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All On X Cases – nSequence® Guided Prosthetics™

Posted on Nov 8, 2013

 [All On X Cases – nSequence® Guided Prosthetics™](#)

(PATENTS PENDING)

Full arch reconstruction: Implant Placement and Immediate Provisionalization

All on X cases are meticulously designed cases with the purpose of providing the patient with excellently placed implants and an immediate load bridge. These cases can consist of 4-8 implants per arch, depending on situation and desired outcome, hence the title aptly named "All On X". In some situations, immediate load may not be ideal due to patient's poor bone quality or the necessity

to graft additional bone in order to ideally place implants in proper bone. Immediate provisionalization will consist of PMMA bridge with built in titanium support bar. The bridge will have holes with the position of the implant trajectories so that implants could easily

Case condition requirements for implant placement and immediate load:

1. Initial stability of all implants at or more than manufacturer's recommended newton centimeters of torque value
2. Implants are not within compromised bone health such as infections or immediate extractions

 Exception: If bone reduction level is well past the infection or immediate extractions so that majority of implant is placed within healthy native bone

3. Patient must be able to accommodate at least 16mm of vertical from implant platform to incisal edge of new prosthetic design. This can be done by opening the bite or reducing the bone until the required vertical space is met.

 Doing All On X cases with nSequence can drastically improve chairtime and cost. Current record is timed at 1 hour 25 minutes for bone reduction, 5 implants surgery, and immediate provisionalization.

Steps for surgery to provisionalization

[CT Guided Scan Protocol](#)

[All on 4, 5, 6 Information](#)

Records

It is important for the clinician to prepare the laboratory with sufficient records. The key to having good results is the attention to detail at this step of the process.



Frontal views: Initial smile, up-right smile, and reduced smile

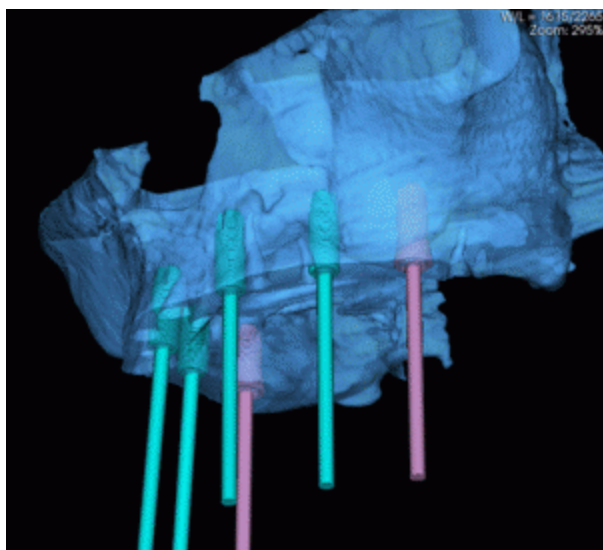


Lateral & frontal views: Patient right, frontal view smiling, and patient left



Close-up views: Close-up angled patient right, close-up angled reduced smile, and close-up angled patient left

- **Scan** – Ensure that CBCT scan is performed at a range of 0.2 – 0.3 voxels, as large of field of view as possible, and approximate scan duration of 15-30 seconds (settings vary per CBCT scanner). Scan appliance or RRD must be used to achieve optimal results. **Download an print scan protocol above.** Make sure patient did not move and did not wear metal or jewelry (is possible) during the scan.
- **Online RX/Lab slip** – Complete the online RX for optimal case processing. Please complete form to as much detail as possible pertaining to the treatment plan.
- **Impressions** – Partially edentulous cases will require VPS impressions to be taken. Make sure there are no distortions, pulls, tears, and air bubbles.
- **Digital Photographs** – Photos are used to analyze the patient's esthetics and function. We analyze lip line, smile line, curves (Spee/Wilson), classification of occlusion, symmetry, and much more. Without photos, we would be blind to how the patient presents!
- **Bites** – Some of the biggest difficulties in dentistry are bites. Bites must be taken in such a way that the dental lab can also mount. DO NOT USE WAX BITES. Wax bite block rims are okay as long as Blu-Mousse® type bites are taken in conjunction with the bite block wax rims. If there are long spans of edentulous areas such as free-end distal extensions or missing anteriors, please apply enough material to stabilize bite. Remember that we do not have the patients' jaws so we must rely on the bite taken by your office to mount the case. If you're still having trouble, feel free to give us a call!



Planning

Once the records are received and processed, highly experienced nSequence technicians will pre plan your case according to the submitted RX. We will follow your written submitted RX as long as the case allows it. If there are any issues or concerns, proper communication of the case will be discussed with the doctor. Final planning will always be approved by licensed doctor overseeing the case. **Please refer to our Guided Surgery page for more information about guided surgery.**

The following issues will be addressed at time of planning:

- Feasible prosthetic outcome
- Required vertical dimension
- Bone reduction requirements (if any)
- Surgical implant planning
- Order verification for what is required to be fabricated for case (guides, models, provisional, immediate denture, etc.)

It is highly recommended for large cases like All on 4, 5, or 6 with immediate provisionalization that a fully guided surgical system is used. Please refer to our guided surgery page for more information.

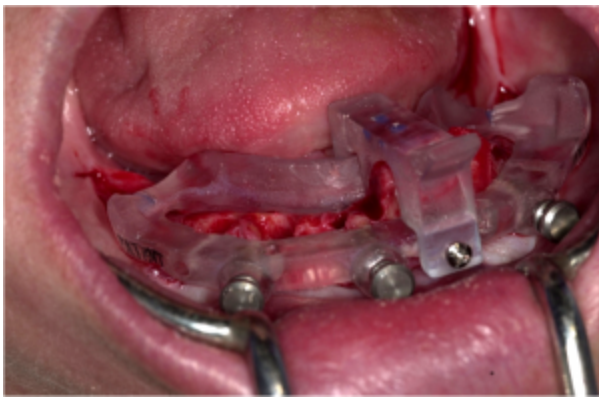
Surgery

By the time of surgery, virtually all issues, concerns, and potential problems are addressed. nSequence performs extreme quality control and assurance on all surgical components, prosthetics, and reports to ensure a smooth surgery. Everything planned virtually is made physically by advanced manufacturing processes. The fabricated components are then delivered to the clinician with everything ready to be sterilized before surgery.

Note: All components described below are patented by nSequence and unauthorized use of the patent or fabrication of products are prohibited.

nSequence® Guided Prosthetics™ [patent #61/784,029, #61/800,987]

The ‘Bone Foundation Guide’ is a comprehensive solution for the “All on 4 or more” fixed hybrid technique that eliminates the arduous freehand denture conversion process during implant surgery. The nSq Guided Prosthetic system utilizes a unique surgical and prosthetic approach for bone reduction, surgical guide, and long term provisional or final prosthetic at time of implant surgery. The patented stackable system consists of the bone reduction guide, surgical guide, prosthetic positioning jig, and long-term provisional or final prosthetics.



Bone reduction with bone reduced

Bone Reduction

The bone reduction guide allows easy leveling of the plane for proper vertical height of the “implant table”. The reduction guide is designed with three fixation positions and at least three landing areas for optimal stability and support. The key here is to make sure the bone reduction seats properly on bone. The rest of the case hinges on the fit of this guide on to the bone. A bite against the opposing may also be created to confirm positioning of reduction guide.



Implant placement through surgical guide – bone foundation guide method

Implant Surgical Guide

The implant surgical guide is then stacked on the bone reduction (bone foundation guide). The two fit together like Lego pieces and are secured by counter-shaping mating components. Optimal accuracy and stability is established by having one solid common foundation; which in this method, the bone foundation guide.

Terminally Dentate to Immediate Provisionalization

 [Bridges are picked up with conical abutments and temporary cylinders day of surgery.](#)

Bridges are picked up with conical abutments and temporary cylinders day of surgery.

 [Provisionals while healing 3 weeks later](#)

Provisionals while healing 3 weeks later

 [Patient is happily enjoying their new teeth at 3-weeks post op.](#)

Patient is happily enjoying their new teeth at 3-weeks post op.

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What a great pleasure it has been to work with nSequence. I have been pampered with their knowledge and expertise for the past 4 years. Their quality ...

– [Dr Rodrigo Romano](#), Periodontist, South Miami, Florida

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