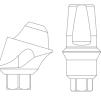


# Reasons you need Ritter Implants









## Welcome to Ritter Implants





The name Ritter has been a household name in the dental world for over for more than 135 years. Frank Ritter invented the first dental treatment unit in 1887.

Ritter Implant Production is located near Tuttlingen in southern Germany, on the edge of the Black Forest.

The Ritter brand stands for highest quality, state of the art technologies and innovative products – Made in Germany.

Ritter Implants was founded in 2010. Due to the worldwide success of the German implant system, especially in the North American market, Ritter Implants is now expanding in Germany and Europe.

The Ritter Implants team, consisting of production, development and marketing specialists, is based in Biberach/Baden-Wuerttemberg.

Our goal is to make implants and implantology accessible to as many people as possible, whereby the well-being of the patient will always be in the foreground for Ritter Implants.



Ritter Academy offers a comprehensive training and course program, as well as exciting events in the dental industry. Get in touch with our implant system.



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## The Reasons part 1

PAGE 8



#### Reason #1

Ritter Implants are made of the strongest "Grade 5" Titanium alloy which goes through a special sandblasting and etching process.



PAGE 10



#### Reason #2

**All Ritter Implants include** a Cover Screw.



PAGE 10



#### Reason #3

All Ritter Abutments are packaged including an Abutment Fixation Screw made of Titanium Grade 5.



**PAGE 12** 



#### Reason #4

The overall **superior Implant design** attributes to the Ritter Implants Increased primary stability and High Insertion torque values.



PAGE 13



#### Reason #5

The internal **Hex Connection** (Platform) is the most widely used connection in the industry.



**PAGE 15** 



#### Reason #6

Ritter Implants has **two platforms** and a wide range of **Platform Shifting/Switching.** 



PAGE 15



#### Reason #7

6 mm **short Implants** in the 5 and 6 mm Diameters.



**PAGE 15** 



#### Reason #8

Ritter Implants provides a **Narrow Line** with diameters of 3.0/3.3 mm.



Ø 3.3 mm





#### Reason #9

Ritter Implants Abutments provide an **Emergence Profile** for perfect soft tissue management.



PAGE 22



#### Reason #10

Ritter Implants is the only company who provides an **Angled Closed Tray Impression Coping**, 15°/25°.



PAGE 23



#### Reason #11

Ritter Implants Scan Body/Abutment is a dual purpose scan body and temporary/provisional abutment.









PAGE 24



#### Reason #12

Ritter Implants Pick Up transfer abutments "PUT" can not only be used for taking an impression but also for the final prosthesis made from Titanium Grade 5. Our "PUT" also come in Angled 15°/25°, exclusively by Ritter Implants.



**PAGE 28** 



#### Reason #13

All Ritter abutment screws are customized to accept the same screw driver - no matter what platform or type of abutment.



PAGE 30



#### Reason #14

Ritter's AZA line are made in both Chromium Cobalt and Titanium and are dual purpose as they can be used as Castable with Chromium Cobalt or a Tibase made from Titanium.









#### Reason #15

**Clicg™ Overdeture** is known around the world as an "Equator," offering a narrower profile than tradtional overdenture abutments.\*\*\*



PAGE 40



#### Reason #16

Clicq™ Overdenture is manufactured in angled versions encompassing 18° and 30°. \*\*\*



**PAGE 40** 



#### Reason #17

Clicg™ Overdenture PLUS offers a more traditional wide profile \*\*\*





**PAGE 42** 



#### Reason #18

The Clicq™ overdenture Plus is manufactured in angled versions encompassing 18° and 30°. \*\*\*



**SUPER** 

**PAGE 46** 



#### Reason #19

Ritter Multi Abutments have been manufactured with a wider stronger M1.6 screw instead of a M1.4 screw that most companies use on Multi unit restorations. Ritter offers this packaged with very commonly used accessories.



**PAGE 46** 



#### Reason #20

Ritter Multi Abutments are also made for its 3.0 and 3.3 Narrow line platform.



\*\*\* All Clica™ products include all the traditional processing parts.



## The Reasons part 2

**PAGE 49** 



#### Reason #21

Multi Unit Kits\*: Special Kit Comes with 36 Abutments making a complicated procedure much easier!



**PAGE 44** 



#### Reason #22

Ritter Implants were the first to transition a patient from a removable Denture to an "all on X" as a removable case can be planned with the "Angled Clicq™" abutments.



**PAGE 63** 



#### Reason #23

All Surgical Kits contain all basic tools to place all Ritter Platforms.

**PAGE 63** 



#### Reason #24

The Compact Surgical Kit contain all basic tools and drill stop function provided by drill **stopper** sleeves with the tools to place all Ritter Platforms.



Compact Kit



#### **PAGE 63**



#### Reason #25

All Ritter Implants Surgical Kits are equipped with a complete prosthetic selection of the Ratchet, Handpiece, Hand Torque Drivers - purchase of a separate Prosthetics Kit is unnecessary with Ritter Implants.









#### PAGE 65



#### Reason #26

Our Complete Surgical Kit is the easiest and safest Surgical Kit – containing all the items of the Compact kit- except the **Stoppers are built into each drill** – there is a drill for every Implant we produce and more!

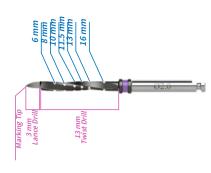


#### PAGE 65



#### Reason #27

Our Complete Surgical Kit is equipped with our exclusive 3 in 1 Starter/Marking/Lance Drill.



#### **PAGE 65**



#### Reason #28

Our Complete Surgical Kit provides implant placing drivers with special measuring and registration markings on all tools.



#### PAGE 65



#### Reason #29

All Implant Drivers are spring loaded – making it Impossible for an Implant to be dislodged.



#### PAGE 67



#### Reason#30

The **Guided Kit** is one of the Best and Easiest on the Market containing a drill for every length and diameter.



#### **PAGE 67**



#### Reason #31

Most guided kits need to use spoons to change drill diameter – **Ritter is spoonless!** 



#### **PAGE 67**



#### Reason #32

Most guided kits need metal sleeves in the guide because they guide the cutting portion of the drill – Ritter guides the barrel of the drill – and is sleeveless!



#### PAGE 67



#### Reason #33

The **Torque Ratchet** has a simple Screw to **reverse the direction of turning.** 



## Ritter SB/LA method

The Implant surface - Sand blasted with Large Grit, Acid Etched



#### Reason #1

- There are only two companies who use a certified SB/LA surface treatment. Ritter is one of them.
- Ritter Implants was the first to develop the SB/LA surface on Grade 5 with KKS in Switzerland and it was proven successful.
- 3) Titanium Grade 5 with SLA is still the very best surface treatment in the world.

Ritter Implants are made of a "Grade 5" Titanium alloy (Ti6AL4VELI: 90 % Titanium, 6 % Aluminum, 4 % Vanadium), which goes through a special sandblasting and etching process.

Our method creates large surface differences that allow **strong adsorption of plasma proteins and blood** into the micropores of the implant immediately after insertion.

#### **Benefits**

- Bone strengthening due to early Implant contact
- Increased stability
- Shortened healing phase
- Higher predictability of the healing process

### Corundum sandblasting and acid etching of the implant surface

- Sandblasting creates a macro surface of 20–40 Mm (microns)
- Double thermal acid etching process creates structures between 1–5 Mm
- Material forms a hydrophilic titanium oxide layer

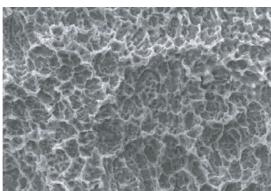


Scan me and watch video about Ritter Implants surface treatment

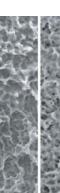


### **Titanium Grade 5 ELI**

Better physical properties & biocompatibility





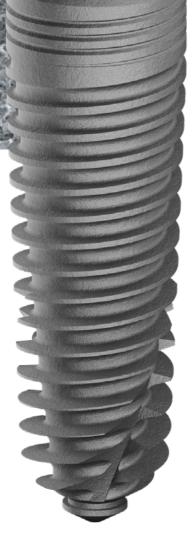


Ritter Implants SB/LA SEM Image, Titanium Grade 5



With the secondary electron mode of Ritter Implants Image the topography is more pronounced while the backscattering mode reflects better the material contrast.

**Conclusion:** Ritter Implants SB/LA reaches the results even better with alloy Titanium Grade 5, (Ti6AL4VE-LI: 90 % Titanium, 6 % Aluminum, 4 % Vanadium)







"The excellent biocompatibility and physicochemical properties of Ti dental implants position Ti as the gold standard in implant dentistry. While the safety and success of Grade 4 Ti is well documented, Grade 5 offers better physical properties and similarly outstanding biocompatibility and survival. As for the various surface modifications, SLA appears to combine the advantages of the physical and chemical methods successfully, making it a favorable alternative. High levels of osseointegration and favourable long-term survival of SLA dental implants were confirmed by several in vitro and clinical studies." Based on the current literature, we can conclude that Grade 5 Ti with SLA-modified surfaces



Sandblasted, large grit, acid-etched implant surface, (SLA) is a type of surface treatment that creates surface roughness with the goal of enhancing osseointegration through greater bone-to-implant contact (BIC). The SLA process increases the rate at which osseointegration occurs by using a combination of grit and acid etching to give the surface increased roughness on multiple levels. This allows osteoblasts to proliferate and adhere to the implant surface. Through osseointegration, SLA can help provide increased stability of the implant which will ultimately lengthen its longevity. The use of specialized implants by Straumann SLA implants, such as the SLActive implant and the Roxolid SLA implant, reduces the amount of treatment time required while also increasing the treatment predictability. The Roxolid SLA implant can also reduce the need for bone augmentation to assist those patients who have insufficient bone. The SLA process offers a variety of benefits to patients requiring increased ossification prior to an implant.

### **Cover and Fixation Screw**

All Implants & Abutments include screws



Reason #2

includes a
Cover Screw







Reason #3

**Every Ritter Abutment** 

**Includes an Abutment Fixation Screw** 



Most Ritter Implants Screws are made of Grade 5 Titanium and are not comparable to any other screws!

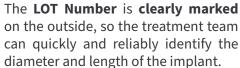


## Implant packaging design

Clean & safe packed







All implants are supplied in single or 10-packs; while prosthetic components are packed in single 20-packs. (some inventory may still be packed in 6 or 10 packs).

The Ritter Spiral Implant SB/LA is protected by a sealed package with a sterile barrier. The implant is supplied including the Cover Screw, which is located in the bottom lid of the inner tube. (previous packaging)



- Clean & safe packed
- Sophisticated design
- Easy handling



Ritter Implants single package top and side view. The different diameters are color coded and help with easy handling.



previous packaging



updated packaging



Dental Implant

**BBBB** 

SB/LA

Scan me and watch a video about the packaging usage and handling.



## The key features

Ritter Implant Internal HEX construction



#### Reason #4

The internal hex connection (Platform) is the most widely used connection in the industry – the benefits are that compatible parts exist in every part of the world. Over 50 % of all Implant production are made with Internal Hex. This connection (or "platform connection") is used by Zimmer®, Bio Horizons®, MIS®, Implant Direct Legacy® and many more. The Internal Hex is also the easiest connection to restore against the 2nd most popular connection the tapered Internal Hex. Often called a morse taper or conical connection (see next page).

The overall superior Implant design attributes to the Ritter Implants increased primary stability and high insertion torque values.

#### Connection

Internal Bevel-Hex connection, without micro gaps

#### **Unique Thread**

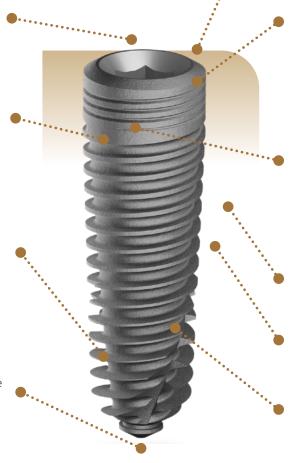
Wider threads in the upper body that increase surface area and reduce bone stress, then transition to sharper threads for self-tapping function

#### **Apical blades**

Allow angular adjustment for parallelism during the insertion process

#### Rounded Apex

The rounded apex minimizes the risk of rupture of the membrane during sinus lift procedures



#### Platform switching

Standard abutments fit all regular diameters 3.75 mm, 4.2 mm, 5 mm & 6 mm

Narrow Line Abutments fit all narrow diameters 3.0 mm & 3.3 mm

#### **Micro Grooves**

Add greater surface area and reduce stress on crestal bone, prevent loss of marginal bone and increase "bone-to-implant" contact.

#### SB/LA

Sandblasted with large particles, acid etched macro surface of 20-40 Mm to a micro surface of about 2 Micrometer, (also called micron, metric unit of measure for length equal to 0.001 mm, or about 0.000039 inch.)

#### **Tapered Body**

Increases initial stability while protecting adjacent roots

#### **Dual Cutting Edge**

Enhances self-tapping and increases ease of insertion

#### **Progressive Threads**

Relaxes stress points in bone, creates better hold in soft bone, suitable for all bone densities



<sup>\*</sup>The brand names® mentioned are protected and the property of their respective brand owners.

### **Internal HEX-Connection**

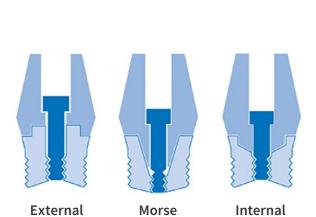
**Plattform Switch** 

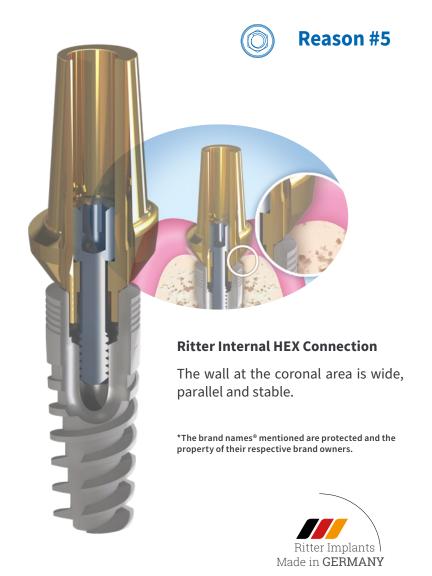


Tapered Hex, Morse Taper and Conical Connection are the 2nd most common connection and are used in popular manufacturers such as Nobel®, Hiossen®/Ostem®, Neodent® and Megagen®.

As you can see in the illustration that the body of the abutment engages into the body of the implant. The manufacturers of these products claim that this creates a better seal between the abutment and the Implant than an internal hex. There exist no scientific proof of such myth. **Contrarily the abutment weakens the coronal portion** of the Implant and coronal breakage is very common in these implants. In addition, the tapered shape of the connection creates a cold welding of the abutment into the implant, making nearly impossible to remove or replace an abutment without removing an Implant.







## Ritter Implant sizes and diameters SNAP SB/LA Implants – all surfaces sand blasted and acid etched

#### **Narrow Line**

The different diameters are color coded and help with easy handling.



The different diameters are color coded and help with easy handling.











Ø Diameter	Ø Platform	Hex-Size	Connection	Length mm	ArtNo.
3.0 mm	2.9 mm	2.0 mm	Internal-Hex 2.9 mm	10	NL-SNAP-3-10
				11.5	NL-SNAP-3-11.5
				13	NL-SNAP-3-13
				16	NL-SNAP-3-16
		2.0 mm	Internal-Hex 2.9 mm	10	NL-SNAP-3.3-10
3.3 mm	2.9 mm			11.5	NL-SNAP-3.3-11.5
3.3 11111	2.3 111111			13	NL-SNAP-3.3-13
				16	NL-SNAP-3.3-16
				8	SNAP-3.75-8
				10	SNAP-3.75-10
3.75 mm	3.75 mm	2.43 mm	Internal-Hex 3.75 mm	11.5	SNAP-3.75-11.5
				13	SNAP-3.75-13
				16	SNAP-3.75-16
		2.43 mm	Internal-Hex 3.75 mm	8	SNAP-4.2-8
	3.75 mm			10	SNAP-4.2-10
4.2 mm				11.5	SNAP-4.2-11.5
				13	SNAP-4.2-13
				16	SNAP-4.2-16
	3.75 mm	2.43 mm	Internal-Hex 3.75 mm	6	SNAP-5-6
				8	SNAP-5-8
5.0 mm				10	SNAP-5-10
3.0 111111				11.5	SNAP-5-11.5
				13	SNAP-5-13
				16	SNAP-5-16
				6	SNAP-6-6
			Internal-Hex 3.75 mm	8	SNAP-6-8
6.0 mm	3.75 mm	2.43 mm		10	SNAP-6-10
				11.5	SNAP-6-11.5
				13	SNAP-6-13





#### Reason #6

#### This wide range of Platform Shifting/Switching.

Ritter Implants has **two Platforms.** Our Standard Platform encompasses the most popular Diameters of Implants and thus Ritter has the capability of Platform Shifting from 3.75 mm all the way to 6 mm in diameter, in total a complete line with **21 different sizes using the same Platform Diameter/Platform Connection/Abutments/Healing Caps – over 1000 different prosthetics fit into this group of Implants.** 



#### Reason #7

The Standard Platform is also known as the Standard Line features with 6 mm short Implants in the 5 mm and 6 mm Diameters.



#### Reason #8

The Narrow Platform 2.9 mm encompassing 8 additional Implants in 3.0 mm and 3.3 mm Implants – for obvious reasons they cannot be on the same diameter platform as the Standard Line. Our Platform have a full line of Multi Unit and Overdenture Abutments – rendering the need for ONE PIECE or MINI Implants to be obsolete because you can restore all options with this Narrow Implant and are not tied to cement or permanently fused abutments. The parts for this platform are always depicted in purple fonts and colors.

ONE PIECE or commonly called Mini Implants tie the patient to the same type of prosthesis, he/she must have the old Implants removed in order to upgrade their prosthesis.

## Platform Shift/Platform Switch

SNAP SB/LA Implants – each size Standard Platform

Important information here about the sizes of the Implants. In addition to different types of Platform Connections **most companies have several platform diameters.** Ritter has only two! The "platform (diameter)" is described as the diameter of the point where the abutment seals to the implant. The **platform** is represented by the platform size. In the past Implant companies

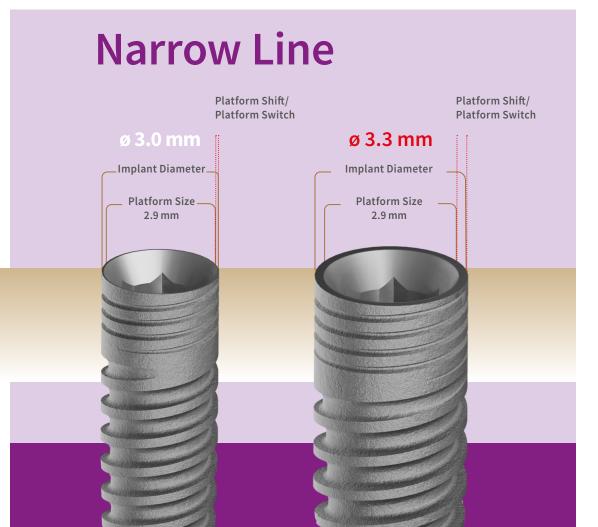
made a platform for each Diameter Implant or paired most similar two diameter Implants into one platform diameter. This is known as **Platform Matching.** 

## **Standard Platform**





Data later showed that if the abutment connection diameter (platform) was less wide than the Implants actual Diameter – then more bone would grow over the neck of the implant. This phenomenon became know as **Platform shifting** or **Platform Switching.** 



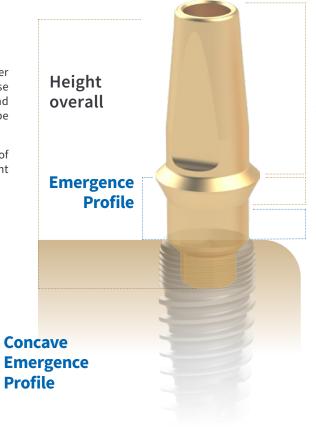
## Emergence Profile Ritter Vertical Platform Shift



#### Reason #9

Vertical Platform Switch Profile - Ritter was the first to produce a full line of these products to promote soft tissue healing and growth but also so that an Implant may be placed sub-crestal (below the bone).

The shape of the shoulder or the flare out of the abutment as it comes out of the implant is called the **Emergence Profile.** 



H=Shoulder height

Implant /Bone level line

Height **Abutment-Body Cone Height** 

Shoulder

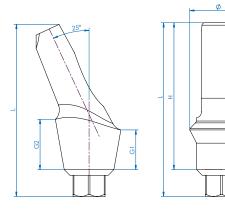
**Vertical Platform** switch\*



Ritter Vertical Emergence Profile



Traditional Emergence Profile



Symbol Meaning

Total length

Length from platform to top edge

Gingival height

Gingival height on short side G1 Gingival height on long side Diameter at widest point

Collar height of platform switch

Narrow Line for 3.0 & 3.3 mm ø Implants

Shoulder, Collar, Gingival Margin, Gingival height - all mean the same thing - as the abutment emerges off the platform of the Implant to shape the soft tissue (gums/ gingiva/sulcus) and rises to a certain height which matches the height distance of a persons bone level to the depth of the tissue.



\* All Platform switching products are equipped with a 1.5 mm vertical platform switching unless otherwise specified. Soft tissue management support in preparation for vertical platform switching.

## **Torque values**

#### Torque values recommended by Ritter for Implants and Abutments



Implant Insertion Torque: Its Role in Achieving Primary Stability of Restorable Dental Implants.

Gary Greenstein, John Cavallaro

A literature review was conducted to determine the role of insertion torque in attaining primary stability of dental implants. The review is comprised of articles that discussed the amount of torque needed to achieve primary implant stability in healed ridges and fresh extraction sockets prior to immediate implant loading. Studies were appraised that addressed the effects of minimum and maximum forces that can be used to successfully place implants. The minimum torque that can be employed to attain primary stability is undefined. Forces ≥30 Ncm are routinely used to place implants into healed ridges and fresh extraction sockets prior to immediate loading of implants. Increased insertion torque (≥50 Ncm) reduces micromotion and does not appear to damage bone. In general, the healing process after implant insertion provides a degree of biologic stability that is similar whether implants are placed with high or low initial insertion torque. Primary stability is desirable when placing implants, but the absence of micromotion is what facilitates predictable implant osseointegration. Increased insertion torque helps achieve primary stability by reducing implant micromotion.

Furthermore, tactile information provided by the first surgical twist drill can aid in selecting the initial insertion torque to achieve predictable stability of inserted dental implants.

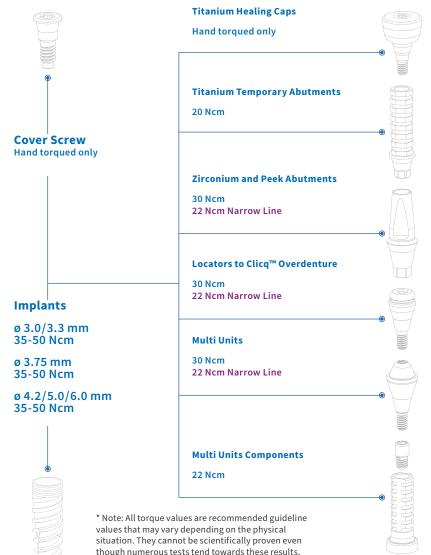


Please scan for review

Implant Insertion Torque: Its Role in Achieving Primary Stability of Restorable Dental Implants

Gary Greenstein, John Cavallaro





## Healing Caps/Gingiva Formers Preparing the soft tissue for the final Prosthesis

#### **Standard Platform**



HC-3

HC-3C

Standard Line H 3 mm | Ø 4.5 mm



HC-5

Standard Line H 5 mm | Ø 4.5 mm



HC-5C

Standard Line H 5 mm | Ø 4.5 mm C= 1.5 mm Collar

HC-3N

Standard Line slim H 3 mm | Ø 3.8 mm

HC-5N

Vertical Platform switching



Standard Line wide

HC-5W

Standard Line slim H 5 mm | Ø 3.8 mm Standard Line wide



HC-3WC

HC-3EW

H 3 mm | Ø 5.5 mm

HC-5WC

H 5 mm | Ø 5.5 mm Standard Line wide H 5 mm | Ø 5.5 mm



H 3 mm | Ø 5.5 mm C= 1.5 mm Collar Vertical Platform switching

C= 1.5 mm Collar Vertical Platform switching



Standard Line extra wide H 3 mm | Ø 6.3 mm

HC-5EW

Standard Line extra wide H 5 mm | Ø 6.3 mm

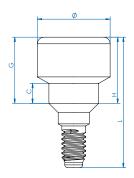


Standard Line extra wide H 3 mm | Ø 6.3 mm C= 1.5 mm Collar Vertical Platform switching HC-5EWC

HC-7

Standard Line extra wide H 5 mm | Ø 6.3 mm C= 1.5 mm Collar Vertical Platform switching





Healing Caps/Healing Abutments/Gingiva Formers/ Sulcus Formers – this item is used to shape the gums after the implants has been placed and healed. The

diameters, heights and shapes are to be decided by the dentist as to prepare and shape the gums for the

final Crown/Prosthesis.

Symbol Meaning

Length from platform to top edge

Gingival height

Diameter at widest point Collar height of platform switch

Narrow Line for 3.0 & 3.3 mm ø Implants

## **Healing Caps – Narrow Line**



#### The narrow diameters/Narrow Line ø 3.0 and ø 3.3 mm

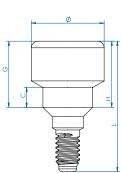


NL-HC-3



Narrow Line





0 0	<u> </u>

Symbol	Meaning
	Takallanak

- Total length
- Length from platform to top edge
- Gingival height
- Diameter at widest point
- Collar height of platform switch
- Narrow Line for 3.0 & 3.3 mm ø Implants

## **Impression Copings**

Open and Closed Tray procedure

#### **Closed Tray transfer**

ACT-25



ACT-15 Standard Line - 15° angled Closed Tray Transfer H 11 mm | Ø 4.4 mm,

Incl. TSA-8.3 screw

Standard Line - 25° angled Closed Tray Transfer H 10.9 mm | Ø 4.4 mm Incl. TSA-8.3 screw



#### Reason #10

Angled Closed Tray – This allows a doctor to take an Impression of two angled implants at the same time that would otherwise not be possible and require two Impressions to be taken – this makes Ritter unique!



NL-ACT-15	Narrow Line - 15° angled Closed Tray Transfer H 11 mm   Ø 4.8 mm Incl. NL-TSA-8.3 screw
NL-ACT-25	Narrow Line - 25° angled Closed Tray Transfer H 11 mm   Ø 4.8 mm Incl. NL-TSA-8.3 screw

NL = Narrow Line for 3.0 & 3.3 mm ø Implants



Impression Copings, Impression Pins, Impression Abutments or Impression Posts – they all mean the same.

These are used to register the depth and orientation of the Implant inside the bone as it relates to the surrounding teeth so that the laboratory can fabricate the crown/ Final Prosthesis.

Closed Tray - this part is screwed into the implant and a traditional Impression is taken over this part. When the material is dried in the mouth – the impression tray is removed. An impression of the part is left inside the material. The tray is sent to the laboratory who in turn reverse pours a model into a replica of the teeth and now can build the final prosthesis to screw into the implant. The closed tray Impression coping is then unscrewed and kept by the doctor for possible future use after sterilization.

Open Tray – same process except that the coping tray stays inside the tray and goes to the lab - this make the labs job easier and is more accurate – because the lab can attach the analog to the open tray providing the exact position and creating the mouth replica at the same time/step.

## Impression Copings Open and Closed Tray procedure/Scan Body/Scan Abutment

#### **Closed Tray transfer**



Standard Line slim CTT-10.8N **Closed Tray Transfer** H 10.9 mm | Ø 3.8 mm Incl. TSCT-14 screw

	Incl. NL-TSCT-14 screw
	H 10.9 mm   Ø 3.8 mm
NL-CTT-10.8N	Closed Tray Transfer
	Narrow Line slim



Standard Line slim CTT-13.8N **Closed Tray Transfer** H 13.9 mm | Ø 3.8 mm Incl. TSCT-17 screw

	Incl. NL-TSCT-17 screw
NL-CTT-13.8N	H 13.9 mm   Ø 3.8 mm
	Closed Tray Transfer
	Narrow Line slim



Top view

#### **Open Tray transfer**



Standard Line slim OTT-10.8N Open Tray Transfer H 10.8 mm | Ø 4 mm Incl. TSOT-24 screw

	Narrow Line slim
NL-OTT-10.8N	Open Tray Transfer
	H 10.8 mm   Ø 3.8 mm
	Incl. NL-TSOT-24 screw

	Incl. TSOT-24 screw
	H 13.9 mm   Ø 4 mm
OTT-13.8N	Open Tray Transfer
	Standard Line slim



OTT-13.8W

Narrow Line slim NL-OTT-13.8N Open Tray Transfer H 13.9 mm | Ø 3.8 mm Incl. NL-TSOT-24 screw

> Standard Line wide Open Tray Transfer H 13.9 mm | Ø 5.5 mm Platform switching Incl. TSOT-24 screw



Scan Body/Abutment - these are used to avoid Open and Closed Tray traditional ANALOG impressions. They register a digital Impression of the location of the Implant. This product is preformed and made from Peek. Peek is the most common plastic material to make temporary crowns; therefore this a dual purpose scan body and temporary/provisional abutment.

Temporary Abutments are commonly made after the Impression is made. An impression is taken to make a final crown/prosthesis which can take a few weeks and that is why a Temporary or also know as provisional is needed.



#### Reason #11





3DSPA-8C

Scan Abutment Standard Line Plastic Abutment for 3D Scanner 5 mm Abutment-body, 1.6 mm Shoulder C= 1.5 mm Vertical Platform switching

Incl. TSA-8.3 screw

Narrow Line NL-3DSPA-8C

Plastic Abutment for 3D Scanner

Scan Abutment

5 mm Abutment-body, 1.6 mm Shoulder

C= 1.5 mm Vertical Platform switching

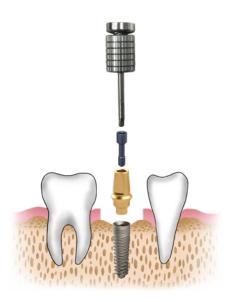
Incl. NL-TSA-8.3 Screw

## **Pop Up Impression with PUT**

All in one Pop Impression Transfer Abutment

The following pick transfer abutments are another way to take an Impression with Ritter. Our abutments are made with Grade 5 titanium and can not only be used for taking an impression but also for the final prosthesis. Our Pick up Transfer abutments also come in Angled (no one else has this). This is the ability to use for a final/angled and Vertical shift pick transfer abutments from Ritter.

Place PUT Abutment with flat side facing the buccal side and hand tighten with HHDA 1.25 hex tool.



Reason #12

Torque to 30 Ncm.

One week

Place PUP-CA Impression Cap on PUT Abutment, aligning flat interior of PUP-CA with the flat of the PUT Abutment (which should be facing the buccal). Press downward until you feel the parts snap into place.



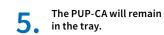
Place impression tray over components until hardened and remove tray.

\*\*\*MULTI PURPOSE\*\*\*

All PUT-XX can be used as

Impression, Healing, Temporary

and Final Abutment!











Send tray along with the appropriate IA-PUT (S, M, L) to lab for your final crown.



Place the TC-PUT on **PUT Abutment until** final restoration is delivered. (Alternatively, a temporary crown may be placed directly on the **PUT Abutment.**)



Original PUT Abutment is ready for final restoration.



PUT accessories: PUP CA: closed tray Impression included with PUT abutment WS: Waxing Sleeves are used by the laboratory to clone the shape of the abutment inside the crown.

TC: The dentist may leave the PUT abutment in the mouth and use the TC as a healing cap or temporary crown.



PUP-CA Plastic cap for PUT-S, M & L



Wax Sleeve for all WS-PUT PUT Abutments (red) not rotational



WS-PUT-R Wax Sleeve for all **PUT Abutments (white)** rotational



Temporary Cap (4 mm) for PUT-S



TC-PUT-M Temporary Cap (6 mm)

for PUT-M

TC-PUT-L

Temporary Cap (8 mm)

for PUT-L

IA: is the Analog which replicates the abutment THEREFORE IT IS AN ABUTMENT LEVEL ANALOG PARTICULARLY FOR THE PUT LINE ONLY - this is only used if the dentist places the PUT abutment in the mouth and leaves it in until the crown returns - in this case he inserts the abutment analog into the pup ca after the impression is hardened - then ships to the laboratory.



IA-PUT-S	Analog for PUT-S (4 mm) Abutment
IA-PUT-M	Analog for PUT-M (6 mm) Abutment
IA-PUT-L	Analog for PUT-L (8 mm) Abutment



## **PUT System**

The diameters, heights and shapes are to be decided by the dentist as to prepare and shape the gums for the final crown/prosthesis.



## Platform switching PUT System



PUT-1S	4 mm Abutment-Body, 1.1 mm Shoulder	
PUT-1SC	4 mm Abutment-Body, 0.6 mm Shoulder C= 0,5 mm Vertical Platform switching	
PUT-1M	6 mm Abutment-Body, 1.1 mm Shoulder	
PUT-1MC	6 mm Abutment-Body, 0.6 mm Shoulder C= 0.5 mm Vertical Platform switching	
PUT-1L	8 mm Abutment-Body, 1.1 mm Shoulder	
PUT-1LC	8 mm Abutment-Body, 0.6 mm Shoulder C= 0.5 mm Vertical Platform switching	
PUT-2S	4 mm Abutment-Body, 2.1 mm Shoulder	
PUT-2SC	4 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching	
PUT-2M	6 mm Abutment-Body, 2.1 mm Shoulder	
PUT-2MC	6 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching	
PUT-2L	8 mm Abutment-Body, 2.1 mm Shoulder	
PUT-2LC	8 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching	
PUT-3S	4 mm Abutment-Body, 3.1 mm Shoulder	
PUT-3SC	4 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching	



PUT-3MC	6 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching
PUT-3L	8 mm Abutment-Body, 3.1 mm Shoulder
PUT-3LC	8 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching
PUT-4L	8 mm Abutment-Body, 4.1 mm Shoulder





PUT-15-1M	15° angles 6 mm Abutment-Body, 1 mm Shoulder
PUT-15-2M	15° angles 6 mm Abutment-Body, 2 mm Shoulder
PUT-15-3M	15° angles 6 mm Abutment-Body, 3 mm Shoulder
PUT-25-1M	25° angles 6 mm Abutment-Body, 1 mm Shoulder
PUT-25-2M	25° angles 6 mm Abutment-Body, 2 mm Shoulder
PUT-25-3M	25° angles 6 mm Abutment-Body, 3 mm Shoulder

#### Narrow platform

NL-PUT-1S	4 mm Abutment-Body, 1.1 mm Shoulder
NL-PUT-1M	6 mm Abutment-Body, 1.1 mm Shoulder
NL-PUT-1MC	6 mm Abutment-Body, 0.6 mm Shoulder C= 0.5 mm Vertical Platform switching
NL-PUT-1L	8 mm Abutment-Body, 1.1 mm Shoulder
NL-PUT-1LC	8 mm Abutment-Body, 0.6 mm Shoulder C= 0.5 mm Vertical Platform switching
NL-PUT-2S	4 mm Abutment-Body, 2.1 mm Shoulder
NL-PUT-2SC	4 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
NL-PUT-2M	6 mm Abutment-Body, 2.1 mm Shoulder
NL-PUT-2MC	6 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
NL-PUT-2L	8 mm Abutment-Body, 2.1 mm Shoulder
NL-PUT-2LC	8 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
NL-PUT-3SC	4 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching

All PUT abutments including plastic Cap PUP-CA and TSA-8.3/NL-TSA-8.3 Titan screw





## Impression Analogs Open and Closed Tray procedure



### Implant place holder LAB models

#### Narrow platform

NL-PUT-3MC 6 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching NL-PUT-3L 8 mm Abutment-Body, 3.1 mm Shoulder NL-PUT-3LC 8 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching

8 mm Abutment-Body, 4.1 mm Shoulder NL-PUT-4L

NL-PUT-15-1M 15° angles

6 mm Abutment-Body, 1 mm Shoulder

NL-PUT-15-2M 15° angles

6 mm Abutment-Body, 2 mm Shoulder

NL-PUT-15-3M 15° angles

6 mm Abutment-Body, 3 mm Shoulder

NL-PUT-25-1M 25° angles

6 mm Abutment-Body, 1 mm Shoulder

NL-PUT-25-2M 25° angles

6 mm Abutment-Body, 2 mm Shoulder

NL-PUT-25-3M 25° angles

6 mm Abutment-Body, 3 mm Shoulder



Standard Line **Implant Analog** IA-3.75 Standard Platform for 3.75 mm, 4.2 mm, 5.0 mm & 6.0 mm



**Narrow Line Implant Analog Narrow Line** NL-IA-3.0 Platform for 3.0 mm and 3.3 mm



Standard Line, Titanium Screw for Closed Tray Transfer - 13 mm TSCT-14 Narrow Line, Titanium Screw for Narrow Line, Closed Tray Transfer NL-TSCT-14 Standard Line, Titanium Screw for TSCT-17 **Closed Tray Transfer** - 16 mm Narrow Line, Titanium Screw for NL-TSCT-17 Narrow Line, Closed Tray Transfer - 16 mm Standard Line, Titanium Screw for TSOT-24 Open Tray Transfer - 22.8 mm Narrow Line, Titanium Screw for NL-TSOT-24 Narrow Line, Open Tray Transfer - 23.2 mm

Analogs are used by laboratories to replicate the Implant in a plaster model, this is done in order not to use a real Implant for this purpose. There are two types of analogs - Implant level and Abutment level

Since Ritter has two platforms, we only need two Implant Level Analogs - one for the NL/Narrow Line 2.9 Platform and one for the SL/Standard Line 3.75 platform.



TSA-8.3

straight and angled Abutments Narrow Line, Titanium Screw 7.8 mm NL-TSA-8.3 for straight and angled Abutments

Standard Line

Titanium Screw 7.6 mm for

## Single Unit Prosthetic Components

All Ritter Abutments come with a fixation screw. Single Units have traditionally been manufactured to encompass incremental heights/incremental gingival heights/and Incremental angles – while the crown would compensate/over compensate for intermediary angles/heights and be cemented to the abutment in the mouth.

All Ritter abutments screws are customized to accept the same screw driver – no matter what platform or type of abutment.



Same HEX Driver HHDA for standard & Narrow Platform means same Driver/Tool for abutment fixation

Most Ritter Implants screws are made of Grade 5 Titanium!





Reason #13

## Same abutment fixation Driver HHDA

for Standard & Narrow Platform









## **Temporary Abutments**

Peek/Titanium



#### **PEEK Abutments** Temporary Restoration Abutments



PASA-1

Standard Line
Peek-On anatomical,
straight abutment
1 mm Shoulder,
L 11.1 mm

PASA-2 Pee stra 2 m

Standard Line Peek-On anatomical, straight abutment 2 mm Shoulder, L 12.1 mm Standard Line
Peek-On anatomical,
straight abutment
3 mm Shoulder,
L 13.1 mm

If a dentist is not using our dual Purpose Scan/ Temp Abutment, she/he can purchase any of the angles, heights or shoulder heights to make the temporary or provisional crown – Ritter also offers a popular version in Titanium.

#### **Titanium Temporary Abutments**



TTA-ZI-H

Temporary-Titanium-Abutment, Anti-Rotational, ø 4.5 mm L= 9.5 mm



TTA-ZI-R

PASA-3

Temporary-Titanium-Abutment, Rotational, ø 4.5 mm L= 9.5 mm



**Anti-Rotational** 



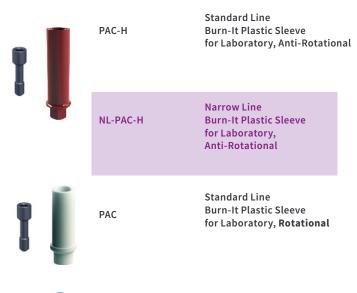
**Rotational** 

\*\*\* NOTICE: NOT ALL ITEMS OF THIS CATALOG ARE APPROVED FOR SALES IN ALL COUNTRIES. PLEASE CHECK THE IMPORT REGULATIONS OF YOUR TERRITORY.\*\*\*

## **Abutments for Casting/LAB**

Ti-Base with casting sleeves/for LAB use







Ritter's AZA line are made in both Chromium Cobalt and Titanium and are dual purpose as they can be used as Castable with Chromium Cobalt or a Ti-Base made from Titanium.

## Ti-Bases/Milling Blanks



## Prosthetics Scan Abutments and Ti-Bases



Standard Line
ML-10-23 Millable Blanks
with 2.42 Hex

Narrow Line
NL-ML-10-23 Millable Blanks
with 2.0 Hex

		$\bigcap$ R	otational
	Straight Ti-Bas	se	
H			
С	0.5 mm	1.5 mm	3 mm
Н	4.7 mm	4.7 mm	4.7 mm
Ø	4.2 mm	4.2 mm	4.2 mm
Art. No.	TBC-0.5R	TBC-1.5R	TBC-3R
Narrow Line NL	NL-TBC-0.5R	NL-TBC-1.5R	NL-TBC-3R

### Anti-Rotational



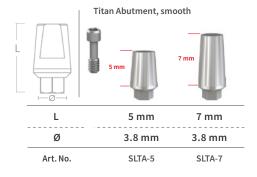
\*\*\* NOTICE: NOT ALL ITEMS OF THIS CATALOG ARE APPROVED FOR SALES IN ALL COUNTRIES. PLEASE CHECK THE IMPORT REGULATIONS OF YOUR TERRITORY.\*\*\* As technology has advanced – it has been discovered that cementing should no longer be performed in the mouth – so if you must cement out of the mouth then you need a hole in the crown to cement to the abutment – this was the advent of the "screw retained crown/restoration" and the birth of the Ti-Base. As milling technology became better and cheaper – custom abutments also became very popular – a custom abutment is a more expensive restorative option where the exact angle/height ect of the abutment is made specifically for the patient.

Those who continue to use the stock abutmentscemented out of the mouth – with a screw access whole – refer to this process as screw-mentable. Before there were Ti-Bases and customized abutments there were UCLA and Burn out abutments both were in the category of castable – used to cast gold or other metals into the shape of the custom abutment desired by the lab.

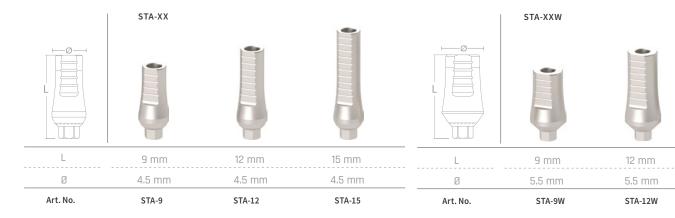
UCLA abutments are traditionally made from Titanium, Gold and Chromium Cobalt. Burn out abutments are made from plastic. For laboratories or Dentists who have titanium milling Machines – Ritter's ML – Milling blank will be used to make custom titanium abutment.

### **Titanium Abutments**

Preparable Abutments, straight/angled







Traditionally these abutments are manufactured to encompass incremental heights, incremental gingival heights and incremental angles – while the crown would compensate/over compensate for intermediary angles/heights and be cemented to the abutment in the mouth.

The diameters, heights and shapes are to be decided by the dentist as to prepare and shape the gums for the final crown/prosthesis.



## Narrow Line NL NL-STA-10 Narrow Line Straight Titanium Abutment 10 mm





Inkl. TSA-8.3/NL-TSA-8.3 Titanium screw

Also available as STA-5 - L=5 mm and STA-7- L=7 mm

### **Titanium Abutments**

Preparable Abutments, angled



EATA-XX Standard Line – 15° Angled Titanium Abutment Anatomic Emergency Profile

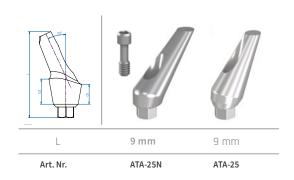


Incl. TSA-8.3 Titanium screw

EATA-XX Standard Line – 25° Angled Titanium Abutment Anatomic Emergency Profile



Incl. TSA-8.3 Titanium screw



Incl. TSA-8.3 Titanium screw

### **Titanium Abutments**

Preparable Abutments, straight









Narrow Line - Straight Titanium Abutment - X mm Shoulder



#### Ritter Implants system has ABU with many other brands:



















AB Dental **JDentalCare** Adin MegaGen MIS Alfa Alpha Bio NeoBiotec Alpha Dent Nobel Biocare Astra Tech Noris Medical Axelmed Osstem **BEGO** Oxy Biohorizons Paltop Cortex Ritter Implants Dentegris SGS Dental Dentium Spiral Tech Dio Straumann Ditron Surgikor

Edison Medical TAG
Hiossen TAV Dental

Implant Direct TRI Dental Implants AG

iRes Zimmer



### **Overdenture Abutments**

Overdenture abutments are simply abutments to anchor dentures to Implants. There are several types but they can be broken into two categories – removable and fixed.

Removable can be removed and replaced by the patient – simply snapping the denture into place, and unsnapping it whenever they want.

Fixed can only be removed by the Dentist and are mainly retained with screws.







## **Ball Attachments and Accessories**



As shown, ball attachments are screwed into the Implant to hold a denture in place – they were the first products invented to hold a denture in the mouth without glue. A metal cap is placed and imbedded into the plastic denture – aligning with the location of where the ball attachment will protrude from the Implant. The polyamide inserts are simply shock absorbers. These products were originally designed to place 2 implants on each side of the mouth.



Description

Ball-Attachment, Titanium nitride coated, incl. 1 SCB-P, 1 BA-SP, 1 - MCB Metal Cap

#### NL = Narrow Line for 3.0 & 3.3 mm ø Implants



+++ REPLACEMENT KITS OF CAPS WILL COME BY 4 PCS. THE MCB METAL CAP COMES SINGLE PACKED +++



BA-X comes with 3 components – the caps are inserted in the full arch overdenture.

1 BA-X 1 SCB-P,

1 MCB Metal Cap



#### Polyamide Caps for Ball Attachment (SCB)

SCB-T: Transparent (4 pcs.): slightly elastic,

retention 2.5-2.9 lbs (1.13-1.32 kg)

SCB-P: Pink (4 pcs.): elastic, retention 1.75-2.0 lbs

(0.79-0.90 kg) - STANDARD INCLUDED

SCB-Y: Yellow (4 pcs.): very elastic, retention 1.0-1.3 lbs

(0.45-0.6 kg)

SCB-G: Green (4 pcs.): extremely elastic,

retention <1 lbs (<0.45 kg)

SCB-B: Black (4 pcs.): for laboratory use only

BA-SP: Separator O-Rings for Ball Attachment and

Clicq™ Overdenture

MCB: Metal Insert cap for Ball

**Attachment Prosthesis** 

## **Overdenture Abutments**

Removable LOCATOR® System by ZEST®

#### LOCATOR® R-Tx



In 1972 The Zest Locator Company perfected the Overdenture Abutment and patented the Locator. The original Locator was proven to provide better retention than the ball attachment and remains the most popular overdenture abutment in the world. They use the same principle as the ball attachment with a metal cap and silicon inserts for cushioning. We do not make these so the screw driver is different. Also Note it is expensive and all parts are sold separately. In Recent years the Zest Corporation has launched two new versions of the Locator.

In an effort to offer a wider range of angle correction they produced the R-TX. The top portion of the abutment allows the metal housing to swivel. The thought was they could give the same retention and allow for greater angulation in Implant placement.

\*\*\* They really needed to make an angled version, but made this option instead.

Art. No.	LOCATOR R-TX ATTACHMENT SYSTEM	Art. No.	LOCATOR R-TX ATTACHMENTS & ACCESSORIES
31500-04-SB	LOCATOR R-TX Attachment System, 3.0 mm Internal Hex Connection, 4.0 mm Cuff	30002-01	LOCATOR R-TX Low Retention Insert, Blue, Includes 4
30200-00-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 0.5 mm Cuff	30003-01	LOCATOR R-TX Medium Retention Insert, Pink, Includes 4
30200-01-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 1 mm Cuff	30004-01	LOCATOR R-TX High Retention Insert, Clear, Includes 4
30200-02-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 2 mm Cuff	30021-01	LOCATOR R-TX Retention Insert Tool
30200-03-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 3 mm Cuff	30053-01	LOCATOR R-TX 4x Macro Model
30200-04-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 4 mm Cuff		
30200-05-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 5 mm Cuff		

#### Removable LOCATOR® Attachment System





Measurement for the height of the tissue sleeve: The height of the LOCATOR® Tissue Cuff ranges from 1-5 mm (platform to the bottom of the 1.5 mm coronal section).

The upper section, 1.5 mm of each locator is the same. The transition to the platform (EN) and the connection is different.

Art. No.	LOCATOR® ABUTMENTS for Ritter Implants		
02284-RT-SB	LOCATOR Abutment 1.0 mm Cuff for Ritter Implants Standard Platform		
02285-RT-SB	LOCATOR Abutment 2.0 mm Cuff for Ritter Implants Standard Platform		
02286-RT-SB	LOCATOR Abutment 3.0 mm Cuff for Ritter Implants Standard Platform		
02287-RT-SB	LOCATOR Abutment 4.0 mm Cuff for Ritter Implants Standard Platform		
02288-RT-SB	LOCATOR Abutment 5.0 mm Cuff for Ritter Implants Standard Platform		
NL-02308-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 0.75 mm, final packing		
NL-02309-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 2 mm, final packing		
NL-02310-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 3 mm, final packing		
NL-02311-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 4 mm, final packing		
NL-02312-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 5 mm, final packing		
NL-02313-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 5 mm, final packing		
NL-02313-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 6 mm, final packing		
NL = Narrow Line for 3.0 & 3.3 mm ø Implants			

#### Interocclusal distance:

Less than 3.2 mm for external hex and 2.5 mm for implants with internal connection (with 0 mm cuff height).





Bar:

08026



**Denture insert** 08510-RT-SB

08547

Regular

Yellow at **Bar constructions** 

#### Standard Line:

08527 08529 Extra Light Light Pink 3 lbs

0-10° Angle













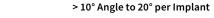
08548

Extra Light



08915





**Extended Line:** 

08558

Zero

Art. No.	LOCATOR® ABUTMENTS for Ritter Implants
08393-RT-SB	LOCATOR Core Tool
08390-RT-SB	LOCATOR Abutment Driver, gold
08519-2-RT-SB	LOCATOR Plug Processing Set, 4 Pieces
08505-RT-SB	LOCATOR Impression Coping, 4 Pieces
08510-RT-SB	LOCATOR Replacement Denture Cap, Metal, 4 Pieces
08530-RT-SB	LOCATOR Analogs 4 mm ø, 4 Pieces
08519-10-RT-SB	Male Processing Package, Includes 10
08524-RT-SB	LOCATOR Denture Cap, clear, 4 Pieces
08527-RT-SB	LOCATOR Denture Cap, light adhesion, pink, 4 Pieces
08529-RT-SB	LOCATOR Denture Cap, extra light adhesion, blue, 4 Pieces
08547-RT-SB	LOCATOR Denture Cap, green, 4 Pieces
08915-RT-SB	LOCATOR Denture Cap, orange, 4 Pieces
08548-RT-SB	LOCATOR Denture Cap, extra light adhesion, red, 4 Pieces
08558-RT-SB	LOCATOR Denture Cap, no adhesion, gray, 4 Pieces
08517-RT-SB	LOCATOR Parallel Post, 4 Pieces
08515-RT-SB	LOCATOR Black Plug Processing Set, 4 Pieces
09530-RT-SB	LOCATOR Angle measurement guide
09566-RT-SB	Chairside Attachment Processing Material
08260-RT-SB	LOCATOR 35 Ncm Torque Screwdriver, 15 mm

# Removable Overdenture Abutments

Straight 1 mm 3 mm 4 mm 5 mm 7mm Art. No. COD-0.5 COD-1 COD-2 COD-3 COD-4 COD-5 COD-6 COD-7 Narrow Line NL NL-COD-0.5 NL-COD-1 NL-COD-2 NL-COD-3 NL-COD-4 NL-COD-5 NL-COD-6

Clicq™ Set: Titanium nitride coated, incl. SCL-T, SCL-P, SCL-Y, SCL-B, 1 - BA-SP, 1 - MC-COD

The Clicq™ overdenture is known around the world as an Equator – this type of product was produced to compete with the Original Zest Locator without violating their patents.



#### Reason #15/16/17

- More narrow profile #15
- Angled Versions available #16
- All the processing parts included #17



Description

## **Removable Overdenture Abutments**

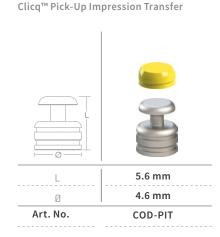
Clicq™/Analog and Accessories

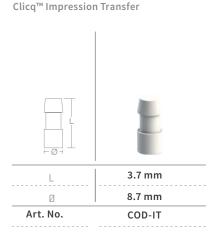
# Content of the COD-X KIT includes:

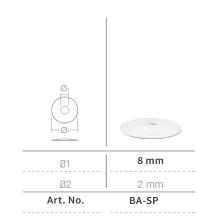
- 1 x COD-X (size)
- 4 x SCL Retentive Caps, each B/Y/P/T
- 1 x MC COD Metal Housing
- 1 x BA-SP Disk

Clicq™ Protective Disk (4 pcs/pack)





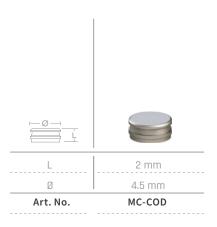




Clicq™ Metal Housing (2 pcs/pack)

Clicg™ Retentive Cap (4 pcs/pack)

+++ REPLACEMENT KITS OF CAPS WILL COME BY 4 PCS. THE MC-COD METAL CAP COMES SINGLE PACKED +++







# Removable Overdenture Abutments Clicq<sup>TM</sup> PLUS



The Clicq™ Overdenture Plus was created for the Dentist to have a wider option of the Abutmentthis has the Same Principle purpose as Ball Attachments, Zest Locator, and Clicq™. More than one option for angled Overdenture abutments is makes Ritter unique.



Reason #18



# **Removable Overdenture Abutments**

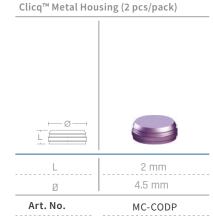
Clicq<sup>™</sup> PLUS/Analog and Accessories

# Content of the COD-XP KIT includes:

1x COD-XP (size)
4 x SCLP Retentive Caps, each B/Y/P/T
1x MC-CODP Metal Housing
1x CODP-SP Disk

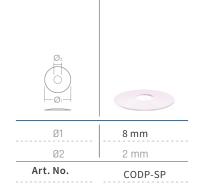
# Clicq™ Analog Abutment L 12.3 mm Ø 3.8 mm Art. No. COD-IA







Clicq™ Retentive Cap (4 pcs/pack)					
	Lab use only Black laboratory	Ex-Soft Yellow	Soft Pink	Standard Transparent	Strong Violet
⊢ Ø → L					
L	1.7 mm	1.7 mm	1.7 mm	1.7 mm	1.7 mm
Ø	3.8 mm	3.8 mm	3.8 mm	3.8 mm	3.8 mm
Art. No.	SCLP-B	SCLP-Y	SCLP-P	SCLP-T	SCLP-V



Clicq<sup>™</sup> Protective Disk (4 pcs/pack)

Insertion & Extraction Tool for Overdenture Attachments

Suitable for all Overdenture Lines

Art. No. COD-INS

+++ REPLACEMENT KITS OF CAPS WILL COME BY 4 PCS. THE MC-CODP METAL CAP COMES SINGLE PACKED +++





Reason #22

# Ritter Implants were the first to transition a patient from a removable Denture to an "all on X". Why?

Because a removable case can be planned with the "Angled Clicq™" Abutments.



Multi Unit Abutments (MUA) were created by Nobel Biocare® for the concept of replacing all teeth with a full porcelain or Zirconia Bridge instead of a plastic Denture over 4 Implants. This procedure was called "All on 4®".

This procedure involved at least placing two posterior Implants at a minimum of at least a **17 Degree angle and 2 more at any angle.** The angulation is required for cross arch stability.

It is now known to be called all on X because 6-8 Implants are now being used.

Multi unit abutments are designed so that the teeth (denture/bridge/prosthesis) can be removed without removing the actual abutments from the implants.

They are similar to the overdenture principle in that a part must be fused or cemented into the prosthesis just like the metal housing in an overdenture. However the attachments for Multi units are traditionally titanium cylinders with screw access holes – these parts are screwed into the multi unit abutments instead of being snapped onto overdenture abutments.



One Piece Multi-Unit Abutments, straight and angled Multi-Unit KS-System

Ritter Multi Abutments have been manufactured with a wider stronger M1.6 screw instead of a M1.4 screw that most companies use on Multi unit restorations. Ritter offers this packaged with very commonly used accessories making it simple for a dentist to order parts.

#19 Ritter makes this for its 3.0 and 3.3 Narrow line platform #20 and most companies narrow platform are strong enough to support this type of abutment on such narrow Implants.





MU-KS10 NL-MU-KS10

Standard Line Straight Multi Unit 1 mm Shoulder



MU-KS1710 NL-MU-KS1710 Standard Line 17° angled Multi Unit 1.1 mm/2.5 mm Shoulder (G1/G2)



MU-KS3010 NL-MU-KS3010

Standard Line 30° angled Multi Unit 1.1 mm/3.5 mm Shoulder (G1/G2)



MU-KS20 NL-MU-KS20

Standard Line Straight Multi Unit 2 mm Shoulder



MU-KS1720 NL-MU-KS1720 **Standard Line** 17° angled Multi Unit 2.1 mm/3.5 mm Shoulder (G1/G2)



MU-KS3020 NL-MU-KS3020

Standard Line 30° angled Multi Unit 2.1 mm/4.5 mm Shoulder (G1/G2)



MU-KS30 NL-MU-KS30 Standard Line Straight Multi Unit 3 mm Shoulder



MU-KS1710H

Standard Line 17° angled Multi Unit 1.1 mm/2.5 mm Shoulder (G1/G2) with Anti-rotation



MU-KS3010H

Standard Line 30° angled Multi Unit 1.1 mm/3.5 mm Shoulder (G1/G2) with Anti-rotation



MU-KS40

Standard Line Straight Multi Unit NL-MU-KS40 4 mm Shoulder



MU-KS1720H

Standard Line 17° angled Multi Unit 2.1 mm/3.5 mm Shoulder (G1/G2) with Anti-rotation



MU-KS3020H

Standard Line 30° angled Multi Unit 2.1 mm/4.5 mm Shoulder (G1/G2) with Anti-rotation

Also available: MU-KS50, NL-MU-KS50

Also available: MU-KS1730, NL-MU-KS1730 MU-KS1740, NL-MU-KS1740

Also available: MU-KS3030, NL-MU-KS3030 MU-KS3040, NL-MU-KS3040

One Piece Multi-Unit Abutments, straight and angled Multi-Unit KS-System



#### Multi Unit Sets/Kits including all necessary components=K



MU-KS10K NL-MU-KS10K Multi Unit Kit 1 mm Shoulder height



Multi Unit Kit 2 mm Shoulder height



MU-KS30K NL-MU-KS30K Multi Unit Kit 3 mm Shoulder height



Multi Unit Kit 4 mm Shoulder height

Also available: MU-KS50K, NL-MU-KS50K





MU-KS1710K NL-MU-KS1710K 17° angled Multi Unit Kit 1 mm/2.4 mm Shoulder height (G1/G2)



MU-KS1720K NL-MU-KS1720K 17° angled Multi Unit Set 2 mm/3.3 mm Shoulder height (G1/G2)





MU-KS3010K NL-MU-KS3010K 30° angled Multi Unit Kit 1 mm/3.3 mm Shoulder height (G1/G2)

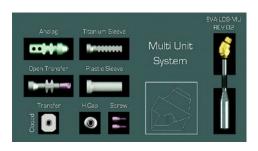


MU-KS3020K NL-MU-KS3020K 30° angled Multi Unit Kit 2 mm/4.4 mm Shoulder height (G1/G2)

Also available:

MU-KS1730K, NL-MU-KS1730K, MU-KS1740K, NL-MU-KS1740K MU-KS3030K, NL-MU-KS3030K, MU-KS3040K, NL-MU-KS3040K

#### **Multi Unit Set Components**



Includes: Healing Cap, open and closed Transfer, Plastic Sleeve, Titanium Sleeve, Analog & 2 Screws

1x MU-KSxxxx Multi Unit Abutment

1x MU-KSTST Screw

1x MU-KSOTT open impression 1x MU-KSPT closed impression 1x MU-KSAN Analog Abutment

1x MU-KSHC Healing cap
1x MU-KSSLP Plastic sleeve
1x MU-KSSL Titanium sleeve

2x MU-KSTS Screw

Note: Illustration for display purposes only. The items are supplied in blister packaging. In some Countries items can be supplied in the Kit/Tray

Includes TSAMU Titanium Screw for one piece angled

Includes MU-KSTS Titanium Screw & MU-HD Holder for one piece angled Multi Unit

One Piece Multi Unit Abutments, straight and angled Multi UnitKS-System **Accessories** 



MU-KSAN

**Analog Abutment for** Multi Unit KS System (Cone with M 1.6 X 0.35)



#### MU-KSPT

**Closed Plastic Transfer for** Multi Unit KS System (Assembled with MU-KSTS Titanium Screw MU-KSPTB Basis for closed Transfer)



The accessories are all used for the descriptions previ-



#### MU-KSOTT

Open Transfer for Multi Unit KS System (MU-KSTSOT Titanium Screw included)



#### MU-KSTS

**Titanium Screw for** Multi Unit Cone ABUTMENT LEVEL M 1.6 X 0.35 - KS System

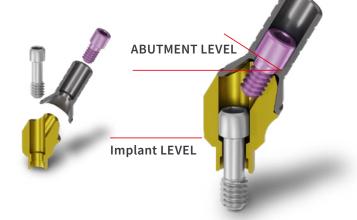


#### MU-KSHC

**Healing Cap for** Multi Unit KS System (Assembled with MU-KSTS Titanium Screw)



ously shown in Single units but are all ABUTMENT LEVEL ACCESSORIES and can only be used for Ritter MUA.





MU-KSSL

Titanium Sleeve for Multi Unit KS System (MU-KSTST includes)



MU-KSSLP

Plastic Sleeve for Multi Unit KS System (MU-KSTS Titanium Screw includes)





MU-KSAC-R Prosthetic Cap, rotating (MU-KSTS Titanium Screw includes)



MU-KSAC-AR Prosthetic Cap, non-rotating For single restoration (MU-KSTS Titanium Screw includes)

# Screw Receiving Multi Unit Abutments One Piece Multi Unit Abutments, straight and angled Multi-Unit KS-System







#### **Multi Unit Professional Kit Parts:**

**Accessories Included** 

Item Code	Description	QTY
MU-KSAN	Analog Abutment	6
MU-KSOTT	Open Tray Transfer	6
MU-KSSL	Titanium Sleeve	6
MU-KSPT	Closed Tray Transfer	6
MU-KSHC	Healing Cap Includes Screw	6
MU-KSSLP	Plastic Sleeve	6
MU-KSAC-R	Rotational Adhesive Cap	2
MU-KSAC-AR	Anti Rotational Adhesive Cap	2
MU-KSTS	Screw for Cone Connection	10
HHDA	Screw Driver	1
MU-KSSB	Scan Body	1

#### **Abutments Included**

Includes Screw MU-KSTS and Carrier MU-HD not sold individually:

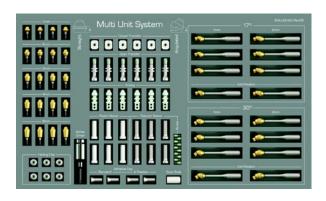
Item Code	QТY	Also available in Narrow Line NL
MU-KS10	4	NL-MU-KS10
MU-KS20	4	NL-MU-KS20
MU-KS30	4	NL-MU-KS30
MU-KS40	4	NL-MU-KS40
MU-KS50	4	NL-MU-KS50
MU-KS1710	3	NL-MU-KS1710
MU-KS1720	3	NL-MU-KS1720
MU-KS1710H	1	NL-MU-KS1710H
MU-KS1720H	1	NL-MU-KS1720H
MU-KS3010	3	NL-MU-KS3010
MU-KS3020	3	NL-MU-KS3020
MU-KS3010H	1	NL-MU-KS3010H
MU-KS3020H	1	NL-MU-KS3020H





This special Kit Comes with 36 Abutments so the doctor does not have to open several packages - this makes complicated procedure much easier!





# Biologics Bone Graft Materials

Only Available in the US for Domestic Non-Laboratory or Research Use



# **Biologics**

#### DentalFix™ Dental Bone Particulate

Only Available in the US for Domestic Non-Laboratory or Research Use



Image	Item No.	Description
DentalFix™ Mineralized Cancellous	423202	0.25 cc
Particulate	423205	0.5 cc
100	423210	1.0 cc
	423220	2.0 cc
	423250	5.0 cc
DentalFix™ Mineralized Cort/Canc	423002	0.25 cc
Particulate	423005	0.5 cc
	423010	1.0 cc
	423020	2.0 cc
	423050	5.0 cc
DentalFix™ Mineralized Cortical	423102	0.25 cc
Particulate	423105	0.5 cc
	423110	1.0 cc
	423120	2.0 cc
	423150	5.0 cc

Elongated particle design for maximum surface area Indications for use: sinus and ridge augumentation, socket preservation, bone void filling.

- Mineralized cortial particulate jar
- Mineralized cancellous particulate jar
- Mineralized cortical/cancellous particulate jar
- Five year shelf life
- Sterility assurance level (SAL) of 10-6



DentalFix™ regenerative implants provide quality grafting solutions for the informed clinician.

Reliable grafting options are available in the form of DBM putty, dermis, Matrix OI® FlexIT, Matrix OI®, demineralized and mineralized cortical and cancellous grafts, including particulate bone, for optimal long-term osteointegration and esthetic results. Clinicians can avoid the need for clinically challenged secondary surgical site autografts associated morbidity by using CellRights DentalFix™ products.

Technologies® validated BioRinse™ sterilization process uses proprietary rinsing agents in multiple combinations designed to kill pathogenic microorganisms, vegetative bacteria and spores. These steps include the removal of debris, blood, bone marrow, and lipids. The BioRinse™ process is a technologically advanced science developed for use in all product families including osteoinductive in-vivo verified Matrix OI® family of products. BioRinse™, in combination with our final sterilization step, ensures a medical device sterility assurance level (SAL 10-6) for all CellRight products.



The grafts should be stored in ambient temperatures (59-86°F or 15-30°C).

DentalFix™ implants are currently used in oral regenerative procedures including:

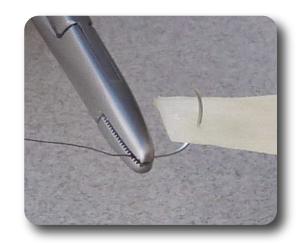
- periodontal defects
- tunnelling soft tissue augmentation
- sinus augumentation
- extraction socket with partial Buccal wall
- socket extraction procedures
- repair of 3-wall defects
- repair to access windows
- sinus-lift with lateral access & lateral ridge augmentation

# Biologics MatrixOI® FlexIT

Only Available in the US for Domestic Non-Laboratory or Research Use

Image	Item No.	Description
Matrix OI®	446001	10 x 10 mm
FlexIt	446002*	15 x 10 mm
	446003	15 x 15 mm
	446004*	20 x 20 mm
1800	446005	30 x 30 mm
	446006*	50 x 25 mm
	446007	17 x 10 mm

<sup>\*</sup> Available upon request, not available online.



to release for distribution. In-vivo Matrix OI® test results demonstrate all five (5) bone-forming elements present (Chondrocytes, Osteocytes, Bone Marrow, Cartilage, and New Bone). In-vitro Matrix OI® test results for BMP levels demonstrate Matrix OI® products have up to 19x the native BMP levels of the BMP-2 control.

The grafts are freeze-dried and sterilized using low-dose gamma irradiation to achieve a sterility assurance level (SAL) of 10-6. The grafts should be stored in ambient temperatures (59-86°F or 15-30°C) and have a shelf-life of up to five (5) years from the date of packaging.

Our proprietary next-generation BioRinse™ processing technology has been proven to preserve native bone morphogenic proteins (BMP's).

CELLRIGHT

Matrix OI® FlexIT is indicated for use in craniomaxillofacial applications including cranial repair, orbital floor, and zygomatic fractures, involving sutures, plates, anchors, and other fixation devices. Other uses for Matrix OI® FlexIT include acetabular reconstruction, posterolateral spinal procedures, long-bone fracture plate, non-unions, and dental procedures.

Matrix OI® FlexIT, when hydrated, is a thin pliable cortical sheet that has the ability to be sized with scissors or a scalpel.

To accelerate graft reconstitution, submerge the Matrix OI®

FlexIT in luke warm water or saline for 10-30 minutes and manipulate periodically, especially for larger size grafts. Graft pliability may occur sooner than 10-30 minutes.

Matrix OI® products are verified for osteoinductivity prior



# Biologics

#### MatrixCellect® 100 DBM Putty

Only Available in the US for Domestic Non-Laboratory or Research Use



Image	Item No.	Description
MatrixCellect®	452005	0.5 cc
100 DBM Putty Syringe	452010	1.0 cc
	452025	2.5 cc
	452050*	5.0 cc
	452075*	7.5 cc
	452100*	10 cc
	* Available upon reques	t, not available online.

New Bone
Osteocytes

MatrixCellect® 100 is a DBM Putty derived from 100% allograft bone.

New Bone

MatrixCellect® 100

MatrixCellect® 100

New Bone

New Bone

New Bone

New Bone

Osteocytes

MatrixCellect® 100 Histology



MatrixCellect® 100 is a 100% DBM putty processed using our proprietary demineralization process. MatrixCellect® 100 has been histologically proven post sterilization to exhibit five elements of bone formation. MatrixCellect® 100 does not contain any extrinsic carriers and is entirely derived from 100% allograft bone. MatrixCellect® 100 is provided in a ready to use syringe or jar.

MatrixCellect<sup>®</sup> 100 is provided with a medical device Sterility Assurance Level (SAL) 10-6. The product should be stored in ambient temperatures and has a shelf life of up to two years from the date of packaging.

MatrixCellect® 100 is indicated for homologous use for the treatment of surgically created or traumatic skeletal defects.

We employ strict quality assurance and quality control procedures to ensure patient safety. Our medical director, a licensed physician, performs an extensive medical review of the donor's medical/social history to determine eligibility. Only donors whose screening, serologic, and microbiologic tests meet or exceed the current standards established by the Food and Drug Administration (FDA) and the American Association of Tissue Banks (AATB) are accepted for transplantation.

MatrixCellect<sup>®</sup> 100 may be used in surgical procedures:

- · Spine
- · Neuro
- · Orthopedics
- · Trauma
- · Reconstruction
- · Foot & Ankle
- · Dental

# **Biologics**

#### MatrixCellect® 100 DBM Crunch

Only Available in the US for Domestic Non-Laboratory or Research Use

Image	Item No.	Description
MatrixCellect⊚ 100 DBM	455010	1.0 cc
Crunch Jar	455025	2.5 cc
	455050	5.0 cc
	455100	10.0 cc

MatrixCellect® 100 DBM Crunch is derived from 100% allograft bone.



MatrixCellect® 100 DBM Crunch is processed using our proprietary demineralization process. It has been histologically proven post-sterilization to exhibit five elements of bone formation. MatrixCellect® 100 DBM Crunch does not contain any extrinsic carriers and is entirely derived from 100% allograft bone. MatrixCellect® 100 DBM Crunch is provided in a jar.

MatrixCellect® 100 DBM Crunch is provided with a medical device Sterility Assurance Level (SAL) 10-6. The product should be stored in ambient temperatures and has a shelf life of up to two years from the date of packaging.

MatrixCellect® 100 DBM Crunch is indicated for homologous use for the treatment of surgically created or traumatic skeletal defects.

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MatrixCellect® 100 DBM Crunch may be used in surgicalprocedures including:

- ·Spine
- · Neuro
- · Orthopedics
- · Trauma

# Biologics ConCelltrate® 100

Only Available in the US for Domestic Non-Laboratory or Research Use

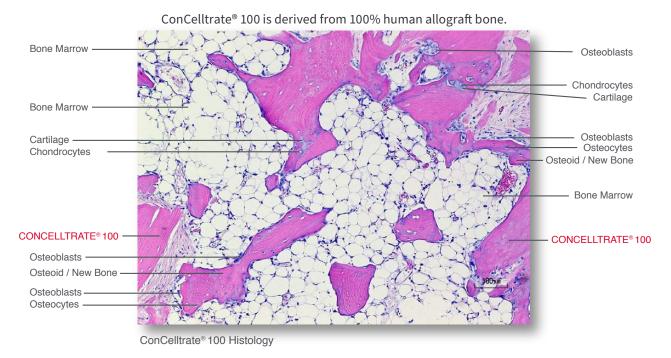


Image	Item No.	Description
ConCelltrate⊚ 100 Jar	453005*	0.5 cc
	453010*	1.0 cc
	453025*	2.5 cc
	453050*	5.0 cc
	453100*	10 cc

<sup>\*</sup> Available upon request, not available online.

ConCelltrate® 100 has been histologically proven to contain all 5 elements of bone formation including new bone, bone marrow, osteocytes, chondrocytes, and cartilage in the athymic rat post-implantation at 28 days. In-vivo testing is performed by an independent laboratory on every lot post-sterilization.

ConCelltrate® 100 is processed using our proprietary process. ConCelltrate® 100 may be hydrated with saline, blood, Bone Marrow Aspirate (BMA), Platelet Rich Plasma (PRP), or other cellular components in accordance with a physicians well-informed medical judgement. ConCelltrate® 100 does not contain any extrinsic carriers and is entirely derived from 100% human allograft bone. ConCelltrate® 100 is provided in a ready to use mixing jar.



ConCelltrate® 100 is provided sterile with a medical device Sterility Assurance Level (SAL) 10-6. The product should be stored in ambient temperatures and has a shelf-life of up to five years from the date of packaging.

We employ strict quality assurance and quality control procedures to ensure patient safety. Our medical director, a licensed physician, performs an extensive medical review of the donor's medical/social history to determine eligibility. Only donors whose screening, serologic, and microbiologic tests meet or exceed the current standards established by the Food and Drug Administration (FDA) and the American Association of Tissue Banks (AATB) are accepted for transplantation.

ConCelltrate® 100 is indicated for homologous use for the treatment of surgically created or traumatic skeletal defects.

ConCelltrate® 100 may be used in surgical procedures including:

·Spine

· Dental

· Neuro

· Foot & Ankle

· Orthopedics

· Reconstruction

· Trauma

# Biologics MatrixOI® Cortical Fibers

Only Available in the US for Domestic Non-Laboratory or Research Use

Image	Item No.	Description
Matrix OI⊚ Cortical Fibers	445010*	Extra Small (approx. 1.0 cc)
Jar	445025*	Small (approx. 2.5 cc)
	445050*	Medium (approx. 5.0 cc)
	445100*	Medium (approx. 10 cc)

<sup>\*</sup> Available upon request, not available online.

Matrix OI® cortical fibers have been histologically proven to contain all 5 elements of bone formation including new bone, bone marrow, osteocytes, chondrocytes, and cartilage in the athymic rat post-implantation at 28 days. In-vivo testing is performed by an independent laboratory on every Matrix OI® lot post-sterilization.

Matrix OI® cortical fibers are processed using our proprietary BioRinse® process. Matrix OI® cortical fibers may be hydrated with saline, blood, Bone Marrow Aspirate (BMA), Platelet Rich Plasma (PRP), or other cellular components in accordance with a physicians well-informed medical judgement. Matrix OI® cortical fibers do not contain any extrinsic carriers, and are derived entirely from 100% human allograft bone. Matrix OI® cortical fibers

Chondrocytes

Chondrocytes

New Bone

New Bone

Matrix OI® Cortical Fibers Histology

Matrix OI® Cortical Fibers Histology

are provided in a ready to use mixing jar.

Matrix OI® cortical fibers are provided sterile with a medical device Sterility Assurance Level (SAL) 10-6. The product should be stored in ambient temperatures and has a shelf life of five years from the date of packaging.

We employ strict quality assurance and quality control procedures to ensure patient safety. Our medical director, a licensed physician, performs an extensive medical review of the donor's medical/social history to determine eligibility. Only donors whose screening, serologic, and microbiologic tests meet or exceed the current standards established by the Food and Drug Administration (FDA) and the American Association of Tissue Banks (AATB) are

accepted for transplantation.

Matrix OI® cortical fibers are indicated for homologous use for the treatment of surgically created or traumatic skeletal defects.

Matrix OI® cortical fibers may be used in surgical procedures including:

·Spine

· Reconstruction

· Neuro

· Foot & Ankle

· Orthopedics

Dental

· Trauma

## **Biologics** MatrixOI® Fusion Matters

Only Available in the US for Domestic Non-Laboratory or Research Use



Image	Item No.	Description
Matrix OI® Strip	442002*	50 x 7 x 5 mm
Strip	442003*	20 x 15 x 7 mm
	442004*	25 x 10 x 7 mm
	442006*	50 x 10 x 7 mm
	442007*	50 x 20 x 7 mm
	442008*	26 x 19 x 7 mm
	442001*	20 x 10 x 10 mm
Matrix OI®	444025*	2.5 cc
Filler	444050*	5.0 cc
2	444100*	10 cc
•	444150*	15 cc
	444225*	2.5 cc Jar
	444250*	5.0 cc Jar
4	444300*	10 cc Jar
	444350*	15 cc Jar
Matrix OI®	441010*	10 mm <sup>3</sup>
Block	441012*	12 mm³
	441014*	14 mm³
	* Available upon reque	est, not available onli

Matrix OI® is a compressible Stem Cell Containment™ matrix derived from 100% human bone.



Each lot of Matrix OI® is tested for osteoinductivity post sterilization in-vivo for 28 days in an athymic rat to ensure the presence of bone morphogenic proteins. BMP's promote mesenchymal (BMA) cells to differentiate into chondrocytes and osteoblasts that lead to bone formation. Preserved native BMP's provide for an unparalleled osteoactive grafting material.

Matrix OI® is processed using next-generation proprietary processing method that maintains the interconnected structure of trabecular bone in a manner that preserves native bone morphogenic proteins. It allows the clinician to hydrate it with the patient's own stem cells, BMA, growth factors, PRP, or with an antibiotic solution.

Matrix OI® is indicated for homologous use in cervical and lumbar spine, scoliosis, lateral gutters, orthopedics, bone voids, recon, CMF, non-unions, foot and ankle, and dental procedures. When hydrated, Matrix OI® is a compressible scaffold that will contour with the defect.

# **Biologics**

## Purgo THE Graft™ Natural Bone Graft







	I
BG-A15	0.25-1.0mm Porcine bone graft Qty. 0.15g Unit/Vol. ~ 0.36cc
BG-A25	0.25-1.0mm Porcine bone graft Qty. 0.25g Unit/Vol. ~ 0.60cc
BG-A05	0.25-1.0mm Porcine bone graft Qty. 0.50g Unit/Vol. ~ 1.20cc
BG-A10	0.25-1.0mm Porcine bone graft Qty. 1.00g Unit/Vol. ~ 2.40cc
BG-A20	0.25-1.0mm Porcine bone graft Qty. 2.00g Unit/Vol. ~ 4.80cc
BG-B05	1.00-2.00mm Porcine bone graft Qty. 0.50g Unit/Vol. ~ 1.80cc
BG-B10	1.00-2.00mm Porcine bone graft Qty. 1.00g Unit/Vol. ~ 3.60cc

THE Graft™ is a natural, porous bone mineral matrix. It is produced by removal of all organic components from porcine bone. Due to its natural structure the anorganic bone mineral of THE Graft™ likens physical and chemical aspects of mineralized matrix of human bone. When packed into a bone defect, THE Graft™ gradually resorbs and is replaced with bone during the healing process. It is available in cancellous granules packaged in vial. THE Graft™ is sterilized using gamma irradiation.

TG-AS25	0.25-1.0mm Porcine bone graft Qty. ~ 0.25cc
TG-AS05	0.25-1.0mm Porcine bone graft Qty. ~ 0.50cc
TG-AS10	0.25-1.0mm Porcine bone graft Qty. ~ 1.00cc
TG-BS25	1.00-2.00mm Porcine bone graft Qty. ~ 0.25cc
TG-BS05	1.00-2.00mm Porcine bone graft Qty. ~ 0.50cc
TG-BS10	1.00-2.00mm Porcine bone graft Qty. ~ 1.00cc

THE Graft™ quality and safety have been scientifically demonstrated with in-vitro, in-vivo studies, large case study reports and international randomized clinical research. Systematic review and meta-analysis are conducted on THE Graft™ worldwide. THE Graft™ has established its fame throughout the world, both scientifically and clinically, becoming the favourite bone regeneration material.

TCB-01	7 x 7 x 7mm ~ 0.34cc
TCB-02	8 x 9 x 10mm ~ 0.72cc
TCB-03	10 x 11 x 12mm ~ 1.32cc

THE Graft™ Collagen, a form of block and ring composed of the porcine-derived bone mineral matrix from cancellous bone and atelocollagen from porcine tendon, is a material used to fill, augment, and/or reconstruct periodontal, oral, and maxillofacial defects. The bone mineral matrix is similar to the physical and chemical aspects of the mineralized matrix of human bone. Hydrated collagen components have a viscosity that facilitates for the blending of a bone mineral matrix.

## Sutures MONOGLYC





Image	Item No.	Size	Needle	Thread length	Thread color	Resorption	Quantity
MONOGLYC	JCG61507	5/0	DSM 13 Premium (3/8)	70 cm	Violet	Fast	Box of 24 threads
	JCG65109	5/0	DSM 16 Premium (3/8)	45 cm	Violet	Fast	Box of 24 threads
The state of the s	JCG65116	4/0	DS 18 (needle 3/8 18 mm)	70 cm	Violet	Fast	Box of 24 threads
MONOGLYC Som BE (COSSES)	JCG65120	4/0	DS 18 (needle 3/8 18 mm)	45 cm	Violet	Fast	Box of 24 threads
	JCG65121	5/0	DS 18 (needle 3/8 18 mm)	45 cm	Violet	short term	Box of 24 threads
<b>⊠</b> → → → → → → → → → → → → → → → → → → →	JCG65122	5/0	DS 18 (needle 3/8 18 mm)	70 cm	Violet	short term	Box of 24 threads
The contract squared in the co	JCG65127	6/0	DSM 13 Premium (3/8)	45 cm	Violet	Fast	Box of 24 threads
	JCG61417	4/0	DS 21 (needle 3/8 21 mm)	70 cm	Violet	Fast	Box of 24 threads

# PRF DUO Quattro Centrifuge



The PRF centrifuge **DUO Quattro** has a «push» button that affords you to select between 6 different PRF protocols. The values of these settings are preset but not locked.



Simply push the button to select the desired mode of operation, the corresponding LED will light on. The machine is ready. Simply press the button to start the centrifugation.

In the event of an injury, the human body helps itself by producing proteins that accelerate wound healing. This process is used in the production of natural tissue - these proteins and growth factors are isolated from the patient's own blood by centrifugation and then used to accelerate healing.



#### **PRF STARTER System**

- 1 PRF DUO Quattro
- 100 A- tubesPRF
- 24 tubes S-PRF
- 24 samplers
- 1 PRF BoX
- 2 PomPac™
- 1 PomCol™
- 1 PomSwing pack
- 1 Polysteribox
- 1 Silicone mat
- 1 PRF Forceps
- 1 PRF GIRAFE forceps

- 1 PRF Scissors
- 1 PRF Pad
- 1 Cupule
- 1 Tray
- 1 Tube holder
- 1 Tourniquet
- 1 Compactor Big
- 1 Compactor Small
- 1 Mini tray
- 30 Bandages

Supplied with 100 safety pins and 50 sterilization labels

The treatment is completely natural and only 100% autologous material is used. This means that the tissue to be regenerated can be healed or even replaced without having to use additives such as anticoagulants.



### PRF PROFESSIONAL System

- 1 PRF DUO Quattro
- 100 A- tubesPRF
- 24 tubes S-PRF
- 24 samplers - 2 PRF BoX
- 2 PomPac™
- 1 PomCol™
- 2 PomSwing pack
- 2 Polysteribox
- 2 Silicone mat2 PRF Tweezers
- 2 PRF GIRAFE forceps

- 2 PRF Scissors
- 2 PRF Pad
- 2 Cups
- 2 Tray
- 2 Tube holder
- 2 Tourniquet
- 2 Compactor Big
- 2 Compactor Small
- 2 Mini tray
- 60 Bandages

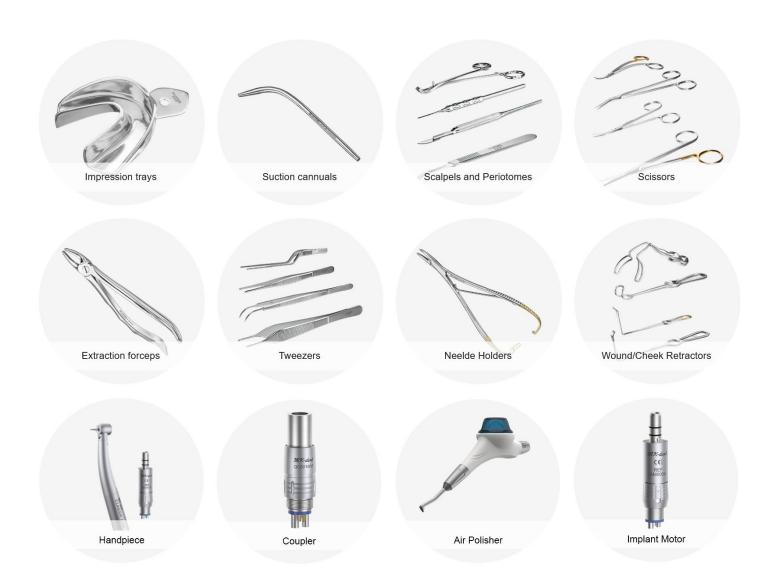
Supplied with 100 safety pins and 50 sterilization labels

Natural regeneration in a completely new form. The matrix obtained using the PRF (Platelet Rich Fibrin) method contains proteins and a particularly large number of white blood cells, in which important information on tissue structure is stored - a decisive advantage in the healing process of the tissue to be regenerated.

# **Tools**

# Surgical Instruments from Ustomed and Laschal Handpieces from mk-dent





# Ritter Surgical Kits & Tools

# Surgery





Many insertion tools/motor mounts are provided with a fixing mechanism to prevent loss of the temporary attachment and gingiva height markings in mm increments – for better orientation of the insertion depths.

# **Compact Surgical Kit**

Art. No. RIBUS-SE





#### Reason #23, 24, 25

This Compact Surgical Kit contains all basic tools and drills to place all Ritter SB/LA Implants and system components. The drill stop function is provided by stopper sleeves.

#23

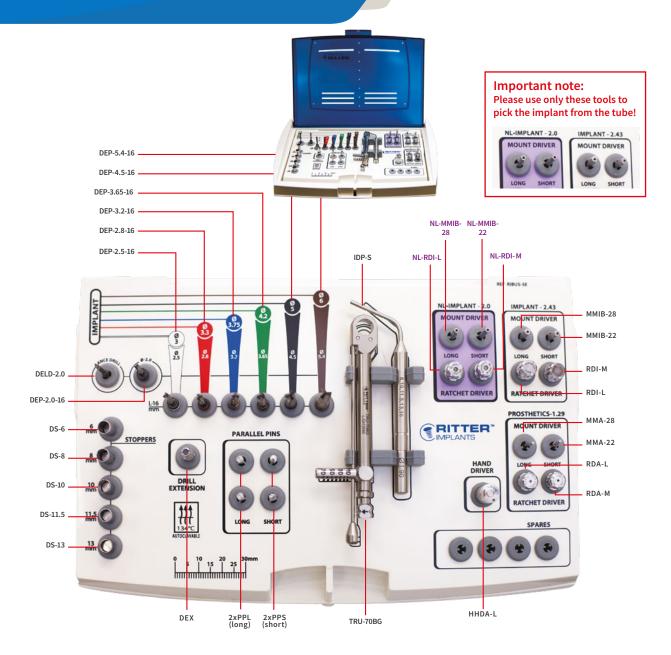
This is our Compact Kit and this kit is very similar to most Surgical kits on the Market. It comes with Limited amounts of Drills, one for each Implant Diameter (part # DEP). But unlike most – this kit comes with the tools to place both Ritter Platforms.

#24

In addition it contains Manually applied Drill Stoppers – most companies do not include (part #'s DS-6-13)

All placing tools are included – Motor Mount (MMIB) are for the Handpiece and Ratchet Driver (RDI) are for the included torque Ratchet (TRU-70BG)

The Kit also has prosthetic drivers for both the ratchet and the Handpiece – most companies force you to purchase an additional kit. #25



# Ritter Surgical Kits & Tools



# Complete Surgical Kit

Art. No. RIBEU-PE (Rev. 7.0)





#### Reason #26, 27, 28, 29

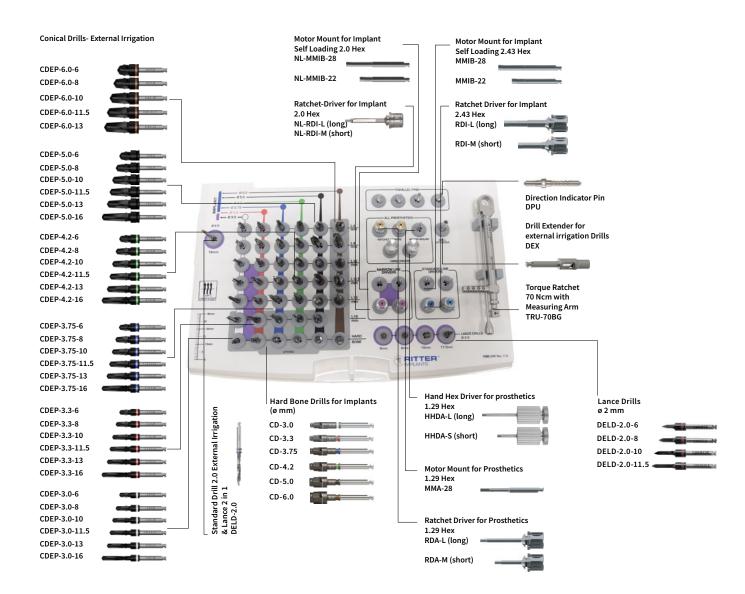
Our Complete surgical kit is second to no one. It contains all the items of the Compact Kit – except the **Stoppers are built into each drill** – there is a drill for every Implant we produce and more!

#26

This comes with our exclusive 3 in one – Starter/Marking/Lance Drill. #27

Along with all the special measuring and registration markings on all tools. #28

All Implant drivers are spring loaded - making it Impossible for an Implant to fall down a persons throat! #29



# Ritter Surgical Kits & Tools

#### **STANDARD LINE**



#### **NARROW LINE**



This guided system contains all the tools and drills necessary to perform a guided operation with all diameters except 6 mm, including narrow line. Class IIa (CE1023) Category









# **Guided Surgical Kit**

Art.-No. GSKIT (Rev. 2.2)





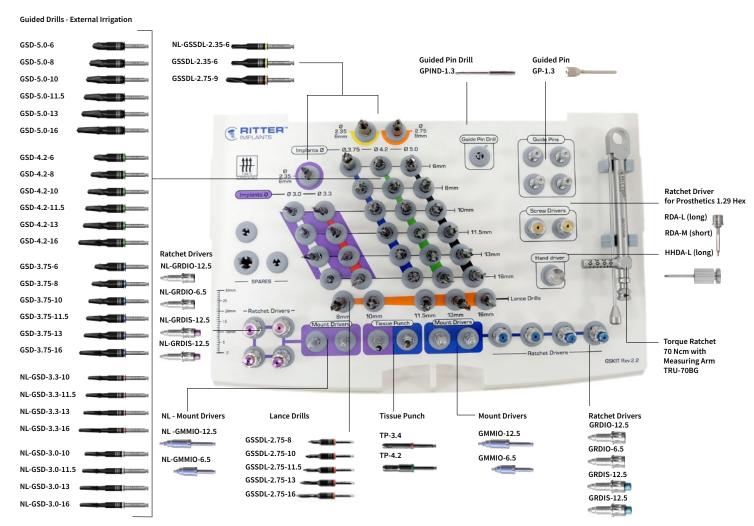
#### Reason #30, 31, 32, 33

The Guided Kit is one of the Best and Easiest on the Market. Most guided kits do not have a drill for every length and Diameter – Ritter Does! #30

Most Guided kits need to use spoons to change drill diameter - Ritter is spoonless! #31

Most Guided kits need metal sleeves in the guide because they guide the cutting portion of the Drill – Ritter guides the barrel of the drill and is sleeveless!

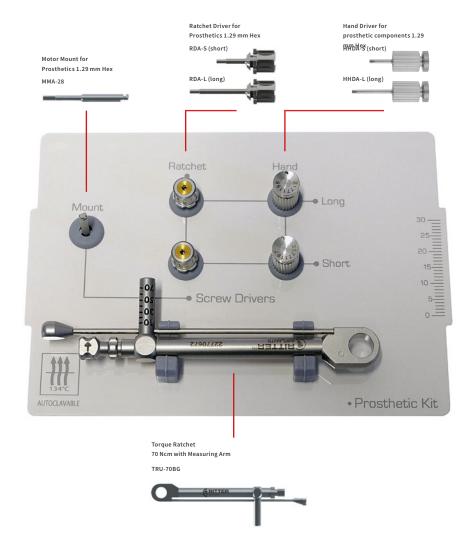
The Torque Ratchet has a simple screw to reverse the direction of turning. #33



# Laboratory/Prosthetics Kit complete

Art. No. RIB-PROS

The Laboratory Kit with all the necessary tools for prosthetics components.





Art. No. RI-PROS

# RIB-PROS Prosthetics Kit – components, individually reorderable

	Art. No.	Description
	HHDA-L	Hand Hex Driver for Prosthetics, Hex 1.29 mm, long
-	HHDA-S	Hand Hex Driver for Prosthetics, Hex 1.29 mm, short
	MMA-28	Motor Mount 28 mm L for Prosthetics, (for Hex 1.29 mm)
	RDA-S	Ratchet Driver for Prosthetics, short for Hex 1.29 mm
	RDA-L	Ratchet Driver for Prosthetics, long for Hex 1.29 mm
(1000)	TRU-70BG	70 Ncm Torque Ratchet with Measuring Arm

#### **RIBUS-SE Compact Surgical Kit** – components, individually reorderable

	Art. No.	Description
(C)	DEP-2.0-16	Standard Drill 2.0 mm D   16 mm L   External Irrigation
	DEP-2.5-16	Standard Drill 2.5 mm D   16 mm L   External Irrigation
	DEP-2.8-16	Standard Drill 2.8 mm D   16 mm L   External Irrigation
(0).	DEP-3.2-16	Standard Drill 3.2 mm D   16 mm L   External Irrigation
173,400 Dr	DEP-3.65-16	Standard Drill 3.65 mm D   16 mm L   External Irrigation
	DEP-4.5-16	Standard Drill 4.5 mm D   16 mm L   External Irrigation
0004	DEP-5.4-16	Standard Drill 5.4 mm D   16 mm L   External Irrigation
	DELD-2.0	Multi Purpose 2.0 Lance Starter Marking Drill
\(\sigma\)	DS-6	Drill Stopper 6 mm (Universal)
 	DS-8	Drill Stopper 8 mm (Universal)
0	DS-10	Drill Stopper 10 mm (Universal)
	DS-11.5	Drill Stopper 11.5 mm (Universal)
·	DS-13	Drill Stopper 13 mm (Universal)
	DEX	Drill Extension for External Irrigation Drill
	PPL	Parallel Pin Guide - 16 mm (long)
2-2-2-2-2-34	PPS	Parallel Pin Guide - 10 mm (short)
	HHDA-L	Hand Hex Driver for Prosthetics, Hex 1.25, long
	MMA-22	Motor Mount 22 mm L for Prosthetics, (for Hex 1.29)
	MMA-28	Motor Mount 28 mm L for Prosthetics, (for Hex 1.29)
	IDP-S	Implant Depth Probe - single end
	TRU-70BG	70 Ncm Torque Ratchet with Measuring Arm
	MMIB-22	Motor Mount 22 mm L for Implant (for Hex 2.43)
-	MMIB-28	Motor Mount 28 mm L for Implant (for Hex 2.43)





Art. No.	Description
RDA-M	Ratchet Driver for Prosthetics, medium for Hex 1.29 mm
RDA-L	Ratchet Driver for Prosthetics, long for Hex 1.29 mm
RDI-M	Ratchet Driver for Implant, medium for Hex 2.43 mm
RDI-L	Ratchet Driver for Implant, long for Hex 2.43 mm
 NL-MMIB-22	Motor Mount 22 mm L for Implant (for Hex 2.0 Narrow Line)
NL-MMIB-28	Motor Mount 28 mm L for Implant (for Hex 2.0 Narrow Line)
NL-RDI-M	Ratchet Driver for Implant, medium (for Hex 2.0 Narrow Line)
NL-RDI-L	Ratchet Driver for Implant, long (for Hex 2.0 Narrow Line)

### **RIBEU-PE** Complete Surgical Kit – components, individually reorderable

	Art. No.	Description
3.01.6	CDEP-3.0-6	Conical Drill 2.5 mm D   6 mm L   External Irrigation
3.01.8	CDEP-3.0-8	Conical Drill 2.5 mm D   8 mm L   External Irrigation
3.01.10	CDEP-3.0-10	Conical Drill 2.5 mm D   10 mm L   External Irrigation
3.011115	CDEP-3.0-11.5	Conical Drill 2.5 mm D   11.5 mm L   External Irrigation
3,01.13	CDEP-3.0-13	Conical Drill 2.5 mm D   13 mm L   External Irrigation
3,01.16	CDEP-3.0-16	Conical Drill 2.5 mm D   16 mm L   External Irrigation
3310	CDEP-3.3-6	Conical Drill 2.8 mm D   6 mm L   External Irrigation
	CDEP-3.3-8	Conical Drill 2.8 mm D   8 mm L   External Irrigation
3.3110	CDEP-3.3-10	Conical Drill 2.8 mm D   10 mm L   External Irrigation
-3.83 H I A.	CDEP-3.3-11.5	Conical Drill 2.8 mm D   11.5 mm L   External Irrigation
33113	CDEP-3.3-13	Conical Drill 2.8 mm D   13 mm L   External Irrigation
3.3 L16	CDEP-3.3-16	Conical Drill 2.8 mm D   16 mm L   External Irrigation
3.751.6	CDEP-3.75-6	Conical Drill 3.2 mm D   6 mm L   External Irrigation
3,751.8	CDEP-3.75-8	Conical Drill 3.2 mm D   8 mm L   External Irrigation
375100	CDEP-3.75-10	Conical Drill 3.2 mm D   10 mm L   External Irrigation
THE WASHINGTON	CDEP-3.75-11.5	Conical Drill 3.2 mm D   11.5 mm L   External Irrigation
THE STATE OF THE S	CDEP-3.75-13	Conical Drill 3.2 mm D   13 mm L   External Irrigation
3,751416	CDEP-3.75-16	Conical Drill 3.2 mm D   16 mm L   External Irrigation
1210	CDEP-4.2-6	Conical Drill 3.65 mm D   6 mm L   External Irrigation
4218	CDEP-4.2-8	Conical Drill 3.65 mm D   8 mm L   External Irrigation
4.21.10	CDEP-4.2-10	Conical Drill 3.65 mm D   10 mm L   External Irrigation
124P4B1B3	CDEP-4.2-11.5	Conical Drill 3.65 mm D   11.5 mm L   External Irrigation
12111	CDEP-4.2-13	Conical Drill 3.65 mm D   13 mm L   External Irrigation
421.16	CDEP-4.2-16	Conical Drill 3.65 mm D   16 mm L   External Irrigation
5.016	CDEP-5.0-6	Conical Drill 4.5 mm D   6 mm L   External Irrigation
	CDEP-5.0-8	Conical Drill 4.5 mm D   8 mm L   External Irrigation
5.01.10	CDEP-5.0-10	Conical Drill 4.5 mm D   10 mm L   External Irrigation
3.01115	CDEP-5.0-11.5	Conical Drill 4.5 mm D   11.5 mm L   External Irrigation
5,0113	CDEP-5.0-13	Conical Drill 4.5 mm D   13 mm L   External Irrigation
5.01.76	CDEP-5.0-16	Conical Drill 4.5 mm D   16 mm L   External Irrigation
6016	CDEP-6.0-6	Conical Drill 5.4 mm D   6 mm L   External Irrigation
	CDEP-6.0-8	Conical Drill 5.4 mm D   8 mm L   External Irrigation
60110	CDEP-6.0-10	Conical Drill 5.4 mm D   10 mm L   External Irrigation
601115	CDEP-6.0-11.5	Conical Drill 5.4 mm D   11.5 mm L   External Irrigation
	CDEP-6.0-13	Conical Drill 5.4 mm D   13 mm L   External Irrigation

	Art. No.	Description
	CD-3.0	Hardbone Drill
	CD-3.3	Hardbone Drill
100	CD-3.75	Hardbone Drill
	CD-4.2	Hardbone Drill
	CD-5.0	Hardbone Drill
-	CD-6.0	Hardbone Drill
- CONSTRUCTION   1020   1	DELD-2.0	Multi Purpose 2.0 Lance Starter Marking Drill
	DELD-2.0-6	Lance Drill 2.0 mm D   6 mm L (from Rev. 7.0)
	DELD-2.0-8	Lance Drill 2.0 mm D   8 mm L (from Rev. 7.0)
-	DELD-2.0-10	Lance Drill 2.0 mm D   10 mm L (from Rev. 7.0)
	DELD-2.0-11.5	Lance Drill 2.0 mm D   11.5 mm L (from Rev. 7.0)
Pi -	DEX	Drill Extension for External Irrigation Drill
	DPU	Direction Indicator Pin
	TRU-70BG	70 Ncm Torque Ratchet with Measuring Arm
	HHDA-L	Hand Hex Driver for Prosthetics, Hex 1.25, long
	HHDA-S	Hand Hex Driver for Prosthetics, Hex 1.25, short
	MMA-28	Motor Mount 28 mm L for Prosthetics, (for Hex 1.29)
	RDA-M	Ratchet Driver for Prosthetics, medium for Hex 1.29 mm
	RDA-L	Ratchet Driver for Prosthetics, long for Hex 1.29 mm
	MMIB-22	Motor Mount 22 mm L for Implant (for Hex 2.43)
	MMIB-28	Motor Mount 28 mm L for Implant (for Hex 2.43)
	RDI-M	Ratchet Driver for Implant, medium for Hex 2.43 mm
	RDI-L	Ratchet Driver for Implant, long for Hex 2.43 mm
	NL-MMIB-22	Motor Mount 22 mm L for Implant (for Hex 2.0 Narrow Line)
	NL-MMIB-28	Motor Mount 28 mm L for Implant (for Hex 2.0 Narrow Line)
	NL-RDI-M	Ratchet Driver for Implant, medium (for Hex 2.0 Narrow Line)
	NL-RDI-L	Ratchet Driver for Implant, long (for Hex 2.0 Narrow Line)

#### **GSKIT** Navigated Surgical Kit – components, individually reorderable

	Art. No.	Description
X7518	GSD-3.75-6	Guided Surgery Drill 3.75 mm D   6 mm L
- 17511	GSD-3.75-8	Guided Surgery Drill 3.75 mm D   8 mm L
	GSD-3.75-10	Guided Surgery Drill 3.75 mm D   10 mm L
THE REAL PROPERTY.	GSD-3.75-11.5	Guided Surgery Drill 3.75 mm D   11.5 mm L
3751115	GSD-3.75-13	Guided Surgery Drill 3.75 mm D   13 mm L
375110	GSD-3.75-16	Guided Surgery Drill 3.75 mm D   16 mm L
	GSD-4.2-6	Guided Surgery Drill 4.2 mm D   6 mm L
	GSD-4.2-8	Guided Surgery Drill 4.2 mm D   8 mm L
	GSD-4.2-10	Guided Surgery Drill 4.2 mm D   10 mm L
	GSD-4.2-11.5	Guided Surgery Drill 4.2 mm D   11.5 mm L
	GSD-4.2-13	Guided Surgery Drill 4.2 mm D   13 mm L
	GSD-4.2-16	Guided Surgery Drill 4.2 mm D   16 mm L
	GSD-5.0-6	Guided Surgery Drill 5.0 mm D   6 mm L
	GSD-5.0-8	Guided Surgery Drill 5.0 mm D   8 mm L
SU110	GSD-5.0-10	Guided Surgery Drill 5.0 mm D   10 mm L
	GSD-5.0-11.5	Guided Surgery Drill 5.0 mm D   11.5 mm L
	GSD-5.0-13	Guided Surgery Drill 5.0 mm D   13 mm L
- XIII-10 X	GSD-5.0-16	Guided Surgery Drill 5.0 mm D   16 mm L
10110	NL-GSD-3.0-10	Narrow Line, Guided Surgery Drill 3.0 mm D   10 mm L
	NL-GSD-3.0-11.5	Narrow Line, Guided Surgery Drill 3.0 mm D   11.5 mm L
	NL-GSD-3.0-13	Narrow Line, Guided Surgery Drill 3.0 mm D   13 mm L
	NL-GSD-3.0-16	Narrow Line, Guided Surgery Drill 3.0 mm D   16 mm L
	NL-GSD-3.3-10	Narrow Line, Guided Surgery Drill 3.3 mm D   10 mm L
	NL-GSD-3.3-11.5	Narrow Line, Guided Surgery Drill 3.3 mm D   11.5 mm L
	NL-GSD-3.3-13	Narrow Line, Guided Surgery Drill 3.3 mm D   13 mm L
	NL-GSD-3.3-16	Narrow Line, Guided Surgery Drill 3.3 mm D   16 mm L
07.3716	NL-GSSDL-2.35-6	Narrow Line, Guided Surgery Lance Starter Drill 2.35 mm D   6 mm L
02315	GSSDL-2.35-6	Guided Surgery Lance Starter Drill 2.35 mm D   6 mm L
The Codes 2 for an army	GSSDL-2.75-9	Guided Surgery Lance Starter Drill 2.75 mm D   9 mm L
3.0	CD-3.0	Hardbone Drill (only GSKIT Rev. 1.0)
	CD-3.3	Hardbone Drill (only GSKIT Rev. 1.0)
2.0	CD-3.75	Hardbone Drill (only GSKIT Rev. 1.0)
	CD-4.2	Hardbone Drill (only GSKIT Rev. 1.0)
700	CD-5.0	Hardbone Drill (only GSKIT Rev. 1.0)
<b></b>	GSSDL-2.75-8	Lance Drill 2.75 D   8 mm L (from GSKIT Rev. 2.2)
-	GSSDL-2.75-10	Lance Drill 2.75 D   10 mm L (from GSKIT Rev. 2.2)
	GSSDL-2.75-11.5	Lance Drill 2.75 D   11.5 mm L (from GSKIT Rev. 2.2)
	GSSDL-2.75-13	Lance Drill 2.75 D   13 mm L (from GSKIT Rev. 2.2)
	GSSDL-2.75-16	Lance Drill 2.75 D   16 mm L (from GSKIT Rev. 2.2)



#### Miscellaneous components

	DP-3.0	Direction Pins for 3.0 mm D Implant
	DP-3.3	Direction Pins for 3.3 mm D Implant
	DP-3.75	Direction Pins for 3.75 mm D Implant
	DP-4.2	Direction Pins for 4.2 mm D Implant
	DP-5.0	Direction Pins for 5.0 mm D Implant
	DP-6.0	Direction Pins for 6.0 mm D Implant
= 0	MM-ADP-7	Motor Mount Adapter with Ballfriction 7 mm
1.102.0	LD-2.0	Lance Drill 2.0 - 16 mm L

# **Drilling Protocols**





#### **Drilling Sequence**

# **Standard Platform**

Implant Diameter	3.75 mm	4.2 mm	5.0 mm	6.0 mm
Color Code	blue	green	black	brown
Previous of the regular drills with CDEP	1	2	3	4
Conical drill width CDEP	3.2 mm	3.2-3.65 mm	3.2-4.5 mm	3.2-5.4 mm
Final regular drill with max. depth / according to the length of the implant	3.2 mm	3.65 mm	4.5 mm	5.4 mm





For placement of all Implant diameters always use of Marking/Lance Drill DELD-2.0 is highly recommended





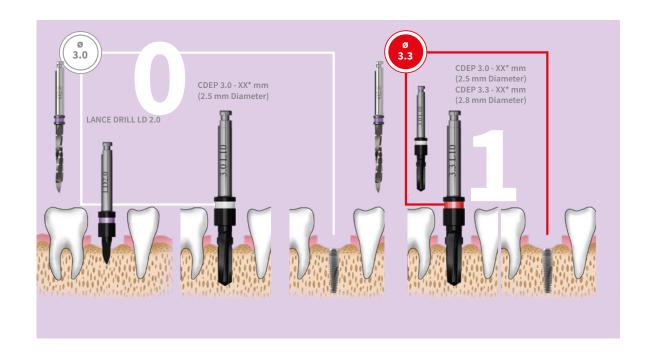
# **Drilling Protocols**

# Narrow Line 3.0 and 3.3 mm Platform

Implant Diameter	3.0 mm	3.3 mm
Color Code	white	red
Previous of the regular drills with CDEP	only Pilot- Drill LD 2.0	1
Conical Drill width CDEP		2.8 mm
Final regular drill with max. depth / according to the length of the implant	2.5 mm	2.8 mm



For placement of all Implant diameters always use of Marking/Lance Drill DELD-2.0 is highly recommended



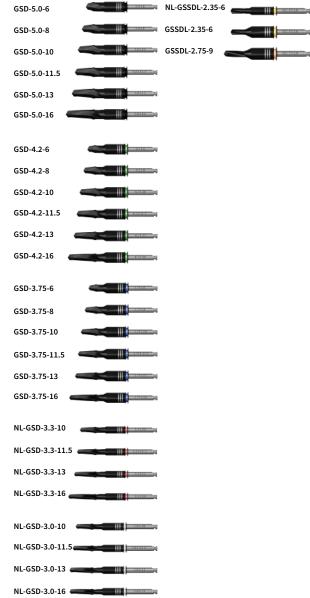
# **Drilling Sequence GS/Guided Kit**



#### Guided Protocol using Sleeves – Standard Platform & Narrow Line



		- ··· -	- ··· -	- ··· -	- ··· ·	l	
		Drill 1	Drill 2	Drill 3	Drill 4	Drill 5	Sleeve
Narrow Line							
NL-SNAP-3-10	SBLA - Narrow	NL-GSSDL-2.35-6	NL-GSD-3.0-10				TUBE4-35-5L
NL-SNAP-3-11.5	SBLA - Narrow	NL-GSSDL-2.35-6	NL-GSD-3.0-10	NL-GSD-3.0-11.5			TUBE4-35-5L
NL-SNAP-3-13	SBLA - Narrow	NL-GSSDL-2.35-6	NL-GSD-3.0-10	NL-GSD-3.0-13			TUBE4-35-5L
NL-SNAP-3-16	SBLA - Narrow	NL-GSSDL-2.35-6	NL-GSD-3.0-10	NL-GSD-3.0-13	NL-GSD-3.0-16		TUBE4-35-5L
NL-SNAP-3.3-10	SBLA - Narrow	NL-GSSDL-2.35-6	NL-GSD-3.0-10	NL-GSD-3.3-10			TUBE4-35-5L
NL-SNAP-3.3-11.5	SBLA - Narrow	NL-GSSDL-2.35-6	NL-GSD-3.0-10	NL-GSD-3.3-11.5			TUBE4-35-5L
NL-SNAP-3.3-13	SBLA - Narrow	NL-GSSDL-2.35-6	NL-GSD-3.0-10	NL-GSD-3.3-13			TUBE4-35-5L
NL-SNAP-3.3-16	SBLA - Narrow	NL-GSSDL-2.35-6	NL-GSD-3.0-10	NL-GSD-3.3-13	NL-GSD-3.0-16		TUBE4-35-5L
Standard Line							
SNAP-3.75-8	SBLA - Standard	GSSDL-2.35-6	GSD-3.75-8				TUBE516
SNAP-3.75-10	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-10			TUBE516
SNAP-3.75-11.5	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5			TUBE516
SNAP-3.75-13	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5	GSD-3.75-13		TUBE516
SNAP-3.75-16	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5	GSD-3.75-13	GSD-3.75-16	TUBE516
SNAP-4.2-8	SBLA - Standard	GSSDL-2.35-6	GSD-3.75-8	GSD-4.2-8			TUBE516
SNAP-4.2-10	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-10	GSD-4.2-10		TUBE516
SNAP-4.2-11.5	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5	GSD-4.2-11.5		TUBE516
SNAP-4.2-13	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5	GSD-4.2-13		TUBE516
SNAP-4.2-16	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5	GSD-4.2-13	GSD-4.2-16	TUBE516
SNAP-5-6	SBLA - Standard	GSSDL-2.35-6	GSD-3.75-6	GSD-4.2-6	GSD-5.0-6		TUBE516
SNAP-5-8	SBLA - Standard	GSSDL-2.35-6	GSD-3.75-8	GSD-4.2-8	GSD-5.0-8		TUBE516
SNAP-5-10	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-10	GSD-4.2-10	GSD-5.0-10	TUBE516
SNAP-5-11.5	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5	GSD-4.2-11.5	GSD-5.0-11.5	TUBE516
SNAP-5-13	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5	GSD-4.2-13	GSD-5.0-13	TUBE516
SNAP-5-16	SBLA - Standard	GSSDL-2.35-6	GSSDL-2.75-9	GSD-3.75-11.5	GSD-4.2-13	GSD-5.0-16	TUBE516



## Libraries

#### The Ritter Implants system is currently represented in the following libraries from these manufacturers:

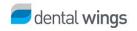
- 3Shape®
- Acteon®
- 3Diemme®
- Exocad®
- BlueSkyBio®
- Dental Wings®
- Dentique3D®
- Dentsply®
- EwooSoft®
- KODAK®
- Ondemand®
- Planmeca®
- ProDigiDent®
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#### 1. PICK YOUR IMPLANT SIZES

				5.0	6.0		
		3.75	4.2			6	
3.0 3.3	3.3					8	
						10	
						11.5	
						13	
						16	

WRITE AMOUNT IN EACH CELL



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