



## ***Case Submission Guide***

***YOU  
PICK  
WHATEVER  
YOU  
WANT.***

# Guide Planning with URIS Pylon System



## Versatile Restoration Options



ALL-ON-T Plus  
Custom  
MUA



Custom Healing  
Abutment



Custom Abutment



ALL-ON-T Custom  
MUA



T-L Custom  
Overdenture  
Abutment



ASC Angulated  
Screw Channel

## Guided Surgery Fixture and Kit

Connection	Ø	7.0mm	8.5mm	10.0mm	11.5mm	13.0mm	14.5mm
N Hex 1.95	3.0		●	●	●	●	●
	3.5		●	●	●	●	●
	4.0	●	●	●	●	●	●
R Hex 2.5	4.5	●	●	●	●	●	●
	5.0	●	●	●	●	●	●



Pylon Kit



Pylon Crestal Sinus Kit



Pylon Anchor Kit

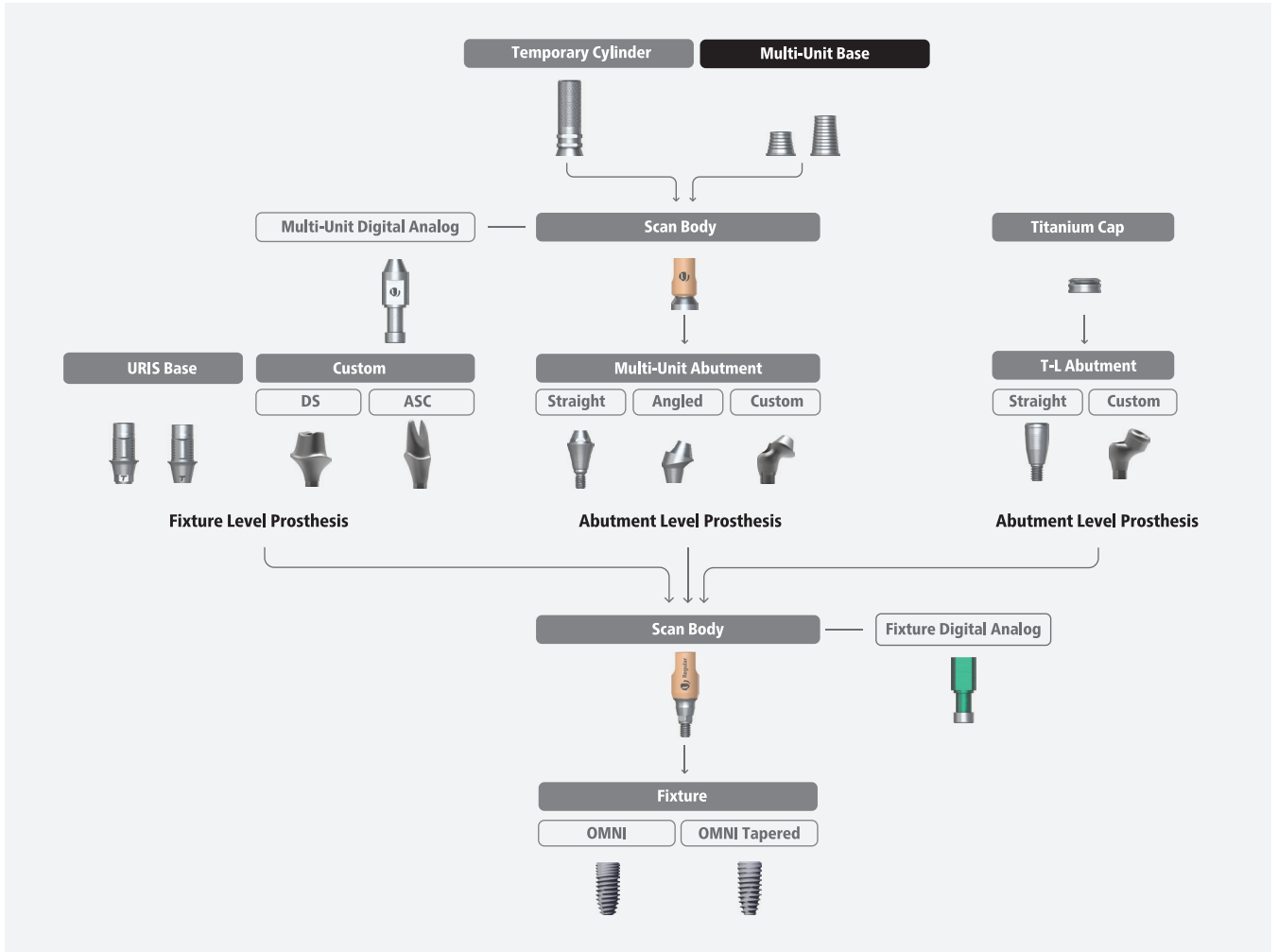


Tapered Pylon Kit

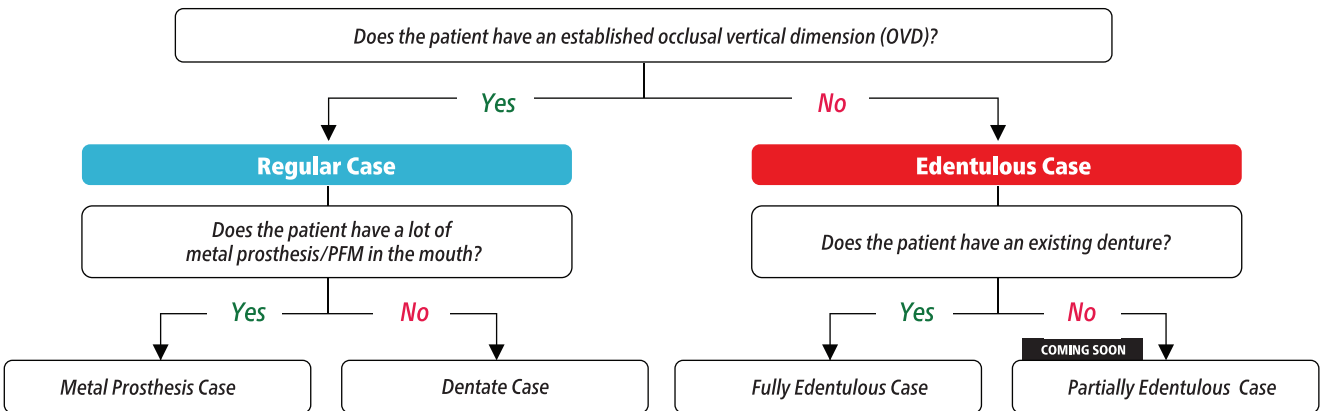


Pylon Plus Kit

# Digital Components Flow Chart



## Determine your Case Type



\*\* We currently do not accept stone models or impressions.

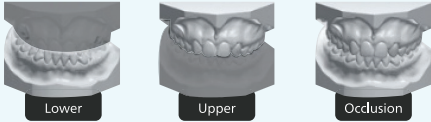
# Data Acquisition By Case Type

**TIP** ⚠ Please refer to the tip on the back.

## DENTATE CASE

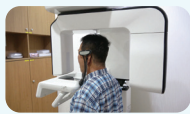


### 1 Clinician: Examination



Scan upper arch, lower arch and bite registration with an IOS.

### 2 Clinician: CBCT



Open-bite scan is required using bite stick.

+



Cotton rolls can be used to separate cheeks within vestibular.

3 > 4 > 5 > 6 > 7

## METAL PROSTHESIS CASE



### 1 Clinician: Examination

⚠ Metal prosthesis

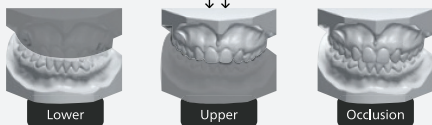


Attach markers to the occlusal surfaces needed.

Edentulous area



If teeth are missing consecutively, attach resin to gingival area.



Scan upper arch, lower arch and bite registration with an IOS.

### 2 Clinician: CBCT



Open-bite scan is required using bite stick.

+



Cotton rolls can be used to separate cheeks within vestibular.

3 > 4 > 5 > 6 > 7

## FULLY EDENTULOUS CASE

### 1 Clinician: Examination

Full Resin Denture Stone model + Wax Denture



Attach radiopaque markers or flow resins on the buccal side.



Green-Mousse®  
Classic VPS Bite  
Registration Material

Reline the inside of the existing denture or wax denture.

### 2 Clinician: CBCT (Dual Scan Protocol)



**Scan 1**  
Patient + Scan prosthesis + Bite index



**Scan 2**  
Scan prosthesis



If the bite is not stable, we recommend using impression material or bite index for more stability.



3 > 4 > 5 > 6 > 7

### 3 Clinician: Send files via Portal

- .stl and .ply files are acceptable for IOS scans.
- DICOM must be uploaded in zipped format.

### 4 Digital Center: Implant Planning

### 5 Clinician: TeamViewer / Confirmation

All communications regarding the case is done through email. Please make sure to put down your primary email address and check it regularly for timely processing.

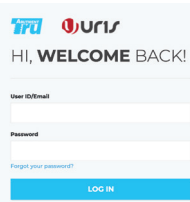
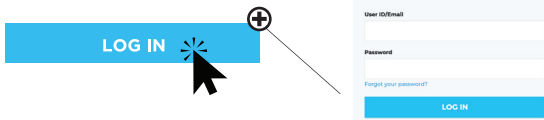
### 6 Digital Center: Production & Shipping

### 7 Clinician: Guide Surgery

# Ordering your first case

Log in to TruAbutment/Uriis Portal.

1



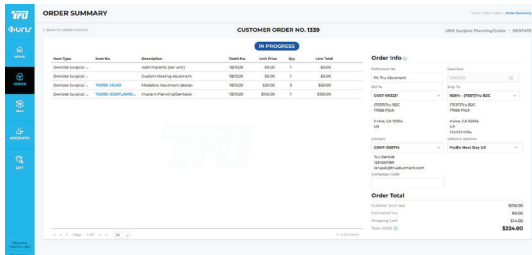
Select **implant position**, **restorative position**, and **extraction sites**. Also fill out the necessary treatment planning details.

3



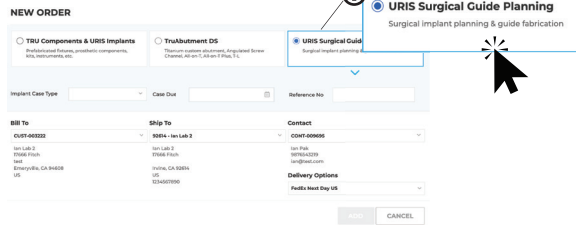
Review your order in your Order Summary page and click **"Submit"**.

5



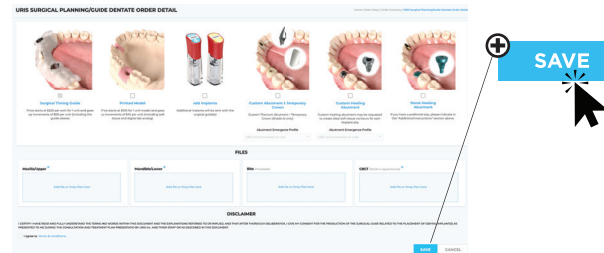
Select **"New Order"** and click on URIS Surgical Guide Planning. Choose your case type and click **"Add"**.

2



Select any order options you may wish to include with your order. **Upload** the scan files in the corresponding location then click **"Save"**.

4



6

Track your case progress by **checking the status**.

## Turnaround Time

For orders submitted and/or confirmed before 13:00 PST.

Day 1 Day 2 Day 3 Day 4 Day 5 Weekend 6 Day 7 Day 8 Day 9 Day 10 Weekend 11

Case Type	Order Description	Day 1	Day 2	Day 3	Day 4	Day 5	Weekend 6	Day 7	Day 8	Day 9	Day 10	Weekend 11
Regular case	Guide Only	✓					Shipping					
	Guide + Custom Abutment	✓	✓				Shipping					
	Guide + Custom Abutment + Crown	✓	✓	✓			Shipping					
Edentulous case	Guide Only	✓					Shipping					
	Guide + Custom Abutment	✓	✓				Shipping					
	Guide + Custom Abutment + Crown	✓	✓	✓			Shipping					Shipping

Confirmation

## TIP 1 CBCT Export Options

- Set of Single Frame DICOM Files
- Uncompressed
- Original Orientation
- No annotations

## TIP 2 Field of View Requirements

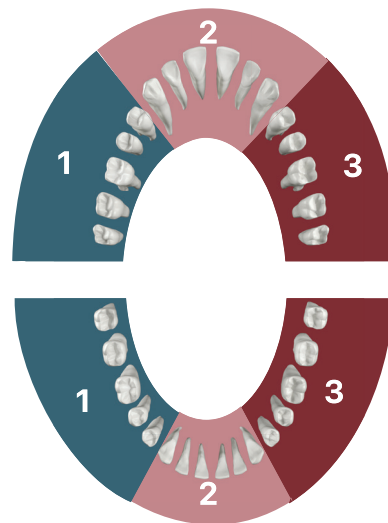
- Minimum 80 x100 mm is recommended
- 50 x 50 mm (¼ arch) is limited
- Anatomical structures must be scanned (Maxillary sinus, Mandibular nerve)



Minimum Medium  
(80 x100)

## TIP 3 How to use Radiopaque Markers

- Divide the arch into three segments and attach at least one marker in each segment containing any metal prosthetics.
- Layer the composite resin on the occlusal/incisal surface of the selected teeth until the desired size is achieved, lightly curing each layer intraorally.
- Size of the marker should be consistent and **2~4mm** (less than 5mm) in diameter and **4mm** in height.
- For prefabricated markers, use Histoacryl glue to attach on the metal prosthesis.



Ex



Tetric N-Flow



Suremark DentalMark



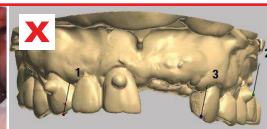
Radiopaque marker



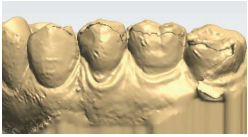
Histoacryl



**DO NOT** place the markers on the buccal surface as this will not be identifiable in the presence of artifacts.



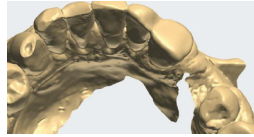
## TIP 4 Common Scan Issues



### Scan Distortion

Distorted scans may cause critical surgical guide seating issues.

Solution: Rescan the patient.



### Missing Scan

Missing scans in the implant site may prohibit drawing a proper surgical guide.

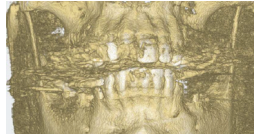
Solution: Thoroughly rescan the implant site.



### Closed bite

Occlusion is not separated obscuring occlusal reference information.

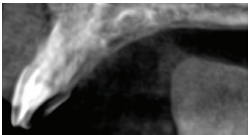
Solution: Have patient bite with cotton roll or bite index for open bite scan.



### Metal Artifact

Scatters appear in the presence of existing metal prosthetics obscuring matching points.

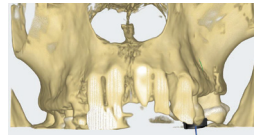
Solution: Rescan using radiopaque markers.



### Motion Artifact

Double anatomical borders due to patient movement during CT scanning.

Solution: Repeat the scan if patient movement is identified.



### Incomplete Scan

Scan has been prematurely cropped due to inaccurate F.O.V setting.

Solution: Double check F.O.V setting and rescan the patient.

## TIP 5 Relining Tips

Denture must be relined accurately to reach the full depth of the sulcus and to be stable on the mucosa.

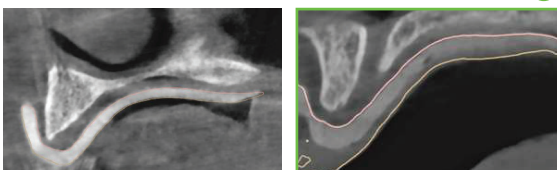
### ⚠ How to check if denture is properly relined and seated



Black air gaps should not be seen between the denture and soft tissue when reviewing the CT scan.

Solution: Reline properly and have patients slightly bite with cotton roll or bite index.

### ⚠ Have the patient locate the tongue at the back of the mouth. Otherwise, the tongue will obscure the data of external surface of the denture.



## TIP 6 Marker Positioning



Attach 3 markers on the buccal and extra 3 markers on the lingual / palatal surface.

## TIP 7 Dual Scanning Tips



1. The denture must be placed on top of the supporting material that is more radiolucent than the denture itself.

ex) Polyethylene or Polyurethane foam

2. Teeth occlusal should be oriented as the natural dentition.

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