

LIFECORE TECHNICAL INFORMATION

UCLA Gold/Plastic Sleeve Abutment System

Available in hexed and non-hexed for Small Diameter (SD), Regular Diameter (RD), and Wide Diameter (WD).



*Small Diameter (SD)
For 3.3 and 3.4mm Diameter Implants*



*Regular Diameter (RD)
For 3.75, 4.0 and 4.2mm Diameter Implants*



*Wide Diameter (WD)
For 5.0, 5.5 and 6.0mm Diameter Implants*

Features:

- Provides the precision fit of a machined interface with the convenience of a plastic castable sleeve.
- Added geometry to the plastic chimney for improved retention of wax.
- 1mm grooves assist in reducing the height.
- Option of gold or titanium screws.
- Color-coded red (hexed) and white (non-hexed) for easy identification.
- SD, RD, and WD are molded into each plastic chimney for easy identification.

Used for:

- Single or multiple unit crown and bridge restorations.
- Bar-supported overdenture restorations.
- Custom abutments.

SPECIFICATIONS

Gold Specs:

- 60% Gold, 20% Palladium, 19% Platinum, and 1% Iridium (**not a ceramic alloy**)

Melting Range:

- **Solidus:** 2552 F (1400 C) – **Liquidus:** 2714 F (1490 C)

Recommended Casting Alloys:

- High palladium or high noble porcelain fusing alloys.
- Type III or Type IV high noble dental alloys.
- A phosphate investment is recommended.
- **Nonprecious alloys are not recommended!**

Recommended Casting Procedure:

- Follow casting and burnout instructions as recommended by the dental alloy manufacturer.

PROCEDURE



UCLA Aesthetic Contour (AC)
Impression Post

Lifecore's innovative three-piece impression post design facilitates registration of highly accurate impressions using either the open (direct) or closed (indirect) tray techniques. The efficient design of these impression posts offers enhanced clinical versatility, while minimizing the number of components needed. These UCLA impression posts are available in the AC (aesthetic contour) diameters which correspond to the diameter of the healing abutments.

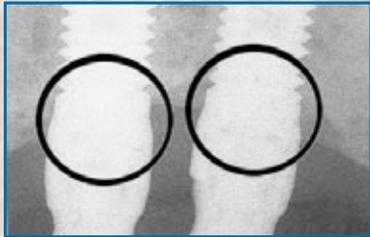
Each package includes a dual purpose impression post body, plus a long and short screw. The long screw is designed for use with the open tray technique and the short flush screw for the closed tray technique. Use a polyvinyl or polyether impression material. Always take a full arch impression. Custom impression trays are recommended. The recommended procedure for each technique is as follows:

IMPRESSION: *Open Tray Technique*

1. Try-in the impression tray. The top of the tray must be cut out in the areas opposing the implants, allowing the long impression post screw to protrude through.
2. Remove the healing abutment. Insert the long impression post retaining screw into the body of the impression post, placing the female end of the impression post over the male hex of the implant. Begin threading the retaining screw into the implant just enough for the threads to engage. With your fingers or cotton pliers, rotate the body of the impression post until it drops down over the hex of the implant. While holding the impression post body in place, tighten the retaining screw with light finger pressure.
3. Take an x-ray to verify the impression post is completely seated on the implant. The x-ray tube must be perpendicular to the impression post/implant junction or the image will be distorted.
4. Try-in the tray with the impression post in place. The retaining screws should protrude through the tray at least 2-3mm (A). Apply a sheet of wax to the opening in the tray (B). This will prevent the impression materials from flowing out of the tray.



5. Carefully syringe impression material around the retention grooves of the impression post body and leave the upper portion of the long screw exposed, ensuring at least 2mm of the screw is free of material.
6. Load the impression tray and completely seat the tray. Wipe off material on the head of the screws before the material sets.
7. After the impression material sets, unscrew the impression post retaining screws and remove the tray. Evaluate for accuracy, check for any voids and make sure the body of the impression posts is locked into the impression material. Send impressions, bite registrations, etc., to the laboratory for model fabrication.
8. Replace healing abutments. Secure them tightly into place. A 20 Ncm torque wrench works well for this.



IMPRESSION: Closed Tray Technique

1. Remove healing abutment. Insert the short retaining screw into the body of the impression post. Place the female hex end of the impression post over the male hex of the implant. Begin threading the retaining screw into the implant just enough for the threads to engage. With your fingers or cotton pliers, rotate the body of the impression post until it drops down over the hex of the implant. While holding the impression post body in place, tighten the retaining screw with light finger pressure.
2. Take an x-ray to verify that the impression post is completely seated.
3. Try-in the tray with the impression post in place.
4. Before taking the impression, block out the hex in the retaining screw at the top of the impression post with wax (A). Carefully syringe material around the retention grooves of the impression post body and completely cover with impression material (B).
5. After impressing, remove the impression post from the implant and assemble it on an implant analog. Fully reinsert the impression post in the impression, taking care to align the flats. Send impressions, etc., to the laboratory.
6. Replace healing abutments.



Note: If the body of the impression post doesn't rotate, it may already be seated or the retaining screw may be too tight.

Note: The x-ray tube must be perpendicular to the impression post/implant junction or the image will be distorted.



Pouring Procedure:

Once the impression is inspected for accuracy and the analogs are in place, the model is ready to be poured. Pour the impression in the appropriate stone. If the open tray technique was used, the impression post screw must be unscrewed before releasing the tray from the model.



Note: In an impression where the implant or abutment is subgingival, a soft tissue model is recommended (refer to pictures above).



Temporary Restoration:

A temporary restoration may be fabricated using Lifecore's Titanium Temporary Abutments. Acrylic or composite is applied to the titanium sleeves either directly in the mouth or fabricated in the dental laboratory.

Waxing Procedure

- Place the UCLA sleeve on top of the analog in the model and secure it with either a gold or titanium abutment screw.
- If necessary, shorten the plastic chimney so there is approximately 2mm of clearance with the opposing dentition. An acrylic bur or coarse rubber wheel works well for shortening the chimney.
- Once the correct occlusal height is achieved, proceed with conventional crown and bridge waxing procedures. When waxing a bridge, it works well to use G/C Resin®, Duralay®, or equivalent material for the initial understructure of the wax-up. Clean the gold interface portion of the wax-up using a Q-tip w/wax solvent.
- After the wax-up is completed, sprue using either the direct or indirect technique. Position the chimney perpendicular to the base of the ring.





Investing Procedure:

- Use a fine grain phosphate investment and follow the recommendations of the manufacturer for liquid/water/powder ratios, mixing times, etc.
- When casting to gold, do not use a debubbler. As an alternative, rinse off the wax-up with clean water and blow dry with oil-free air.
- Pour the investment into the ring very slowly on a vibrator. Watch for the investment to flow up through the screw access hole.
- After completion of the investing, it is helpful to put the ring in a pressure pot under 15 - 30 psi. This will ensure that there will be no bubbles on the casting.



Burnout and Casting:

- Follow the manufacturer's recommendations.

Devesting:

- When devesting, do not sandblast. A chemical devestor such as EZ Strip® from California Dental Products is recommended. Sandblasting will remove material and destroy pre-machined precision fit.

Soldering Procedure:

- The framework should seat passively and be carefully verified. Radiographs may be required. If the framework does not seat properly, it must be cut and soldered. Using a waxing pin, attach the analogs to the restoration and incorporate these into the soldering investment to help stabilize the framework.

All Lifecore analogs are made of stainless steel and may be used during soldering process.

Porcelain:

- Porcelain application is the same as conventional crown and bridge. Be careful not to apply porcelain into the screw access hole or onto the implant interface.

Attempts to tighten screws by hand may lead to screw loosening problems resulting in inconveniencing the patient and loss of valuable chair time.

Any shortening needs to occur on the flat end.

Final Seating:

- It is recommended that the final restoration be placed using a 30Ncm torque wrench (A). This will help eliminate screw loosening and will enable consistent delivery of optimal screw tightness in any area of the mouth.
- All Lifecore UCLA Abutments include an occlusal plug. The concave end of the plug is placed towards the occlusal (B). After shortening, (leave approximately 1-2mm of space for composite), place the plug in the occlusal access hole, and fill the top portion of the plug with composite (C).



For technical assistance, contact Technical Support at 800-752-2663 or 612-368-4300 (outside the U.S.)



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