solution in which not only the implant but also the screw are metal-free. We therefore decided to use the high-performance material Vicarbo. Vicarbo is a carbon-fibre reinforced PEEK plastic, in which the carbon fibres are aligned with the longitudinal axis of the material. In this way, we can achieve enormous strength. Thanks to the production process developed by Zeramex, the carbon fibres are not damaged during production and they retain their full function. This screw is unique in dental implantology.

This material has already proved its worth in other medical applications (e.g. orthopaedics) and is considered to be the material of the future Aerospace engineers also use carbon fibre reinforced components because of their enormous strength and low weight.

SB ø 3.5 mm RB ø 4,2 mm WB ø 5,5 mm

Technical specifications

- Flexural modulus: >130 GPa
- Flexural strength: >900 MPa

Sterilisation method

- Steam sterilisation at 132 °C / 270 °F or 134 °C / 274 °F / Time: 18 minutes

Do I have to keep the specified tightening torques?

The specified tightening torque must be used to compensate the reduced tension through the tight fit and to ensure a reliable, permanent bond.

Why does the Vicarbo screw have a conical shoulder?

The conical shoulder of the screw was designed so that the fit with the abutment is as tight as possible without generating lateral forces that could damage the abutment later.

What material is the Vicarbo screw made from? Why is it black?

The screw is made of PEEK plastic reinforced with longitudinally aligned carbon fibres. The carbon fibres are responsible for the Vicarbo screw's colour.

Zeramex XT
Range

XT

ZERAMEX

www.zeramex.com

Range

XT

Zeramex XT Implants

SB Ø3.5 mm	Art. No.	Name	Dimension	Material
	XT15508	ZERAMEX® XT Implant ø3,5×8 mm SB (Implant incl. Healing Cap)	Length: 8 mm	ZrO_2-ATZ-HIP
	XT15510	ZERAMEX® XT Implant Ø3.5×10 mm SB (Implant incl. Healing Cap)	Length: 10 mm	
	XT15512	ZERAMEX® XT Implant Ø3.5×12 mm SB (Implant incl. Healing Cap)	Length: 12 mm	

RB Ø4.2 mm	Art. No.	Name	Dimension	Material
	XT16508	ZERAMEX® XT Implant Ø4.2×8 mm RB (Implant incl. Healing Cap)	Length: 8 mm	ZrO_2-ATZ-HIP
	XT16510	ZERAMEX® XT Implant Ø4.2×10 mm RB (Implant incl. Healing Cap)	Length: 10 mm	
	XT16512	ZERAMEX® XT Implant Ø4.2×12 mm RB (Implant incl. Healing Cap)	Length: 12 mm	
	XT16514	ZERAMEX® XT Implant Ø4.2×14 mm RB (Implant incl. Healing Cap)	Length: 14 mm	

WB Ø5.5 mm	Art. No.	Name	Dimension	Material
	XT17508	ZERAMEX® XT Implant Ø5.5×8 mm WB (Implant incl. Healing Cap)	Length: 8 mm	ZrO_2-ATZ-HIP
	XT17510	ZERAMEX® XT Implant Ø5.5×10 mm WB (Implant incl. Healing Cap)	Length: 10 mm	
	XT17512	ZERAMEX® XT Implant Ø5.5×12 mm WB (Implant incl. Healing Cap)	Length: 12 mm	

Range

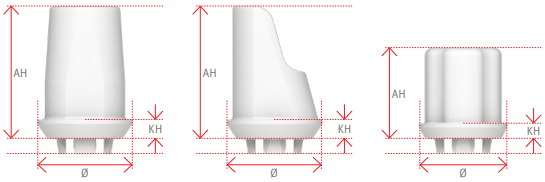
XT

Zeramex XT Abutments

SB Platform	Art. No.	Name	Dimension	Material
	SB15501	ZERAMEX® SB Abutment Straight 1mm (Abutment Straight 1mm, incl. Screw)	AH: 7 mm CH: 1 mm Ø: 4.6 mm	ZrO_2-ATZ-HIP Vicarbo
	SB15502	ZERAMEX® SB Abutment Straight 2mm (Abutment Straight 2mm, incl. Screw)	AH: 8 mm CH: 2 mm Ø: 4.6 mm	
	SB15515	ZERAMEX® SB Abutment Angular 15°, 1 mm (Abutment Angular 15° 1 mm, incl. Screw)	AH: 7 mm CH: 1 mm Ø: 4.6 mm	

SB CADCAM	Art. No.	Name	Dimension	Material
	SB15535	ZERAMEX® SB ZERABASE X (Abutment Base Zerabase X, incl. Screw, for Crown)	AH: 4.8 mm CH: 0.8 mm Ø: 4.6 mm	ZrO_2-ATZ-HIP Vicarbo
	SB15536	ZERAMEX® SB ZERABASE X UNENGAGED (Abutment Base Zerabase X UNENGAGED, incl. Screw, for Bridge)	AH: 4.8 mm CH: 0.8 mm Ø: 4.6 mm	

The complete Zeramex abutment portfolio is integrated into both 3Shape and exocad.



AH: Abutment height
CH: Collar height
Ø: Diameter

SB/RB/WB Vicarbo Screw	Art. No.	Name	Dimension	Material
	RB16550	ZERAMEX® SB / RB / WB VICARBO Screw (Prosthetic Screw)	Length: 7.4 mm	Vicarbo

Range

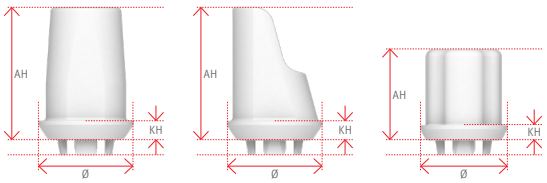
XT

Zeramex XT Abutments

RB Platform	Art. No.	Name	Dimension	Material
	RB16501	ZERAMEX® RB Abutment Straight 1 mm (abutment incl. screw)	AH: 7 mm CH: 1 mm Ø: 5 mm	ZrO_2-ATZ-HIP Vicarbo
	RB16502	ZERAMEX® RB Abutment Straight 2 mm (abutment incl. screw)	AH: 8 mm CH: 2 mm Ø: 5 mm	
	RB16515	ZERAMEX® RB Abutment Angular 15° 1 mm (abutment incl. screw)	AH: 7 mm CH: 1 mm Ø: 5 mm	

RB CADCAM	Art. No.	Name	Dimension	Material
	RB16535	ZERAMEX® RB ZERABASE X (Abutment Base Zerabase X, incl. Screw, for Crown)	AH: 4.8 mm CH: 0.8 mm Ø: 4.6 mm	ZrO_2-ATZ-HIP Vicarbo
	RB16536	ZERAMEX® RB ZERABASE X UNENGAGED (Abutment Base Zerabase X UNENGAGED, incl. Screw, for Bridge)	AH: 4.8 mm CH: 0.8 mm Ø: 4.6 mm	

The complete Zeramex abutment portfolio is integrated into both 3Shape and exocad.



AH: Abutment height
CH: Collar height
Ø: Diameter

SB/RB/WB Vicarbo Screw	Art. No.	Name	Dimension	Material
	RB16550	ZERAMEX® SB / RB / WB VICARBO Screw (Prosthetic Screw)	Length: 7.4 mm	Vicarbo

Range

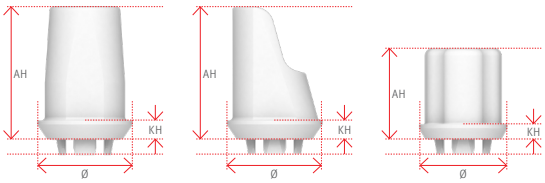
XT

Zeramex XT Abutments

WB Platform	Art. No.	Name	Dimension	Material
	WB17501	ZERAMEX® WB Abutment Straight 1mm (Abutment Straight 1mm, incl. Screw)	AH: 7 mm CH: 1 mm Ø: 6 mm	ZrO_2-ATZ-HIP Vicarbo
	WB17502	ZERAMEX® WB Abutment Straight 2 mm (Abutment Straight 2mm, incl. Screw)	AH: 8 mm CH: 2 mm Ø: 6 mm	
	WB17515	Zeramex XT Abutment WB Angular 15°, 1 mm (Abutment Angular 1mm, incl. Screw)	AH: 7 mm CH: 1 mm Ø: 6 mm	

WB CADCAM	Art. No.	Name	Dimension	Material
	WB17535	ZERAMEX® WB ZERABASE X (Abutment Base Zerabase X, incl. Screw, for Crown)	AH: 4.8 mm CH: 0.8 mm Ø: 5.6 mm	ZrO_2-ATZ-HIP Vicarbo
	WB17536	ZERAMEX® WB ZERABASE X UNENGAGED (Abutment Base Zerabase X UNENGAGED, incl. Screw, for Bridge)	AH: 4.8 mm CH: 0.8 mm Ø: 5.6 mm	

The complete Zeramex abutment portfolio is integrated into both 3Shape and exocad.



AH: Abutment height
CH: Collar height
Ø: Diameter

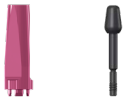
SB/RB/WB Vicarbo Screw	Art. No.	Name	Dimension	Material
	RB16550	ZERAMEX® SB / RB / WB VICARBO Screw (Prosthetic Screw)	Length: 7.4 mm	Vicarbo

Range

XT

Zeramex Prosthetics

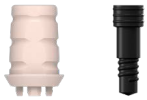
SB soft tissue management	Art. No.	Name	Dimension	Material
	SB35500	ZERAMEX® XT SB Healing Cap	Height: 0.6 mm	PEEK
	SB35503	ZERAMEX® SB Gingivaformer, 3mm	Height: 3 mm Ø: 4 mm	
	SB35504	ZERAMEX® SB Gingivaformer, 4mm	Height: 4 mm Ø: 4 mm	
	SB35530	ZERAMEX® SB Provisional (Provisional Abutment incl. Provisional Screw)	AH: 7 mm CH: 1 mm Ø: 4 mm	PEEK Vicarbo

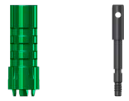
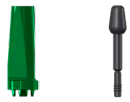
SB Impression Taking	Art. No.	Name	Dimension	Material
	SB35510	ZERAMEX® SB Transfer Open Tray	High sleeve: 11 mm / height incl. screw: 20 mm	Aluminium PEEK-CW30
	SB35512	ZERAMEX® SB Transfer Closed Tray	High sleeve: 7 mm / height incl. screw: 14 mm	
	SB35513	ZERAMEX® SB Transfer Closed Tray, long	High sleeve: 11 mm / height incl. screw: 18 mm	
	SB35514	ZERAMEX® SB Scanbody (Scanbody incl. Provisional Screw)	Height: 11 mm	PEEK Vicarbo
	SB35522	ZERAMEX® SB Digital Implant Replica	Length: 10 mm	Aluminium

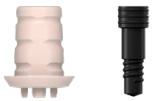
RB soft tissue management	Art. No.	Name	Dimension	Material
	RB36500	ZERAMEX® XT RB Healing Cap	Height: 0.6 mm	PEEK
	RB36503	ZERAMEX® RB Gingivaformer, 3mm	Height: 3 mm Ø: 5 mm	
	RB36504	ZERAMEX® RB Gingivaformer, 4mm	Height: 4 mm Ø: 5 mm	

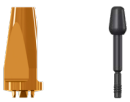
Range

XT

	RB36530	ZERAMEX® RB Provisional (Provisional Abutment incl. Provisional Screw)	AH: 7 mm CH: 1 mm Ø: 5 mm	PEEK Vicarbo

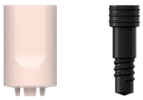
RB Impression Taking	Art. No.	Name	Dimension	Material
	RB36510	ZERAMEX® RB Transfer Open Tray	High sleeve: 11 mm / height incl. screw: 20 mm	Aluminium PEEK-CW30
	RB36512	ZERAMEX® RB Transfer Closed Tray	High sleeve: 7 mm / height incl. screw: 14 mm	
	RB36513	ZERAMEX® RB Transfer Closed Tray, long	High sleeve: 11 mm / height incl. screw: 18 mm	
	RB36514	ZERAMEX® RB Scanbody (Scanbody incl. Provisional Screw)	Height: 8 mm	PEEK Vicarbo
	RB36522	ZERAMEX® RB Digital Implant Replica	Length: 10 mm	Aluminium

WB soft tissue management	Art. No.	Name	Dimension	Material
	WB37500	ZERAMEX® XT WB Healing Cap	Height: 0.6 mm	PEEK
	WB37503	ZERAMEX® WB Gingivaformer, 3mm	Height: 3 mm Ø: 6 mm	
	WB37504	ZERAMEX® WB Gingivaformer, 4mm	Height: 4 mm Ø: 6 mm	
	WB37530	ZERAMEX® WB Provisional (Provisional Abutment incl. Provisional Screw)	AH: 7 mm CH: 1 mm Ø: 6 mm	PEEK Vicarbo

WB Impression Taking	Art. No.	Name	Dimension	Material
	WB37510	ZERAMEX® WB Transfer Open Tray	High sleeve: 11 mm / height incl. screw: 20 mm	Aluminium PEEK-CW30
	WB37512	ZERAMEX® WB Transfer Closed Tray	High sleeve: 7 mm / height incl. screw: 14 mm	
	WB37513	ZERAMEX® WB Transfer Closed Tray, long	High sleeve: 11 mm / height incl. screw: 18 mm	

Range

XT

	WB37514	ZERAMEX® WB Scanbody (Scanbody incl. Provisional Screw)	Height: 10 mm	PEEK PEEK-CW30
	WB37522	ZERAMEX® WB Digital Implant Replica	Length: 10 mm	Aluminium

SB/RB/WB Auxiliary Parts	Art. No.	Name	Dimension	Material
	RB36521	ZERAMEX® RB Digital Implant Replica Placer (Digital Implant Replica Placer for SB / RB / WB)	Length: 14 mm	PEEK-CW30
	RB36550	ZERAMEX® SB / RB / WB Provisional Screw	Length: 8.6 mm	Vicarbo
	RB36554	ZERAMEX® SB/RB/WB Try in Screw	Length: 7.1 mm	PEEK

Zeramex Docklocs®	Art. No.	Name	Material
	SB15542	ZERAMEX® Docklocs Abutment 2 mm (Abutment Docklocs incl. Screw)	ZrO_2-ATZ-HIP Vicarbo
	SB15543	ZERAMEX® Docklocs Abutment 3 mm (Abutment Docklocs incl. Screw)	
	SB15544	ZERAMEX® Docklocs Abutment, 4 mm (Abutment Docklocs incl. Screw)	
	XT38227	Zeramex Docklocs® Insertion Instrument	Stainless steel PEEK
	XT38253	Docklocs® Laboratory Set, up to 40° divergence compensation: 2 pcs zirconia oxide retention housing (Ø5.8 mm, height 2.5 mm) with black processing insert (height 1.9 mm), 2 pcs block-out ring, 2 pcs replacement male, green, 2 pcs replacement male, orange, 2 pcs replacement male, red	Santroprene® TPE Polyamide Housing ZrO_2 HD-PE Purell
	XT38251	Docklocs® Laboratory Set, up to 40° divergence compensation: 2 pcs titanium retention housing (Ø5.5 mm, height 2.5 mm) with black processing insert (height 1.9 mm), 2 pcs block-out ring, 2 pcs replacement male, green, 2 pcs replacement male, orange, 2 pcs replacement male, red	Santroprene® TPE Polyamide Titanium housing HD-PE Purell

Range

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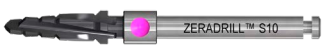
	XT38205	Docklocs® Replacement Male, red Extra-light retention, 10°–20° 8 pcs	Polyamide
	XT38206	Docklocs® Replacement Male, orange Light retention, 10°–20° 8 pcs	
	XT38207	Docklocs® Replacement Male, green Strong retention, 10°–20° 8 pcs	
	XT38209	Docklocs® Block-out Ring 20 pcs	Santroprene® TPE
	XT38230	Zirconia oxide retention housing with processing insert 2 pcs	Housing ZiO_2 HD-PE Purell
	XT38210	Titanium retention housing with processing insert 4 pcs	Titanium housing G5 HD-PE Purell
	XT38214	Docklocs® lab analogue straight (Ø4 mm) 4 pcs	Grade 5 titanium
	XT38215	Docklocs® impression coping with black processing insert 4 pcs	Titanium housing G5 HD-PE Purell

SB/RB/WB Tools	Art. No.	Name	Material
	P35601	ZERAMEX®P6 Rosedrill Ø 2.3mm	Stainless steel
	T35602	ZERADRILL™ Pilot Ø2.3mm	
	XT35630	ZERAMEX® XT Profil Drill SB	Stainless steel with carbon coating
	T35608	ZERADRILL™ S8 (SMALL 8mm)	
	T35610	ZERADRILL™ S10 (SMALL 10mm)	
	T35612	ZERADRILL™ S12 (SMALL 12mm)	

Range

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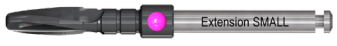
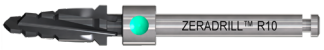
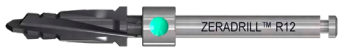
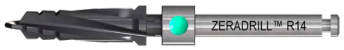
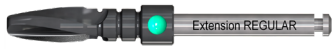
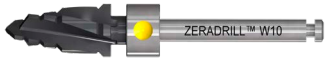
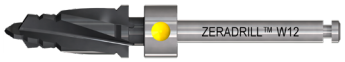
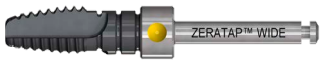
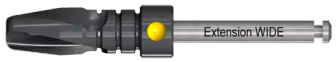
	T35614	ZERADRILL™ S14 (SMALL 14mm)	Stainless steel with carbon coating
	T35620	ZERATAP™ SMALL Ø3.5mm	
	T35622	ZERADRILL™ Extension SMALL	
	T36608	ZERADRILL™ R8 (REGULAR 8mm)	
	T36610	ZERADRILL™ R10 (REGULAR 10mm)	
	T36612	ZERADRILL™ R12 (REGULAR 12mm)	
	T36614	ZERADRILL™ R14 (REGULAR 14mm)	
	T36620	ZERATAP™ REGULAR Ø4.2mm	
	T36622	ZERADRILL™ Extension REGULAR	
	T37608	ZERADRILL™ W8 (WIDE 8mm)	
	T37610	ZERADRILL™ W10 (WIDE 10mm)	
	T37612	ZERADRILL™ W12 (WIDE 12mm)	
	T37620	ZERATAP™ WIDE Ø5.5mm	
	T37622	ZERADRILL™ Extension WIDE	
	KI589B	Elos Drill Extender	Stainless steel

Range

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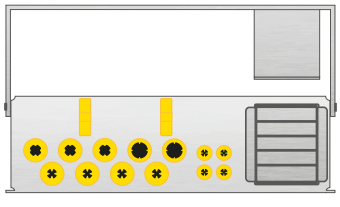
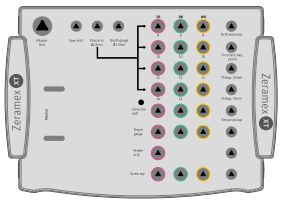
	T38650	Zeramex T depth gauge, 4 pcs	Stainless steel
	XT38619	ZERAMEX® Prosthetic Key, 19mm	
	XT38623	ZERAMEX® Prosthetic Key, 23 mm	
	XT38628	ZERAMEX® Prosthetic Key, 28 mm	
	XT36620	ZERAMEX® Pickup,20 mm	
	XT36625	ZERAMEX® Pickup, 25m	
	XT36622	ZERAMEX® Rescue Pickup	
	P48932	ZERAMEX® Ratchet Adapter Unit Short	
	P48935	ZERAMEX® Surgical Ratchet (without adapter)	
	XT35651	ZERAMEX® XT Drill Stop, for SMALL Drill	PEEK
	XT36651	ZERAMEX® XT Drill Stop, for REGULAR Drill	
	XT37651	ZERAMEX® XT Drill Stop, for WIDE Drill	
	XT48860	ZERAMEX®XT Prosthetic Tray	–
	XT48865	ZERAMEX® XT Prosthetic Tray, incl. Ratchet	

Range

XT

	XT48850	ZERAMEX®XT Surgery Tray	–
	XT48854	ZERAMEX® XT Surgery Tray, fully equipped	

General Information

XT

Guarantee

CeramTec Switzerland offers a lifelong guarantee for implants, and a 10-year guarantee for abutments and Vicarbo screws. Details of the guarantee can be found in the document “Zeramex Guarantee”.

Delivery and packaging

Delivery is in accordance with the general terms and conditions (T&Cs) of CeramTec Switzerland. Intact sterile packaging protects the implant from external influences and ensures sterile storage up to the printed expiration date. Zeramex XT implants and components must be stored dry in their original packaging at room temperature and protected from sunlight. Only open the packaging shortly before surgery We recommend comprehensive clinical, radiological and statistical documentation. The inside labels (patient label) must allow traceability of the implants

Exclusion of liability

Zeramex XT implants are part of an overall system and may be used only with the components designed for this system. CeramTec Switzerland will not be held liable for any damage arising from improper use, or from using non-original components. The general terms and conditions of CeramTec Switzerland also apply.

Training

For information on courses and further education for the Zeramex XT System, please contact us at www.zeramex.com.

Material properties

All implants and abutments are made from hot-densified zirconia oxide ATZ-HIP® (HIP = Hot Isostatic Postcompaction) For reasons of quality and strength, the implants and abutments are strictly machined into their final shape from solid, hard blanks using diamond-coated tools. The workpiece does not need finishing. This allows for highly precise and reproducible production of implants and abutments with the necessary precise ft.

Zerafil implant surface

- Microstructured
- Blasted and etched
- Hydrophilic

ZrO_2 ATZ-HIP

Zirconium dioxide, ATZ (alumina-toughened zirconia) (radiopaque)

Composition:

ZrO_2 76%, Al_2O_3 20%, Y_2O_3 4%
Flexural strength: >1’700 MPa (on average 2’000 MPa)
CTE: 9x10-6/K

ZrO_2 TZP-A

Zirconia dioxide, TZP (tetragonal zirconia polycrystal) (radiopaque)

Composition:

ZrO_2 95%, Al_2O_3 5%, Y_2O_3 0.25%
Flexural strength: 1,200 MPa.
CTE: 10,5

PEEK CLASSIX

Polyether ether ketone USP Class VI (not radiopaque)

Aluminium

Aluminium (not radiopaque)

PEEK CLASSIX CW30 LSG

Short carbon fibres (CF) in a PEEK CLASSIX LSG matrix (not radiopaque)

Composition:

CF 30%, PEEK Classix LSG 70%
Flexural strength: >130 MPa

Vicarbo

Unidirectional carbon fibres (CF) in a PEEK matrix (not radiopaque)

Composition:

CF 60%, PEEK 40%
Flexural strength: >900 MPa.

Contact

XT

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Global

You can find the contact details of all sales partners on **www.zeramex.com**

Zeramex XT

In clinical use since 2017

www.zeramex.com

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