Intraoral Scanning With The Encode® Impression System
And The Cadent iTero™ System

Clinician Procedure

SURGEON

1. Select an Encode® Healing Abutment with the appropriate restorative platform diameter, Emergence Profile (EP®) and collar height.

   **Note:** Use tall Encode® Healing Abutments. The height of the abutment collar, not including the domed occlusal portion, should extend 2.0mm above the soft tissue (1.0mm minimum) on all sides for proper impressioning and subsequent scanning. Use wide Encode® Healing Abutments to ensure that the definitive abutment will seat easily without excessive blanching of the tissue.

   Place the Encode® Healing Abutments. Ensure that the Encode® Healing Abutments are fully seated on the implant with a radiograph. Encode® Healing Abutments have a two piece design. The body of the healing abutment engages the hex connection of the implant. Bone profiling may be required to fully seat the healing abutment. The Encode® Healing Abutment Screw should be torqued to 20Ncm using the Large Hex Driver Tip. Suture the tissue around the Encode® Healing Abutment and allow the tissue to completely heal.

SCANNING CLINICIAN

2. After tissue maturation, the Encode® Healing Abutment(s) is ready for digital impressioning. Ensure that the Encode® Healing Abutment(s) is fully seated on the implant with a radiograph. The height of the abutment collar, not including the domed occlusal portion, should extend 2.0mm above the soft tissue (1.0mm minimum) on all sides. Hand tighten the Encode® Healing Abutment(s) before impressioning.

3. Set up the prescription including as much information as possible about the abutments:
   a. Abutment material
   b. Abutment shape below the margin
   c. Abutment margin style
   d. Buccal or lingual margin preferences (1.0mm subgingival, flush or supragingival)
   e. Interocclusal clearance
   f. Screw ordering information
   g. Laboratory or clinician approval of image file/design
   h. If the prescription is filled out at the clinician’s office, the restoring laboratory’s name should be included.

4. Intraorally scan the Encode® Healing Abutment inside the patient’s mouth.

5. The scanning clinician or laboratory can fill out a PDF or electronic online version of the traditional Encode® Work Order Form. If the clinician fills out the Work Order Form, it will then need to be forwarded to the laboratory. The Work Order Form preparer should utilize the notes section within the prescription for any additional information required.

6. The case should then be sent electronically to Biomet3i® to design and mill the definitive abutment.

7. The definitive abutment should be sent to the restoring laboratory. The working model should also be sent to the laboratory from the scanning company.
RESTORATIVE CLINICIAN

8. The laboratory delivers the definitive Encode® Abutment, restoration, working model and any other case materials to the restorative clinician. Encode® Healing Abutments have a two piece design. First, remove the Encode® Healing Abutment Screw using the Large Hex Driver. The body of the Encode® Healing Abutment can then be removed by pulling it from the implant.

NOTE: Encode® Abutments and components are not sterile when delivered. Autoclave prior to patient use. Steam autoclave sterilize in a single pouch for 40 minutes at a temperature of 270°F (132°C).

Certain® Internal Connection: Activate the fingers on the Encode® Abutment using the QuickSeat® Activator Tool. Locate the tooth number on the buccal aspect of the abutment to orient the abutment position. Place the definitive Encode® Abutment into the implant, line up the hex and press until feeling the tactile click. Thread a Certain® Gold-Tite® Hexed Screw into the implant until finger-tight.

External Connection: Locate the tooth number on the buccal aspect of the abutment to orient the abutment position. Place the definitive Encode® Abutment onto the implant, engaging the hex. Thread a Square Gold-Tite® Screw into the implant until finger-tight. Radiograph the interface to verify an accurate fit.

NOTE: If there is not enough space to create a number, a line will be placed on the buccal surface of the definitive Encode® Abutment for orientation purposes.

9. Try in the restoration on the definitive Encode® Abutment and check the occlusion, marginal fit and interproximal contacts. Make adjustments as necessary.

Certain® Internal Connection: Torque the Certain® Gold-Tite® Screw to 20Ncm using the Large Hex Driver Tip and a torque device.

External Connection: Torque the Square Gold-Tite® Screw to 32 – 35Ncm using the Square Driver Tip and a torque device.

NOTE: The Contra Angle Torque Driver (CATD0/NCATD0) may inadvertently cause leverage with Zirconia Abutments causing fracture. The Low Torque Indicating Ratchet Wrench (L-TIRW) or the Restorative Torque Indicator (RTI) are recommended for use with Zirconia Abutments. Please see MKT407 for proper handling instructions of Encode® Zirconia Abutments.

10. Place a protective material over the screw head. Seal the access hole with temporary filling material. Cement the restoration on the definitive Encode® Abutment using a temporary or permanent cement.

Ask Your Surgeon To Place BIOMET® Implants And Encode® Healing Abutments!

Not Available In All Markets, Please Consult Your Local Sales Representative For Availability.