Osseodensification

Immediate Implant Placement*



- ATRAUMATIC TOOTH EXTRACTION WITHOUT OR MINIMAL FLAP REFLECTION.
- CHOOSE IMPLANT DIAMETER TO BE SLIGHTLY WIDER THAN THE TOOTH APEX.
- USE DENSAH[™] BURS IN FULL INCREMENTS AND CCW OSSEODENSIFICATION MODE.
- FINAL DENSAHTM BUR APICAL DIAMETER TO BE \geq TO THE APICAL DIAMETER OF TOOTH APEX.
- USE A WELL HYDRATED COMPOSITE ALLOGRAFT OF 70/30 CANCELLOUS//CORTICAL TO FILL THE SOCKET.
- USE DENSAH[™] BUR THAT IS ONE STEP SMALLER THAN THE LAST USED BUR TO DENSIFY ALLOGRAFT.
- IMPLANT STABILITY MUST BE MAINLY PROVIDED BY THE APICAL PORTION OF THE SOCKET.

Step 1:

After **atraumatic tooth extraction without or minimal flap reflection** and socket degranulation, use the pilot drill in clockwise mode to achieve implant trajectory.



Step 2a

Step 2a:

Choose implant diameter based on the tooth or its socket apical diameter. Implant needs to be slightly wider than the tooth apex. This will allow the **implant stability to be mainly provided by the apical portion of the socket.**

Step 2b:

Choose a Densah[™] Bur to be the last preparation bur based on its diameter relative to the tooth or its socket apical diameter. **Final Densah[™] Bur needs to be ≥ to the apical diameter of the tooth or its socket.**

Step 3:

Use Densah[™] Burs in full increments, depending upon the implant type and diameter. After the pilot osteotomy, change the surgical motor to Densifying Mode (ccw, 800-1500 rpm with copious irrigation). To prep the site, start with the narrowest Densah[™] Bur, in OD Mode, until reaching the desired depth (begin by introducing the running bur into the osteotomy.) When feeling the haptic feedback of the bur pushing up out of the osteotomy, lift off and reapply pressure with a pumping motion until reaching the desired depth. Step 3



We believe innovative medical technology must be biologically viable and able to translate to predictable and reproducible procedures.





Use the following wider Densah[™] Burs until reaching the designated bur in Step 2B. As the bur diameter increases, the apical bone will slowly expand to accommodate the designated implant diameter.

Step 4:

Loosely fill the osteotomy with well hydrated allograft in the socket. Allograft preferably to be a combination of 70/30 cancellous/cortical.



Step 5:

Densified allograft may enhance implant primary stability in the extraction socket. **Use the Densah™ Bur that is one step smaller than the last bur used in socket preparation.** Use the bur in **ccw direction, low speed 150-200 rpm with no irrigation** to densify the allograft laterally into the socket walls. Follow the same implant preparation trajectory.



Step 6:

Place the implant. Using the surgical motor to tap the implant into place, the unit may stop when reaching the placement torque maximum. Finish placing the implant to depth manually with a torque indicating wrench.





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