

Restorative procedures



Universal BASE

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This document does not replace the Instructions For Use. Please review the Instructions For Use before using the products. For setup, validation, use, tools, maintenance, and lifetime information on scanners, ovens, and milling machines, please refer to manufacturer's instructions. Instructions For Use are available at:

ifu.nobelbiocare.com

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Equipment & requirements

The digital workflow requires the use of the following equipment

Scanner	TRIOS by 3Shape
Design software	3Shape Dental Designer (the Implant Libraries are obtained via the 3Shape server in the software)
Restorative material	Enamic by Vita
Milling unit	CORiTEC by imes-icore

Restorative design specifications for Universal Base

Parameter	Specification
Angle from axis of the implant	20° max.
Wall thickness circular	0.8 mm min.
Wall thickness margin	0.275 mm min.
Post height	5.2 mm min.
Maximum length, width and height	EM-14 blank 12x14x18 mm
	EM-10 blank 8x10x15 mm

Cementation requires the use of the following materials

Primer	Monobond Plus by Ivoclar Vivadent
Primer	Monobond Etch & Prime by Ivoclar Vivadent
Adhesive	Multilink Hybrid by Ivoclar Vivadent

Compatibility table

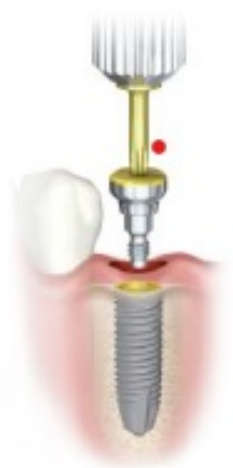
Abutment	Compatible implant system
Universal Base Abutment CC	NobelActive
	NobelParallel CC
	NobelReplace CC
Universal Base Abutment External Hex	Brånemark System
	NobelSpeedy Groovy

Digital workflow - Intraoral scanning (IOS)

Clinical procedure

1

Remove the cover screw, healing abutment or temporary restoration from the implant.



2

Select the appropriate Elos Accurate™ IO Scan Body and connect it to the implant in the patient's mouth and tighten it using the Scan Body Driver.



3

Take a digital impression of the Elos Accurate™ IO Scan Body and the surrounding teeth, following the intraoral scanner manufacturer's guidelines. Use a Nobel Biocare approved intraoral scanner.



4

After scanning, remove the Scan Body using the Scan Body Driver and re-connect the cover screw, healing abutment or temporary restoration to the implant.

5

Send the digital impression to the dental laboratory. Make sure to include the information about the Scan Body used as well as desired restoration material.

6

Import the scan into the CAD software. Ensure that the software library is updated with the latest 3D models by Nobel Biocare. A list of Nobel Biocare approved systems can be found at [nobelbiocare.com](https://www.nobelbiocare.com).

7

Once imported, open the relevant CAD module and design the restoration, selecting the appropriate Universal Base abutment and following the guidelines in the software tutorial. Make sure to respect the minimum dimensions of the restorative material.

8

Send designed data file to the in-lab milling machine (e.g. CORiTEC by imes-icore) by clicking on the order button in the software, following the instructions in the software tutorial.

Note The Universal Base abutment needs to be ordered separately.

Ensure that the milling machine is properly set up and validated and that it is maintained in good condition as instructed by the manufacturer. Follow the manufacturer's guidelines on the tooling for the specified restorative material.

9

Optional Print a 3D working model with soft tissue mask.

10

Insert the respective Elos Accurate™ Model Analog using the Elos Accurate™ Model Analog Tool.

11

Hand tighten the Universal Base abutment onto the Elos Accurate™ Model Analog. Make sure to use the Prosthetic Lab Screw.

12

Once the final restoration has been milled, finalize it according to standard laboratory procedures and material manufacturer's instructions.

**Preparation of the
Universal Base abutment**

13

To finalize the restoration, seal the screw channel with wax, sandblast the contact surface of the Universal Base Abutment with aluminium oxide 50 µm at a maximum of 2 bar.

Caution Do not sandblast the seating area. Use an implant replica to prevent any modifications of the abutment/ implant interface.



14

Clean the bonding surface using a steam jet. The cleaned bonding surface must not be contaminated, as this would impair the bond.

15

Condition the bonding surface of the Universal Base abutment by applying a primer to achieve a strong and durable bond. Let the primer react following the manufacturer's instructions.



**Preparation of
the crown**

16

Clean the crown with a steam jet or in an ultrasonic bath.



17

For hybrid ceramic: etch and condition the bonding surface of the crown applying hydrofluoric acid and a primer. Follow the manufacturer's instructions. Allow for sufficient reaction time. Dry with air free of water and oil.

Cementation

18

Seal the screw access hole of the Universal Base abutment with a thin layer of wax, making sure not to contaminate the bonding surface.

19

Apply a thin layer of the adhesive onto the bonding surfaces of the crown and the Universal Base abutment.



20

Connect the parts and press them lightly together making sure they are fully seated and in correct orientation to the abutment. Follow the cement manufacturer's instructions on curing/polymerization.

21

Remove the excess cement after curing/polymerization has started.

Note In order to prevent the formation of an inhibition layer, use a glycerine gel.



22

Remove any excess material from the screw channel carefully using a microbrush.

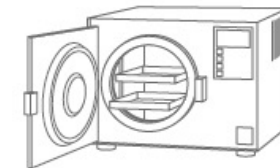
23

Polish the cementation joint carefully with rubber polisher and finalize the restoration.

Clinical procedure

24

Upon receiving the restoration clean and sterilize it following the instructions in Cleaning and Sterilization Guidelines section.



25

Remove the cover screw, healing abutment or temporary restoration from the implant.

26

Connect and tighten the final restoration to the implant.



27

Tighten the Universal Base abutment restoration to 35 Ncm using the Unigrip Screwdriver and Manual Torque Wrench Prosthetic.

Caution Never exceed 35 Ncm prosthetic tightening torque for the abutment screw. Overtightening of the abutment may lead to screw fracture.



28

Block out the screw head (e.g. with Teflon, gutta-percha, cotton, any permanent soft resin, etc.) before closing the screw access hole with composite. This ensures that no composite blocks access to the screw head, allowing easy removal of the restoration at any time.

29

Close the screw access hole using dental composite, adhering to the manufacturer's bonding and curing guidelines.



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