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DENTAL IMPLANT INSTRUMENTS N

SINUS LIFT INSTRUMENTS

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CRESTAL SINUS OSTEOTOMES/DRILLS, LATERAL SINUS ELEVATORS / DRILLS, AQUA HYDRAULIC SINUS LIFTER. BONE GRAFTING INSTRUMENTS.

RIDGE AUGMENTATION INSTRUMENTS

RIDGE SPLITTING CHISELS, MALLET, BONE D-SHAPED SPREADERS, BONE EXPANSION SCREWS, TOCHA, RIDGE CUTTING DISC/SAW, RIDGE CONTOURING/FLATTENING BURS

HARD AND SOFT TISUE HANDLING INSTRUMENTS

BONE TACKS / TENTING SCREW KIT, GUIDED BONE REGENERATION KIT, TITANIUM MESHES, PRF KIT, PRF INSTRUMENTS, SOFT BRUSHING KIT, VISTA TUNNELING KIT, AUTO CHIP MAKER BONE COLLECTOR, BONE MILL, BONE SCRAPER.

IMPLANT HAND INSTRUMENTS

PERIOSTALS, PERIO-KNIVES, PERIO-FILES, BONE CURETTES, COMPOSITE KIT, GRACEY CURETTES. PERIOTOMES, LUXATORS, TWIST ELEVATORS, SCALPEL HANDLE 180*-320*, ROOT PIECE EXTRACTION INSTRUMENTS, ATRAUMATIC EXTRACTION FORCEPS. CROWN REMOVER, IMPLANT IMPRESSION TRAY, RIDGE MAPPING CALIPERS.

IMPLANT GUIDES

PARALLEL DRILLING GUIDE PINS, CENTERING GUIDE KIT. ALL ON 4 GUIDE, MESIO DISTAL GUIDANCE SYSTEM, MESIO DISTAL IMPLANT SURGICAL GUIDE.

RETRACTORS

MINNESOTA, VESTIBULUM RETRACTOR, ORRINGER RETRACTOR, TONGUE CHEEK & LIP RETRACTORS.

SOCKET SHIELD PARTIAL EXTRACTION THERAPY LONG SHANK SOCKET SHIELD BUR, PARTIAL EXTRACTION KIT FROM KOMET MEDICAL, SOCKET SHELD RETRACTOR C TYPE DEISGN/DR. UDATTA KHER DESIGN.

JULE SURGICAL INSTRUMENTS

SCISSORS, NEEDLE HOLDERS, SCALPEL HANDLES, TISSUE FORCEPS, AUTOCLAVABLE CASSETTES.

HELEDEN'T

THE E-PERSON

JULI TOPENT

DRILLS SETS

TREPHINE DRILL SET OF 6, TISSLE PUNCH SET OF 3

JULL-DENT JULLUNDUR SURGICAL WORKS

Manufacturers of Dental Implantology Instruments

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JULLUNDUR SURGICAL WORKS PRECISION DENTAL, IMPLANT INSTRUMENTS

BEST QUALITY INSTRUMENTS AT LEAST POSSIBLE PRICE

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OSTEOTOMES CONCAVE OFFSET



CONCAVE OSTEOTOMES STRAIGHT



CONVEX OSTEOTOMES OFFSET



CONVEX OSTEOTOMES STRAIGHT



SIMPLE SINUS CRESTAL REAMER KIT (CAS KIT)

Simple and economic set composed of the dedicated reamer for the sinus crestal crestal approach surgery. Reasonable and economic due to the mini kit consisting of essential components. Safely and rapidly lifts the sinus membrane while drilling, Unique Stopper system that prevents over drilling into the sinus cavity, Hydraulic Lift System that easily & safely lifts the membrane.

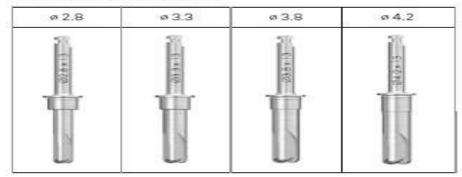
Crestal Approach Sinus KIT is specifically designed to easily and safely lift the membrane in the maxillary sinus from a crestal approach. The unique design of the CAS-Drill enhances convenience and safety of maxillary sinus surgery by; safely lifting the membrane while drilling, precision cutting, flexible cutting speed from low to high speed (800rpm), formation of conical shaped bone chip, generation of bone particles, smooth & stable insertion, easy path correction and septum surgery.

SINUS REAMER Ø2.8, Ø3.3, Ø3.8, Ø4.2 STOPPER SET(1mm, 2mm, 3mm, 4mm, 5mm) DRILL BOX



CRESTAL APPROACH SINUS DRILL

- Comes in diameters: Ø 2.8 / Ø 3.3 / Ø 3.8 / Ø 4.2
- · Allows a 13mm Fixture to be implanted
- Drilling is dependent upon the fixture diameter and the how far the fixture protrudes into the maxillary cavity.
- Drilling speed ranges from low speed to high speed (800rpm)
 Experienced: 800rpm; Beginner: 400 to 600rpm is recommended (Water Infusion + Pumping)
- Unique Stopper system



In addition, bone particles generated when drilling discharge upwards producing a Membrane Auto-Lift function.



Bone particles formation between the cutting blades





The atraumatic design of the drill tip allows the user to perform sinus surgery even if the sinus floor is flat, incline, or septum.

It's design forms conical bone and bone chips.

The Drill tip has an inverse conical shape.

This shape will form a conical bone chip when drilling, which assists with safely lifting the membrane.







Stopper System

- · Labels indicate the remaining length of the drill (from drill tip to stopper top)
- Each stopper is anodized and color coded. Labels are laser etched.











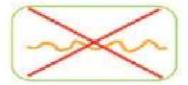


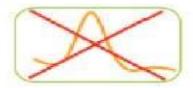


HYDRAULIC SINUS LIFTER / AQUA KIT

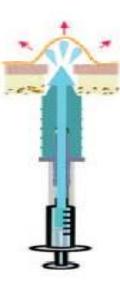
Hydraulic Lifter

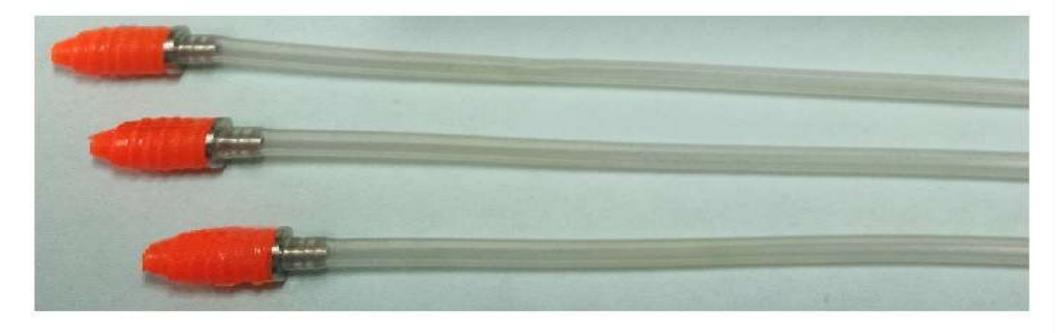
- The Hydraulic Lifter uses normal saline to raise the membrane
- Infuse 1cc with a syringe
- Required volume of saline
 To expand 3mm of the membrane, generally 0.2 to 0.3cc of saline is injected. Inject saline very SLOWLY.
- Contraindication
- Not recommended for patients with inflammation of the maxillary Sinus (Sinusitis)
- Not recommended for patients with complex morphology of the sinus floor (including the septum)

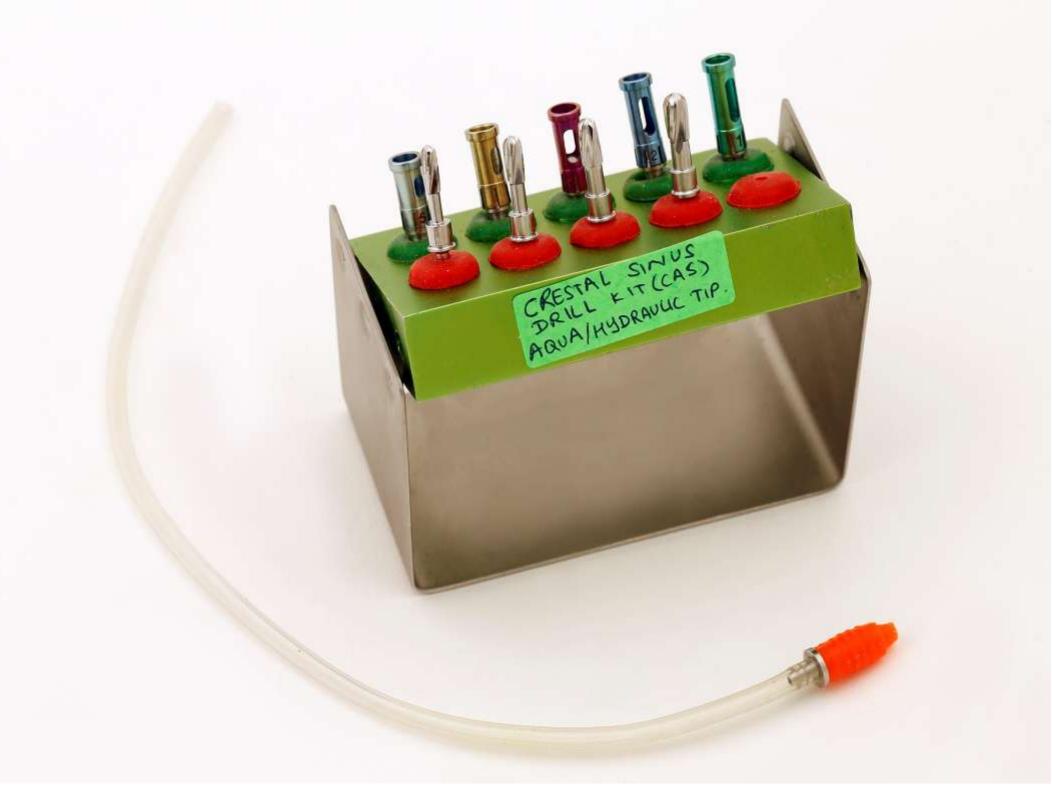






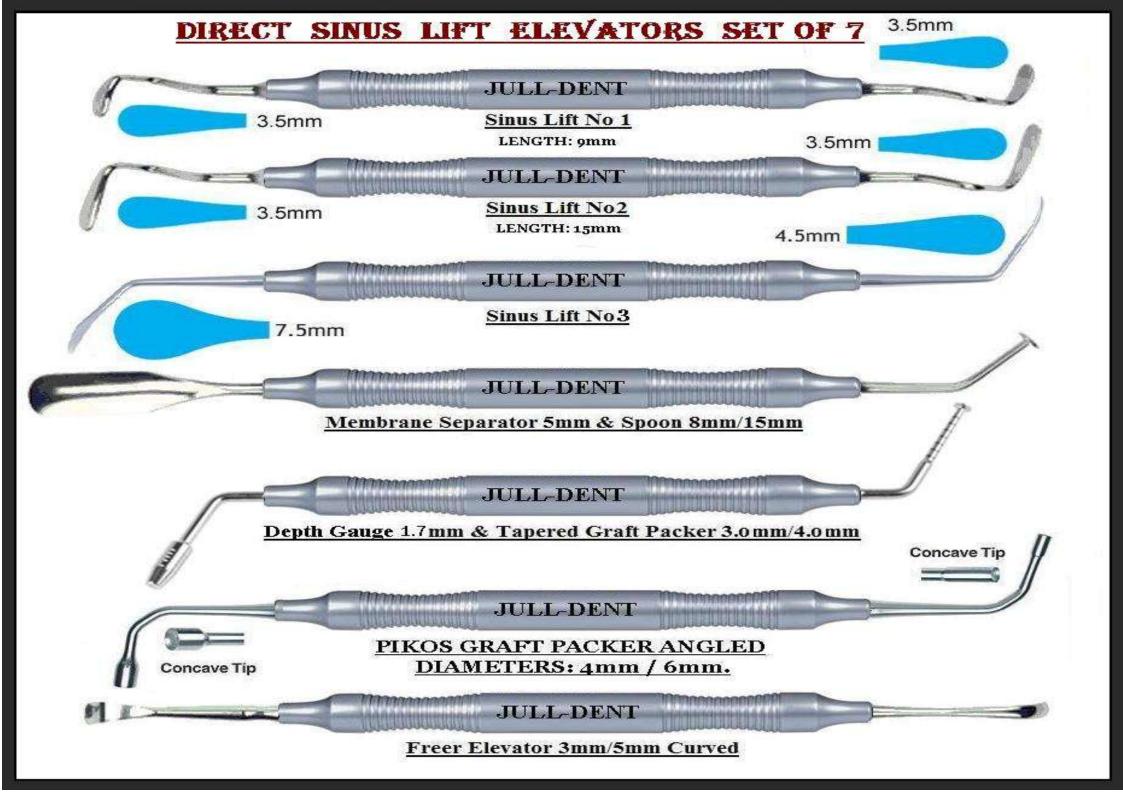






Bone Carrier Head / Bone Condenser





DIRECT SINUS LIFT INSTRUMENTS



SIMPLE SINUS LATERAL REAMER KIT (LAS KIT)

Simple and economic kit composed of the reamer only for opening the lateral window for the sinus lateral approach surgery.

Reasonable and econmic due to the mini kit consisting of essential components.

More convenient and intuitive use with simple components

Components:

Sinus Reamer Ø8.0

Sinus Reamer Ø6.5 / Ø8.0

Sinus Diamond Reamer Ø6.5 / Ø8.0

Core DRill Ø7.0

Diamond Core Reamer Ø7.0

Stopper set (1.0mm, 1.5mm, 2.0mm, 2.5mm, 3.0mm)

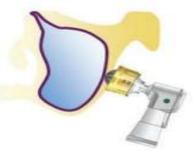
Case STAINLESS STEEL



Lateral Approach Sinus Kit is specifically designed for a fast and safe approach to lateral sinus lifts

Dome and Core Drills provide ideal approaches to the opening of the lateral wall.

<Dome drill>



- Minimizing direct contact with the membrane by forming a bone lid
- · Formation of bone particles between the cutting blades
- · Effective depth control by stopper system (0.5mm increment)
- Stopper can prevent soft tissue damage

<Core drill>



- Round-shaped cutting edge minimizes direct contact with the membrane
- · Formation of bone particles between the cutting blades
- Effective depth control by stopper system (0.5mm increment)
- Stopper can prevent soft tissue damage

LAS-KIT contains Dome drill to create a lateral window, Wide dome drill to widen the window, Core drill that can create core bone lid.

- · Dome and Core Drills to create lateral window.
- Stopper system to prevent excessive and over drilling.
- Dome Drill: Exceptional cutting ability through the combined use of macro and micro blades.
- Care Drill: continued successful design concept of CAS-Drills
- Wide dome drill and side wall drill to enlarge the window

stopper system for depth control. 1.0 / 1.5 / 2.0 / 2.5 / 3.0mm

























MITSA STOPPERS FOR OSSEODENSIFICATION BURS DESIGNED BY: DR. UDATTA KHER



STOP LENGTH: 3mm, 4mm, 5mm, 6mm, 7mm, 8mm.











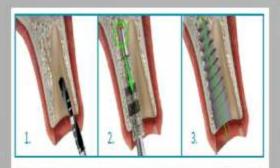
IMPORTANT NOTE:

- 1) WE DONT DEAL IN OSSEO DENSIFICATION BURS.
- 2) WE HAVE ONLY DEVELOPED MITSA STOPPER KIT TO ASSIST THE CLINICIAN TO PERFORM SINUS LIFT WITHOUT WORRYING ABOUT PERFORATION.
- 3) IMAGES SHOWN ARE JUST FOR EXPLANATION OF THE PRODUCT. WE DO NOT RECCOMMEND OR MARKET THE DRILLS.



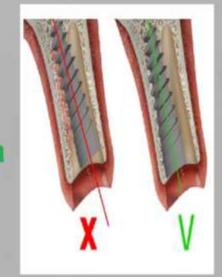
Diamond Bone Angulation Drill

For a perfect post-extraction implant placement.



- identify the anatomy of the socket and start drilling towards the palatal bone. N.B.: The last standard drill diameter to be used for under prepare the osteotomy always corresponds to the implant tip diameter to be inserted.
- Insert the non-cutting tip of the Drill into the osteotomy and push the drill palatally in order to create a track on the palatal bone.
- 3, insert the implant leaving the correct vestibular gap.





The New Diamond Bone Angulation Drill is specifically designed to simplify the immediate insertion of the post-extraction implant.

Identify the anatomy of the socket and start drilling towards the palatal bone. Use the Diamond Bone Angulation Drill palatally to create a track on the palatal bone. Insert the implant leaving the correct vestibular gap.

The New Diamond Bone Angulation Drill is characterized by a diamond cutting body and a non-cutting tip. How it is used: insert the non-cutting tip of the Diamond Bone Angulation Drill into the osteotomy and push the drill palatally in order to create a track on the palatal bone.

The Diamond Bone Angulation Drill kit is available with two different implant diameters drills (3.2mm, 3.7mm)

ZYGOMA DIAMOND DRILLS



HEX STABILIZER



- One of the catastrophic complications in implant dentistry is accidental slippage of the hex driver, especially while working on the cover screw of the maxillary second molar. Also while tightening the prosthetic screw for tilted implants. a floss tie works, but it is very clumsy to use.
- Comes to the rescue Hex Driver Stabilizer!!!
- Material: Medical Grade Silicon (It is Autoclavable)

UNIVERSAL TORQUE ADJUSTABLE HEX DRIVER





| DRIVER / PROSTHETIC CONNECTION | | SYSTEMS | |
|--------------------------------|---------------------|-------------------------------------|--|
| * | SCS Driver | Straumann | |
| * | UniGrip Driver | Nobel BioCare | |
| | Hex 1.3mm/.050 inch | Lifecore, BioHorizon, Astra, Zimmer | |
| | Hex 1.2mm/.048 inch | 3i System, MegaGen, Hiossen | |
| | Hex 0.9mm/.035 inch | Friadent, Ankylos 3i Cover Screw | |

PHOTOGRAPHIC MIRRORS







ANTERIOR OCCLUSAL

DENTAL PHOTOGRAPHIC MIRROR HANDLE



Easily Bends & Stays In Place For Your Desired Angle

CONTRASTOR BUCCAL ANGULATED



CONTRASTOR ANTERIOR 3 IN 1



CONTRASTOR ANTERIOR OCCLUSION

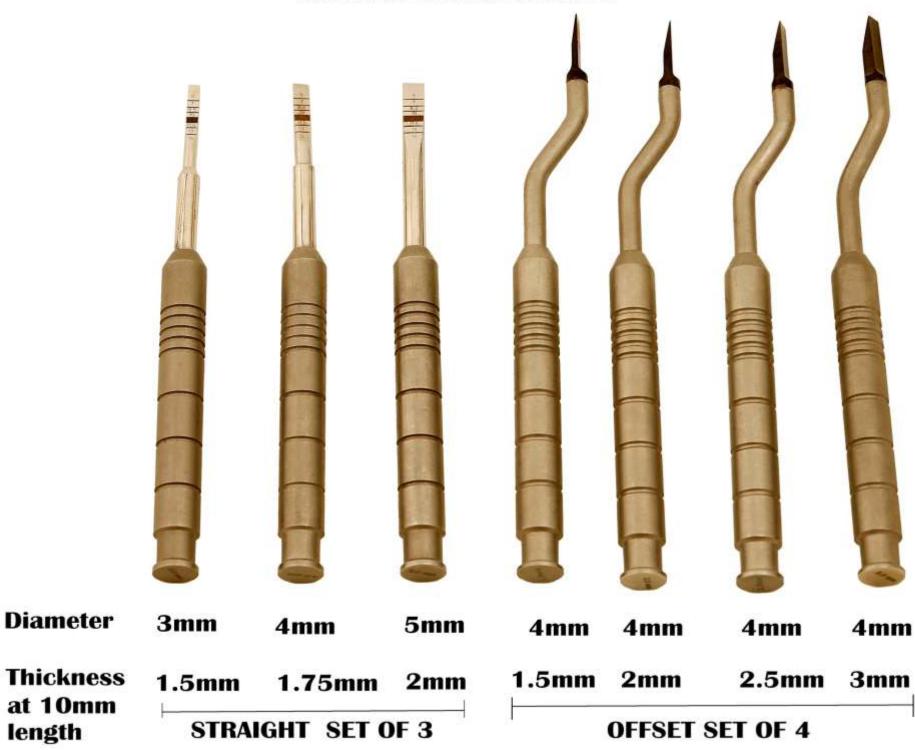


DENTOFACIAL ANALYSER

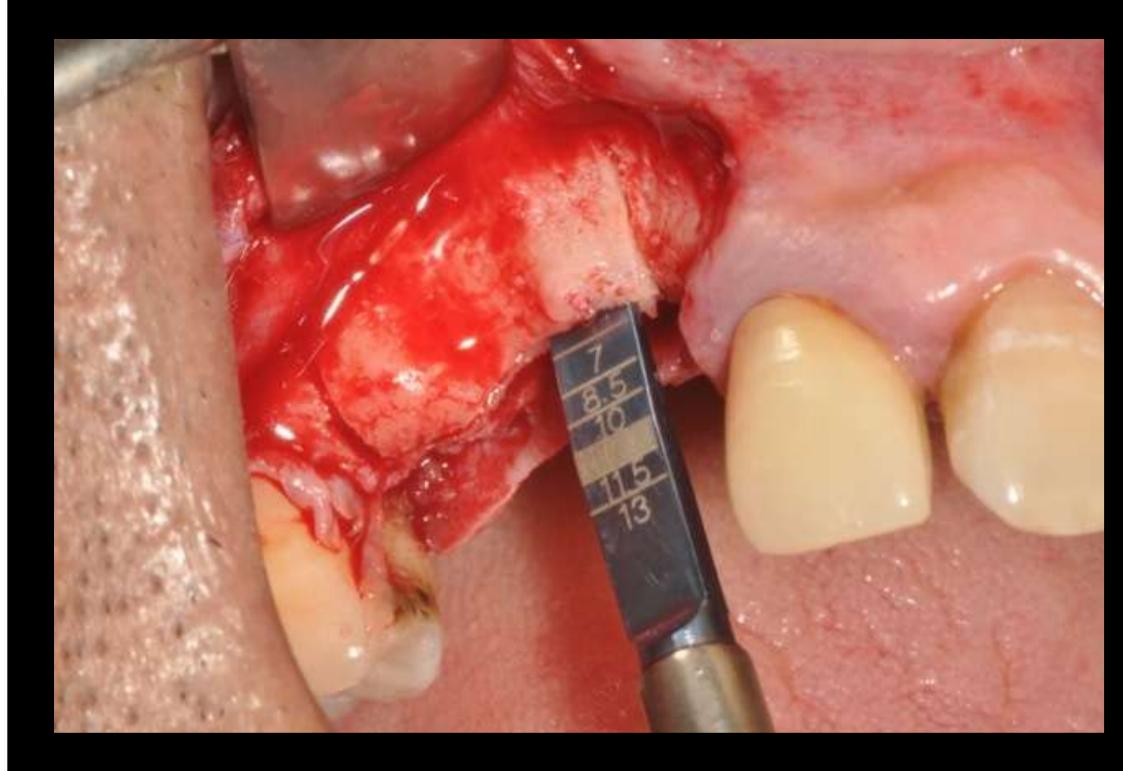


RIDGE SPLITTING CHISEL OFFSET 2 4 44-Width: 4mm Thickness 8.5

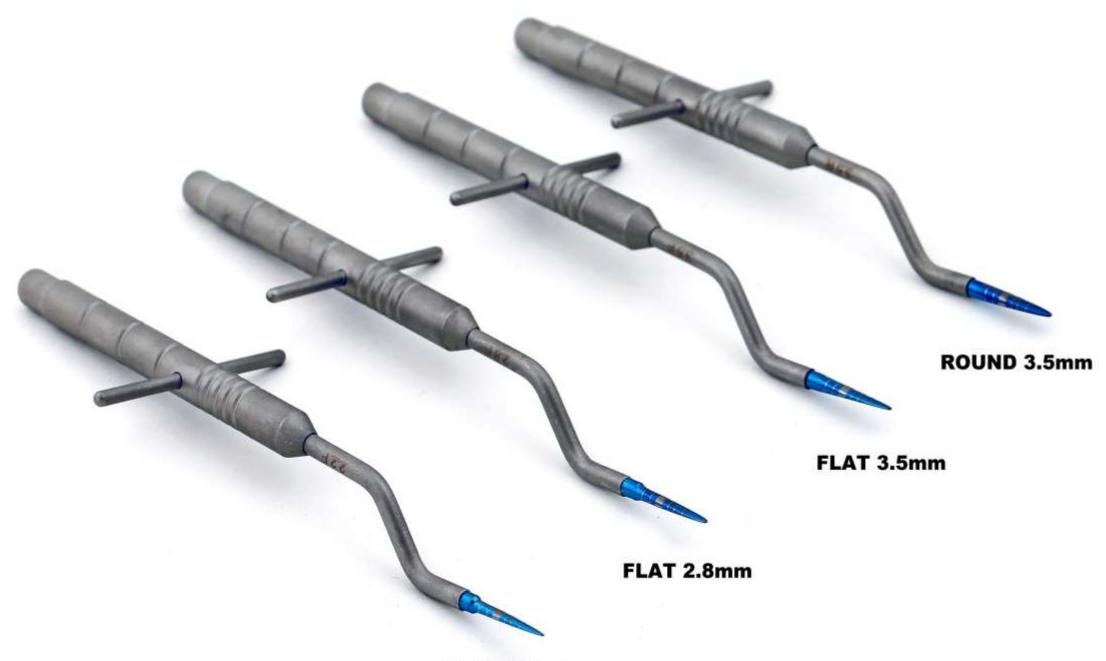
RIDGE SPLITTING CHISELS



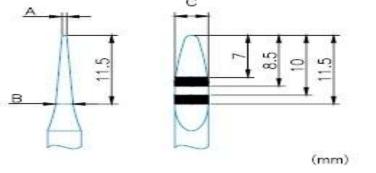
STRAIGHT CHISELS HTCIW 4.0 mm 3.0 mm 5.0 mm



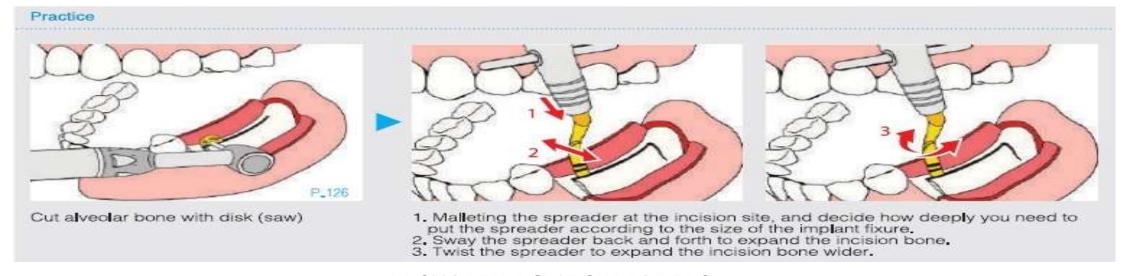
D-SHAPED BONE SPREADERS BI-SPOKE DESIGN



FLAT 2.2mm



| | Α | В | С |
|-------|-------|----------------|----------------|
| 2.2 F | 0,5mm | 1 . 6mm | 2 . 2mm |
| 2.8 F | 0.5mm | 1_6mm | 2_8mm |
| 3.5 F | 0.5mm | 1 . 8mm | 3 . 5mm |
| 3.5 R | 0,8mm | 2,55mm | 3 . 5mm |



D SHAPED BONE SPREADERS

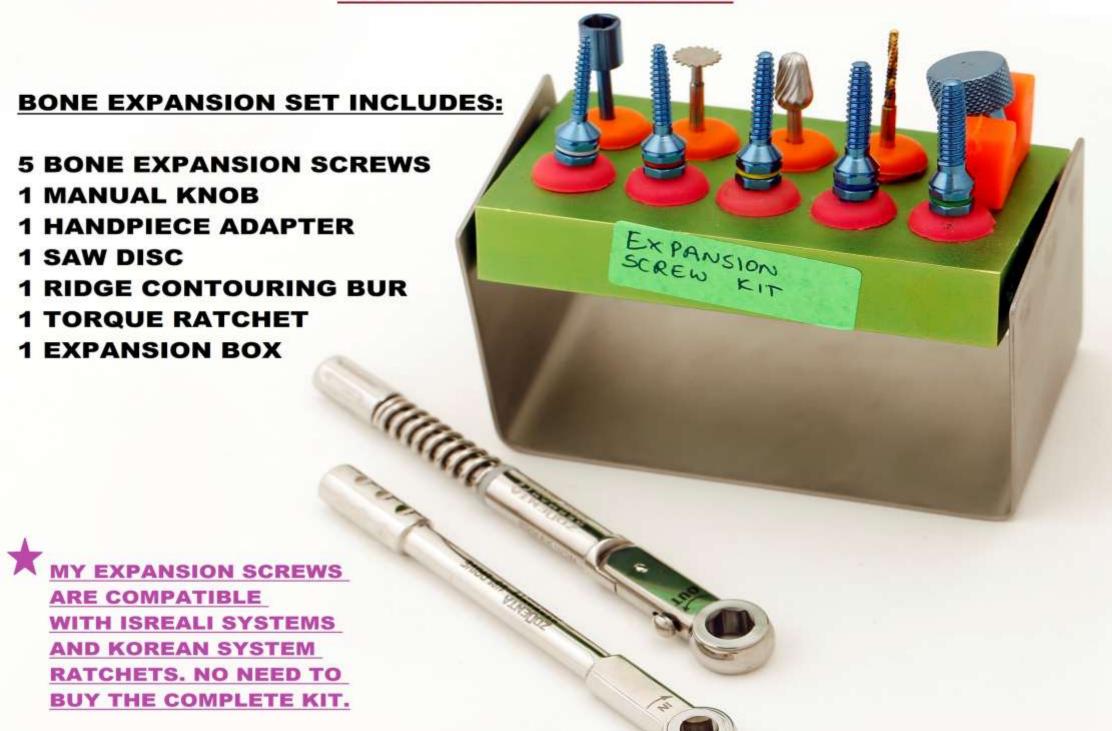
Ridge Expanders may be used in conjunction with socket formers and osteotomy burs if simultaneously placement of implants is undertaken, they can also be used for seperation of the cortical plates for inter-positional grafting. The four ridge expanders are manufactured from hardened stainless steel and sharpened for precise application. They are 'D' shaped or Parabolic in cross section, available in four widths(4mm, 5.5mm, 7.5mm, 10mm) and caliberated 5mm, 7mm, 8.5mm, 10mm, 11.5mm, 13mm, 15mm, 18mm. The Indented use is expansion of the maxillary ridgem to create adequate width for implant placement and to recontour the Labial plate.

The D Shape prevents buccal fracture by extending the expansion over great distance and should be used with the flat side towards the palate and convex side to the labial or buccal which leads to minimum bone compression and reduce in PH-Loss.

D-SHAPED BONE SPREADERS



BONE EXPANSION SET

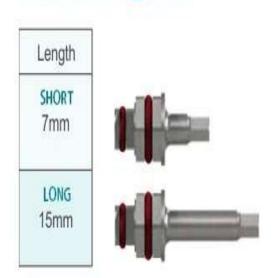


TORQUE RATCHET

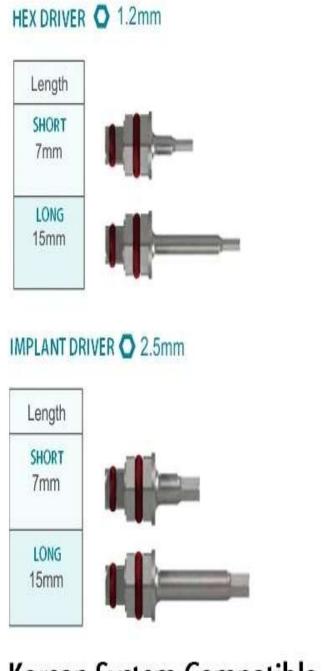
(ISREALI/KOREAN SYSTEMS COMPATIBLE)



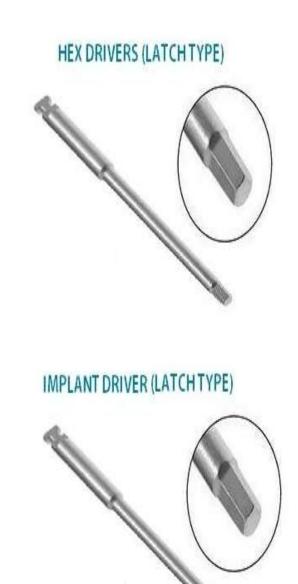








Korean System Compatible





RIDGE CONTOURING/FLATTENING BUR



PTERYGOID TAP

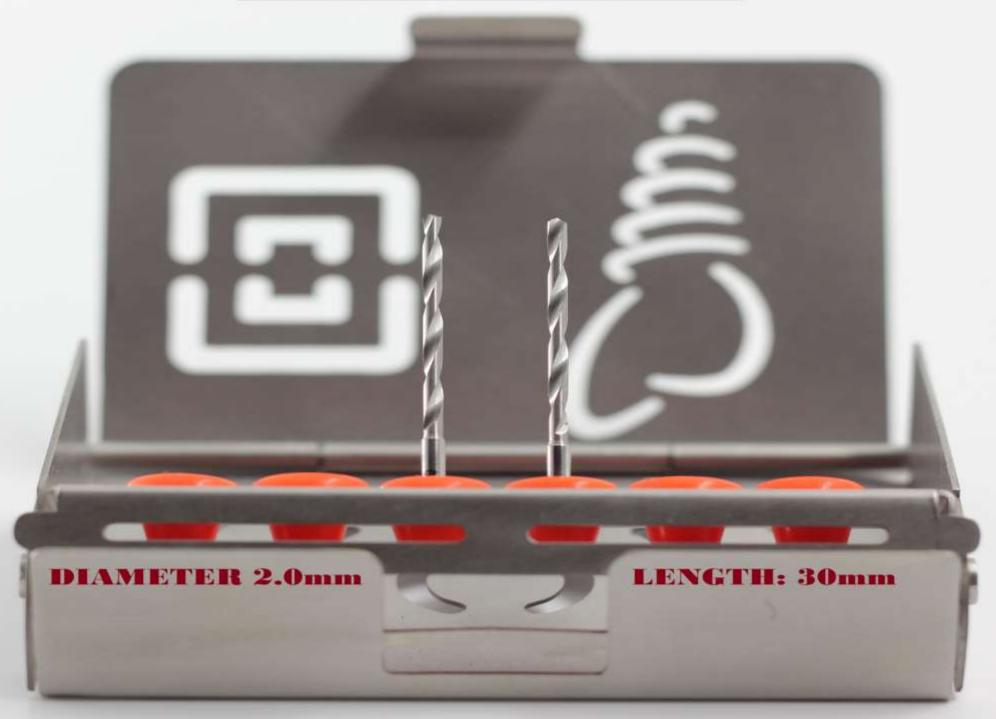
Tip: 25mm Length



- Diameter: 2.0mm, 2.8mm.

- Tip Material: Titainum Grade 5.

PTERYGOID DRILLS



HAND DRILLING DRIVER



TOCHA



IMPLANT SURGICAL DRIVER + HAND DRILLING DRIVER



IMPLANT SURGICAL DRIVER







THIS HANDLE IS DISCONTINUED

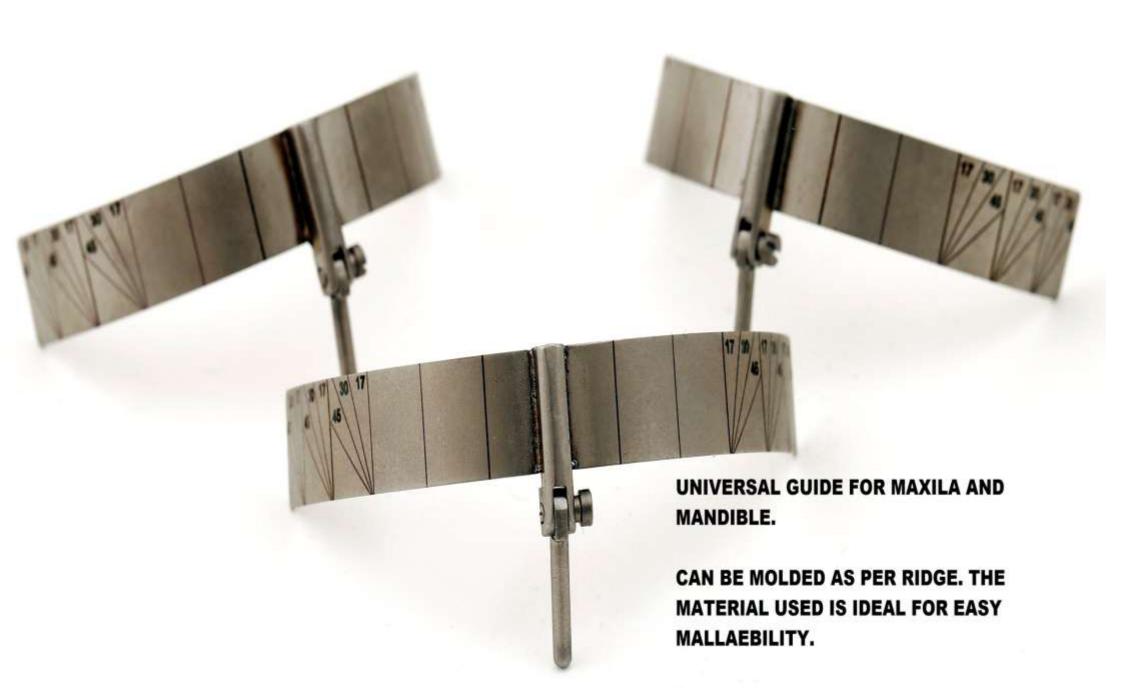
THIS HANDLE IS DISCONTINUED

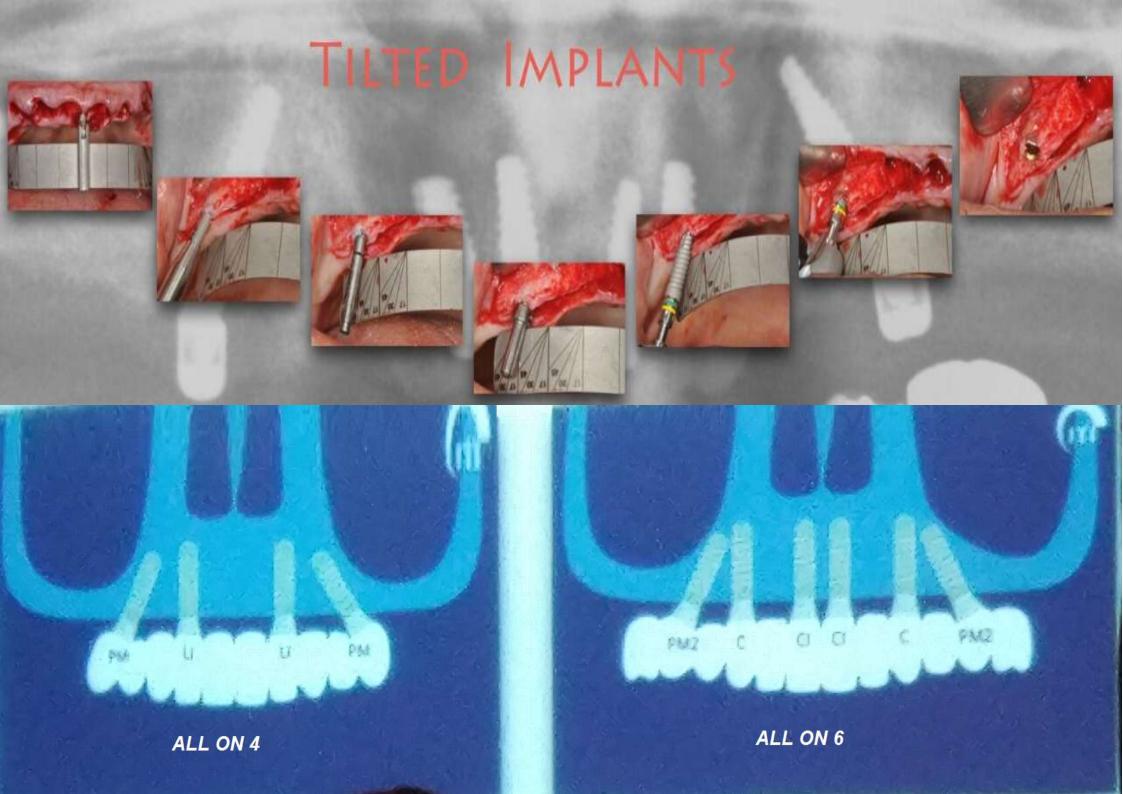
LONG MARKING DEPTH PROBE

FOR ZYGOMA AND PTERYGOID IMPLANT SURGERY



ALL ON 4/6 GUIDE







The paralleling guide is used for aligning 2 interforaminal implants in the edentulous mandible to the median plane. A hole is drilled in the middle of the mandible using a pilot drill, which is easily aligned to the median plane. The distance to the middle can be accurately transferred to the opposite side by swivelling the fitted paralleling guide. Parallel Drilling Guide, for easy Parallel Implant insertion. (Diameter 2.1mm for the Pilot Drill & 1.85mm size of Guide Pin). Insert the Paralleling Drill Guide into the First Pilot Drill with the Guiding Pin. With the flexible joint a precise adjustment for the following Pilot Drilling is Possible.

Material Used: Titanium (A5 Grade).

UNIVERSAL CENTERING GUIDE

FOR SINGLE IMPLANT



IMPLANT SPACER



* MEASUREMENTS CAN BE TAKEN FROM EITHER MESIAL OR DISTAL SIDE OF THE CROWN.

* THE PILOT GUIDE OFFERS SPACING INCREMENTS OF 0.5MM, FROM 3.5MM TO 5.5MM.

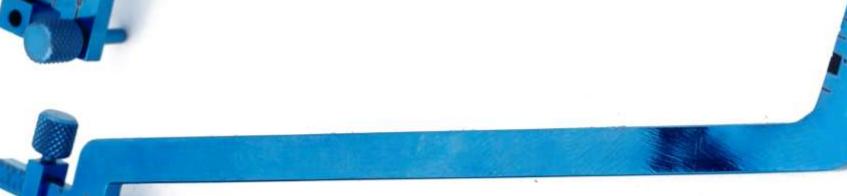
MULTIPLE IMPLANT GUIDE







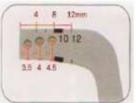
Julldent Implant Surgical Guide







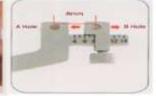








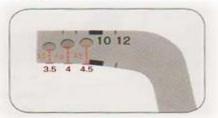




Description of Implant Surgical Guide

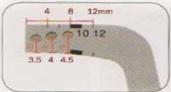
A. Head Part

A-1. The distances from the base side of the instrument to three guide holes are 3.5, 4.0 and 4.5mm respectively. The implant position can be fixed by choosing the desired hole according to the diameter of the implant, and occlusal relationship of opposing teeth. With the instrument in place, the implant position can either be marked or drilled directly Using 2mm twist drill.





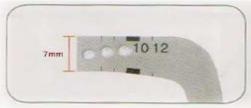
A-2. Top side of the instrument is marked and is useful in measuring the length of drill or The width of the alveolar bone.







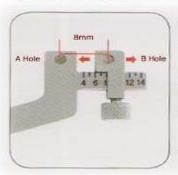
A-3. The distance between the base side and the top side of the instruments is 7mm.

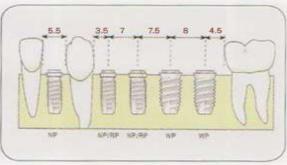




B. Tall Part

B-1. Useful in finding the implant position when adjacent implant placement hole has already been drilled. Consists of holes A and B. Hole A is used to place the guide pin and hole B is used to mark or to directly drill implant placement hole, The distance between hole A and hole B is adjustable and marked in mm's.





B-2 Once the first implant placement hole is drilled, the instrument can be used to accurately guide the position of the next implant placement hole with respect the first hole. This process can be repeated as many times as required to accurately position more adjacent implant placements.





B-3 Guides vertical parallelism between the implants.









Different types of guide pins are available to be used accordingly based on the type of drill used in the first implant placement hole.

The drill guide pins can be fastened to the instrument for easy use.

The top portion of the guide pins are 6.5mm in length so that they are useful in checking implant's position with respect to its opposing teeth.

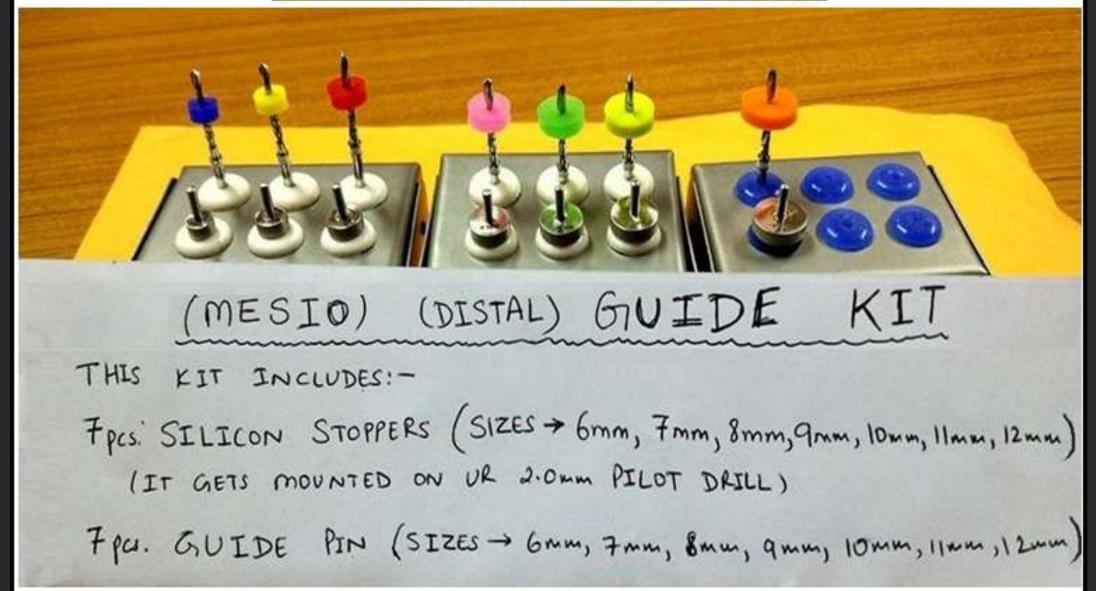


2mm DRILL GUIDE PIN

MESIO-DISTAL GUIDE SYSTEM (MD-GUIDE)



MESIAL-DISTAL GUIDANCE SYSTEM (MDGS)



The MDGS just allows you to drill your pilot hole more accurately in terms of Mesic-Distal Spacing and Parallelism.

We have given analogs (non-drilling guide) in 7 sizes of cylindrical diameters viz. 6mm, 7mm, 8mm, 9mm, 10mm, 11mm, 12mm.

Also we have given Silicon Stoppers of same cylindrical sizes. These silicon stoppers fit onto your any implant system pilot drill upto drill diameter of 3.2mm. Hence it can be adjusted tightly till any depth of the drill size. These Silicon Stoppers are Autoclavable. The analogs (non-drilling guide) will also allow you to simulate the presence of the future prosthetic teeth when placing several implants. MDGS eliminates the need for making a surgical guide.



FOR SINGLE IMPLANT CASES





STEP 1: MEASURE THE MESIO-DISTAL DISTANCE BETWEEN THE ADJACENT TEETH BY PUTTING GUIDE PINS.

STEP 2: ONCE THE DISTANCE IS FINALISED; PUT THE SAME SIZE OF SILICON STOPPER OVER THE INITIAL PILOT 2.0 IMPLANT DRILL TO DESIRED DEPTH.

STEP 3: THE DRILLING WILL BE EXACTLY AT THE CENTER OF THE TWO ADACENT TOOTH (i.e. YOU CAN ACHIEVE THE MESIO DISTAL CENTER DRILLING).

FOR MULTIPLE IMPLANT CASES













STEP 1: SELECT THE GUIDE DIAMETER THAT MATCHES THE MESIO-DISTAL DIMENSION OF THE MISSING TOOTH. PUT SILICON CYLINDRICAL STOPPER OF SAME SIZE AND PLACE IT AGAINST THE ADJACENT TOOTH TO CREATE THE FIRST PILOT HOLE.

STEP 2: PLACE THE GUIDE AT THE PILOT HOLE SITE OF SAME DIAMETER.

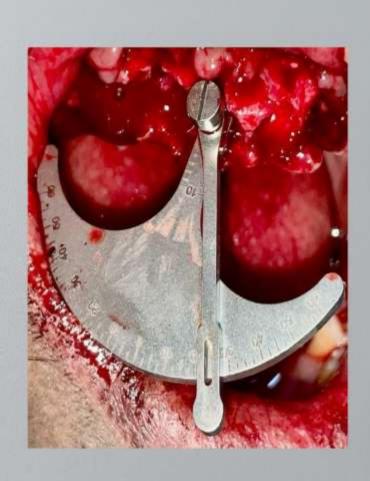
STEP 3: SELECT THE SIZE OF THE GUIDE DIAMETER THAT MATCHES THE MESIO DISTAL DIMENSION OF THE SECOND MISSING TOOTH. PUT SILICON CYLINDRICAL STOPPER OF SAME SIZE AND PLACE IT AGAINST THE PREVIOUSLY PLACED CYLINDRICAL ANALOG GUIDE TO CREATE THE SECOND PILOT HOLE.

STEP 4: REPEAT THE STEPS FROM STEP NUMBER 3 AS NECESSARY IN THE CASE OF MULTIPLE IMPLANTS.

ZYGOPATH DESIGNED BY DR. NITIN AHUJA



MULTIUNIT ANGULATION MEASUREMENT GUIDE





* THE SQUARE PART FITS ALL ISREALI AND KOREAN SYSTEM IMPLANTS WITH INTERAL HEX DESIGN.

PERIOSTEAL ELEVATORS

Periosteals are used to separate tissue from the tooth or bone and retract tissue during procedures.

JULL-DENT 23001

JULL-DENT

Periosteal #24G

Combines a small curved blade that is 4mm wide and a rounded tip with a uniquely angled cutting blade on straight shank.

Both ends are sharp around the periphery.

JULL-DENT 23003

JULL-DENT

Hirschfield #20

Combines a sharp "hatchet" shaped blade that is 3.5mm wide with a straight flat blade with a rounded tip that is 4mm wide.

JULL-DENT 23004

JULL-DENT

Molt #9

Combines a large curved blade that is 7.5mm wide and has a rounded tip with a curved blade that is 3.5mm wide and has a pointed tip.

Both ends are non-cutting.

JULL-DENT 23007

JULL-DENT

Prichard #3

Combines a large, flat blade used for retraction and a smaller, curved tip used for reflection and retraction of tissue.

JULL-DENT 23008

JULL-DENT

Buser

Combines an offset teardrop blade and a straight spear shaped blade. Both are 4mm wide and have a sharp periphery.

BONE CURETTES

LUCAS BONE CURETTES

JULL-DENT 2007

Jull-Dent

SMALL LUCAS 84

JULL-DENT 2008

Jull-Dent

LUCAS 86

JULL-DENT

MOLT 2/4

JULL-DENT 2000

JULL-DENT 2007 Serrated JULL-DENT

LUCAS BONE CURETTE SERRATED

PERIODONTAL KNIVES / FILES / CHISELS

Perio Chisels are used with a "Push Stroke" to reshape and remove bone.

JULL-DENT 20008

JULL-DENT

Kirkland #13-TG

Combines a back action chisel with a 3.5mm blade width and a straight chisel that is 2.5mm wide.

COMPOSITE INSTRUMENTS (PREMIUM)





COMPOSITE KIT PREMIUM (TITANIUM GRADE 5 TIPS)

Applica-Tor: A very thin, flexible spatula designed for transporting and esthetic modeling of the composite. The flexible working end gently and precisely sculpts composite layers to imitate the natural shape of the tooth. The thin tip of the Applica-tor enables modeling in narrow spaces or against the matrix band.

Condensa-Tor: A long, round plugger designed especially for modeling a composite. Its angulated shanks enable unrestricted access to all cavities. Condensa-tor has both a thick and a thin tip that can be used in cavities of different sizes, in both anterior and posterior areas. The rounded working end enables a delicate compacting of composite without any risk of adhesion.

Misura-Tor: A unique instrument used to apply the correct horizontal and vertical thicknesses of composite layers on the anterior restorations. After layering but before polymerization of the dentine composite, the thinner, cylindrical tip is placed on the natural tooth enamel. The unpolymerized composite below the cylindrical tip is then gently modeled, leaving an optimal space for the enamel composite layer. The thicker, short tip of the Misura-tor is placed horizontally at the margin of the prepared cavity, leaving the edge of the tip on the original enamel. This allows you to determine the right amount of transparent composite to apply on the finishing line. The final esthetic restoration consists of correctly balanced opaque and translucent composites, avoiding the unpleasant gray effect of some composites.

Applica-tor Twister: Especially fine, flexible and narrow spatula for composite modeling. The Applica-tor Twister is used for easy modeling in the proximal spaces and marginal ridges in the matrix. Its bent tips make it possible to reach awkward areas without complicating the working position of the hand unnecessarily.

Fissura-Tor: A modeling instrument with extremely sharp pointed tips. The conical tip is perfect for sculpting the anatomy of the occlusal area of the posterior teeth with just one instrument. The fine, probe-shaped tip is optimal for modeling fissures and mamelons as well as for layering characterization composites and sealants. The flexibility of the Fissura-tor enables gentle probing to ensure there is no excess bonding resin remaining on tooth surfaces.

Modella-Tor: Especially fine, wide spatula for composite modeling. Particularly suited to large tooth surfaces such as the buccal surfaces of the incisors. The wide spatula end flattens the composite effectively. The flexibility, delicacy and sharpness of the tip helps to create precise esthetic details. The spatula works well for applying the composite from a syringe.

Anterior Universal: Instrument for high-end esthetic anterior restorations. Rounded and straight spatulas are designed for modeling anterior teeth, especially labial surfaces.

Posterior Universal: Instrument for high-end posterior composite restorations. The plugger end is designed for bulk filling and composite material modeling. The sharp end enables contouring of the occlusal surface anatomy.

Cusp Misura-Tor: Unique instrument for estimating cusp thickness and height for evaluating the need for cusp preparation when performing adhesive restorations. Ideal for evaluating the strength of the natural tooth structure and choosing the restorative technique to be used. If the forked instrument tip penetrates up to its marks, the tooth structure is too weak to withhold occlusal forces with a direct restoration, and other clinical options must be considered.

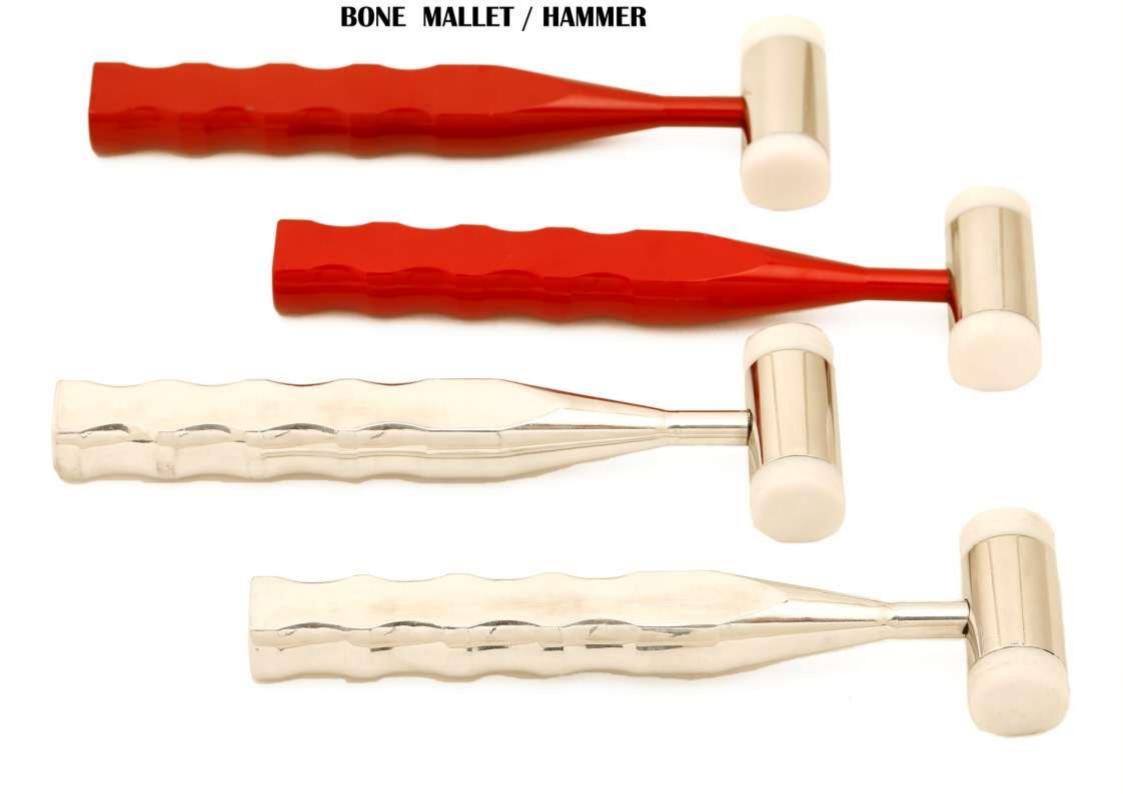
BONE GRAFT SYRINGE



DIAMETER 3mm, 4mm, 5mm

BONE WELL / BONE GRAFT CONTAINER



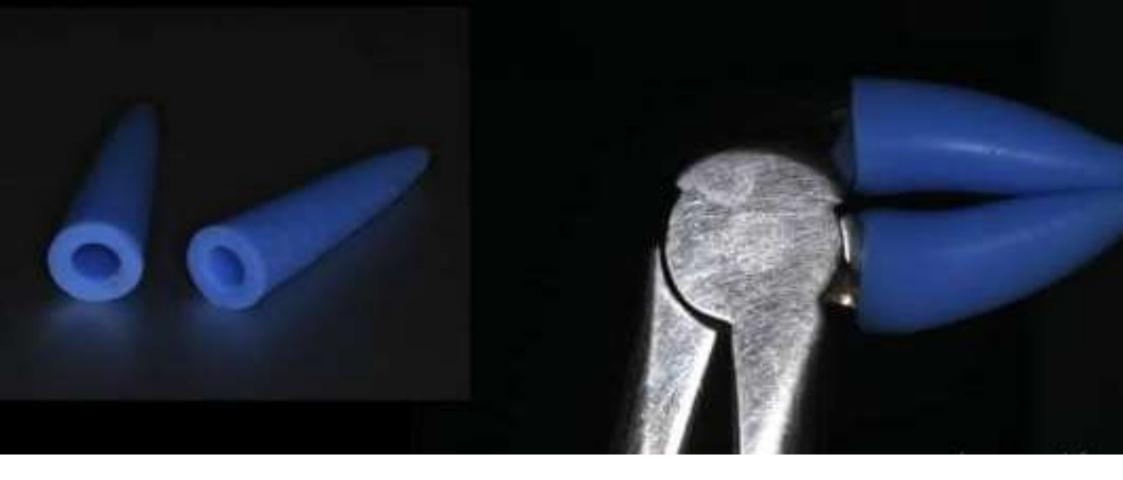


SUCTION TUBE WITH STILLETTE



SILICON TIPS FOR SUCTION TUBE





- NEW APPLICATION FROM DR. UDATTA KHER SIR. HE USES THE SILICON TIPS ONTO THE EXTRACTION FORCEP TO USE THEM AS CROWN REMOVER..
- THESE SILICON TIPS ARE REMOVABLE, AUTOCLAVABLE. THE TIP DIAMETER IS 1mm; DENTIST CAN ADJUST THE TIP SIZE BY CUTTING THE SILICON TIP TO THE DESIRED DIAMETER FOR SUCTION.
- THEY CAN BE MOUNTED ON ANY SUCTION TUBE (STAINLESS STEEL PIPE OR DISPOSIBLE PLASTIC TIPS).
- WE DEVELOPED THIS PRODUCT AFTER GETTING REVIEWS FROM DOCTORS THAT NORMAL STAINLESS STEEL SUCTION TUBE WHEN PLACED IN PATIENTS MOUTH RESULTS IN UNCOMFORTABLE AND PAINFUL (ULCERS, BOILS) EXPERIENCE FOR PATIENTS. THIS IS A MUST PRODUCT TO HAVE FOR ALL DENTISTS!!!

BONE COLLECTOR WITH FILTER



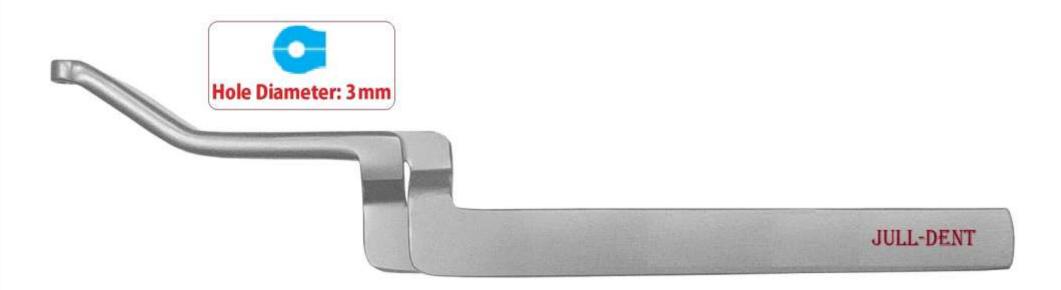
SUTURE TWEEZERS / CORN PLIERS



SUTURE CORN TWEEZER



ABUTMENT HOLDING TWEEZERS





Hole Diameter: 1.3 mm Hole Diameter: 1.9mm

JULL-DENT

CHALAZION FORCEPS



The chalazion forceps simplify, homogenize, and ease biopsy of minor salivary glands as well as other areas of the oral mucosa. The forceps induces a temporary vascular compression, thus permitting work under ischemic conditions and better visibility. One of the criteria for assessing the degree of difficulty in oral biopsies is the ease of surgical access to the biopsy area, which is determined by the ability to see, reach, and stabilize the zone. In this sense, chalazion forceps simplify, homogenize, and ease biopsy of minor salivary glands. The forceps induces a "lack of fluid" effect because of the

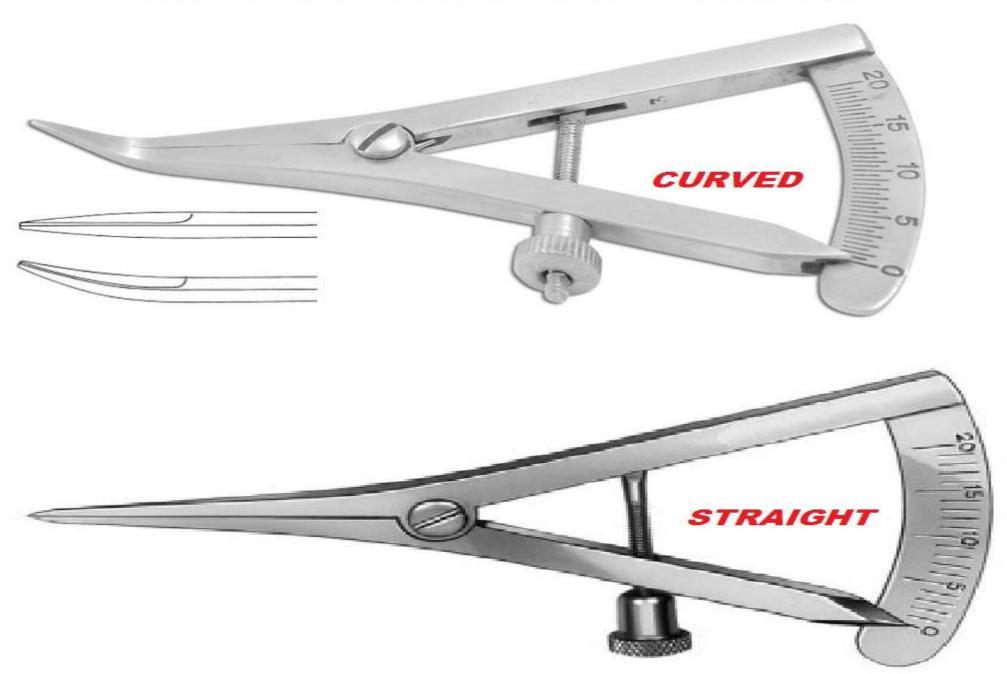
compression, thus permitting work under ischemic conditions and better visibility. The time needed to complete the task is considerably reduced using the technique we propose and the surgical procedure is remarkably different.

RIDGE MAPPING / MEASURING CALIPER



CASTROVEIJO CALIPER

FOR MEASURING MESIODISTAL DISTANCE

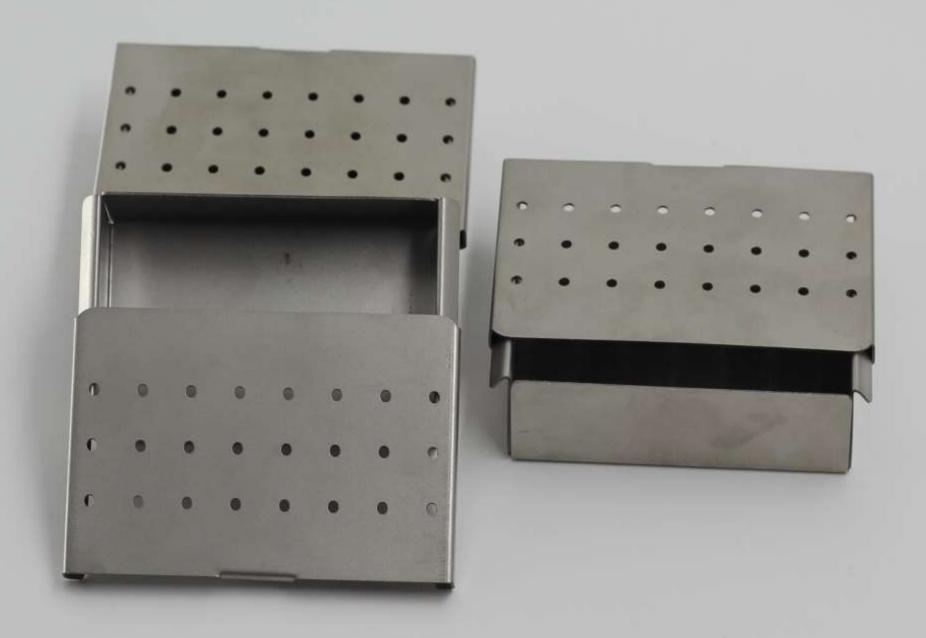


DRILLS / BURS AUTOCLAVING BOX

ALSO DOCTOR CAN USE THIS CONTAINER TO AUTOCLAVE TACKS, SCREWS, ABUTMENTS, ENDO FILES



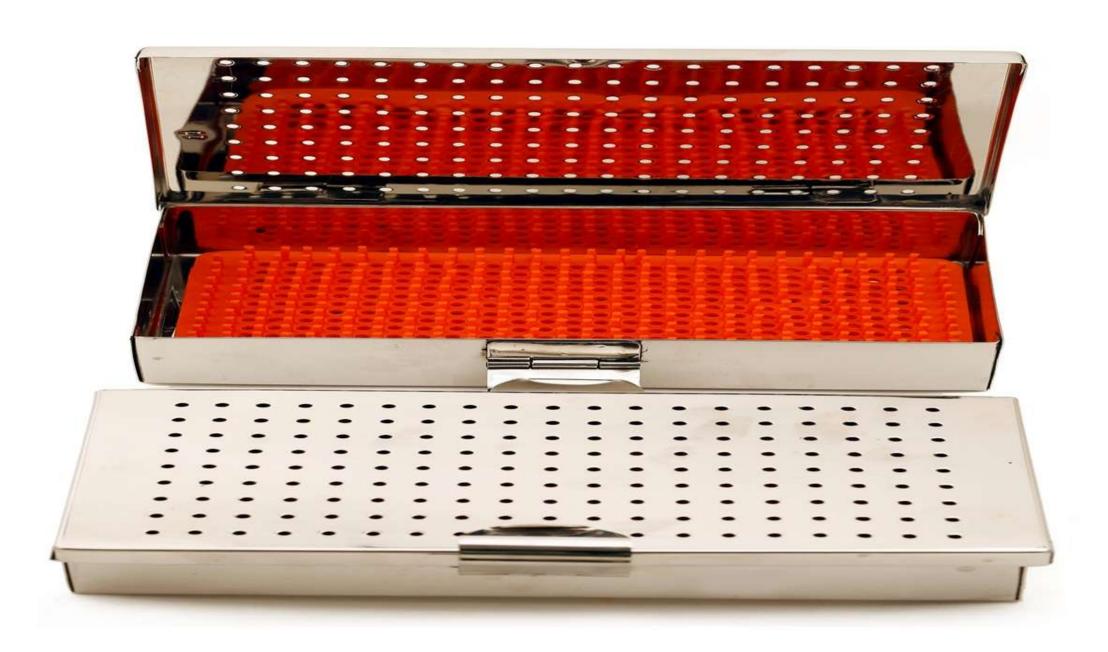
SMALL COMPONENTS AUTOCLAVING BOX



AUTOCLAVABLE CASSETTE WITH SILICON MATT OR INSERT (FOR HAND INSTRUMENTS)

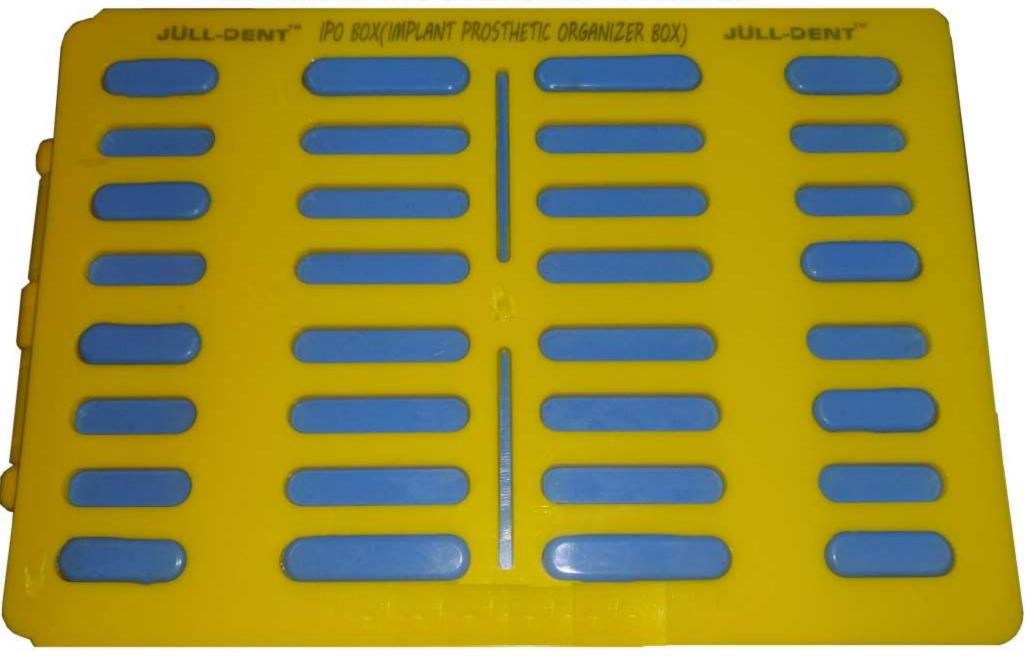


BIG AUTOCLAVABLE CASSETTES WITH MATT SIZE: 8" X 5" X 1.5"



IPO BOX (IMPLANT PROSTHETIC ORGANIZER BOX)

DESIGNED BY: DR. ASHISH KAUSHAL

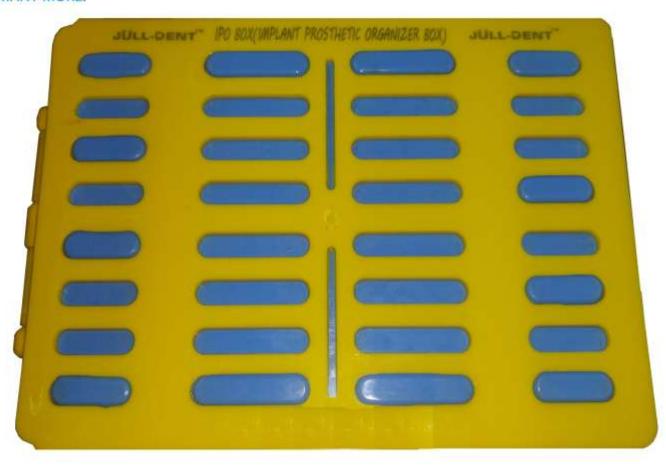


IPO BOX (IMPLANT PROSTHETIC ORGANIZER BOX)

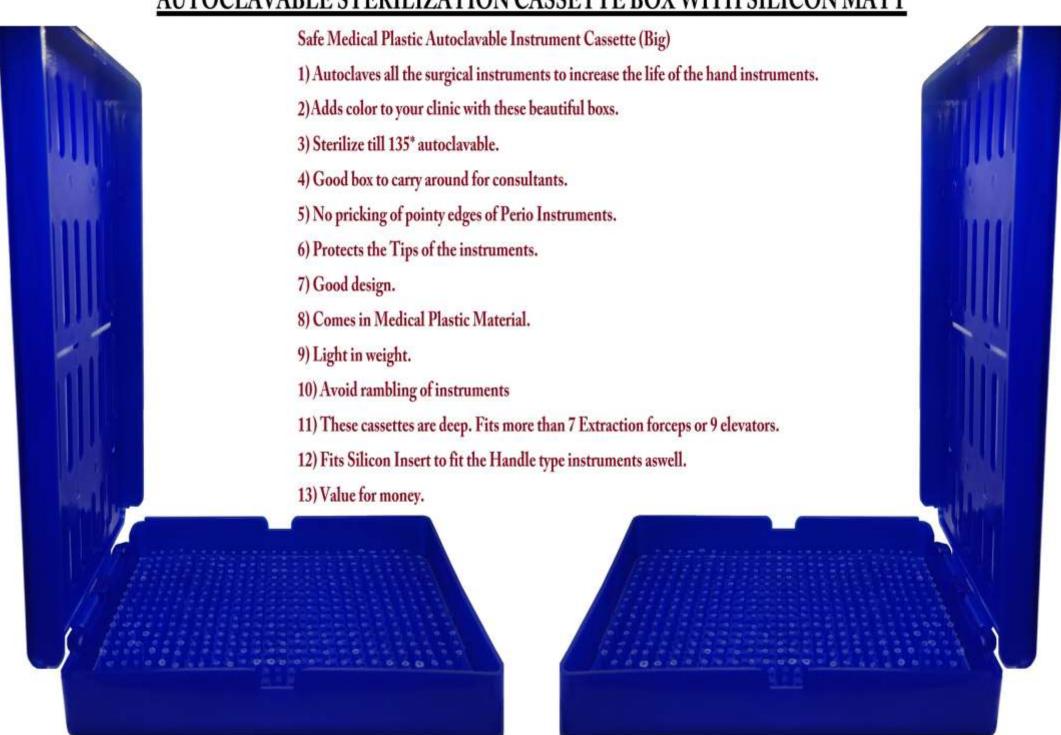
DESIGNED BY DR. ASHISH KAUSHAL



- ALL IMPLANT PROSTHETIC COMPONENTS CAN BE STORED, AUTOCLAVED, LABELLED AND MANAGED WITHOUT MUCH OF A HUSSTLE.
- MATERIAL: MEDICAL GRADE PLASTIC (AUTOCLAVABLE MINIMUM 1000 CYCLES) + MEDICAL GRADE SILICON.
- AUTOCLAVABLE, STERILIZABLE.
- USAGE: IMPLANT PROSTHETIC COMPOSNENTS, ORTHODONTIC BRACKETS, ENDO BURS AND MANY MORE.



<u>AUTOCLAVABLE STERILIZATION CASSETTE BOX WITH SILICON MATT</u>



<u>AUTOCLAVABLE STERIZATION BOX</u>



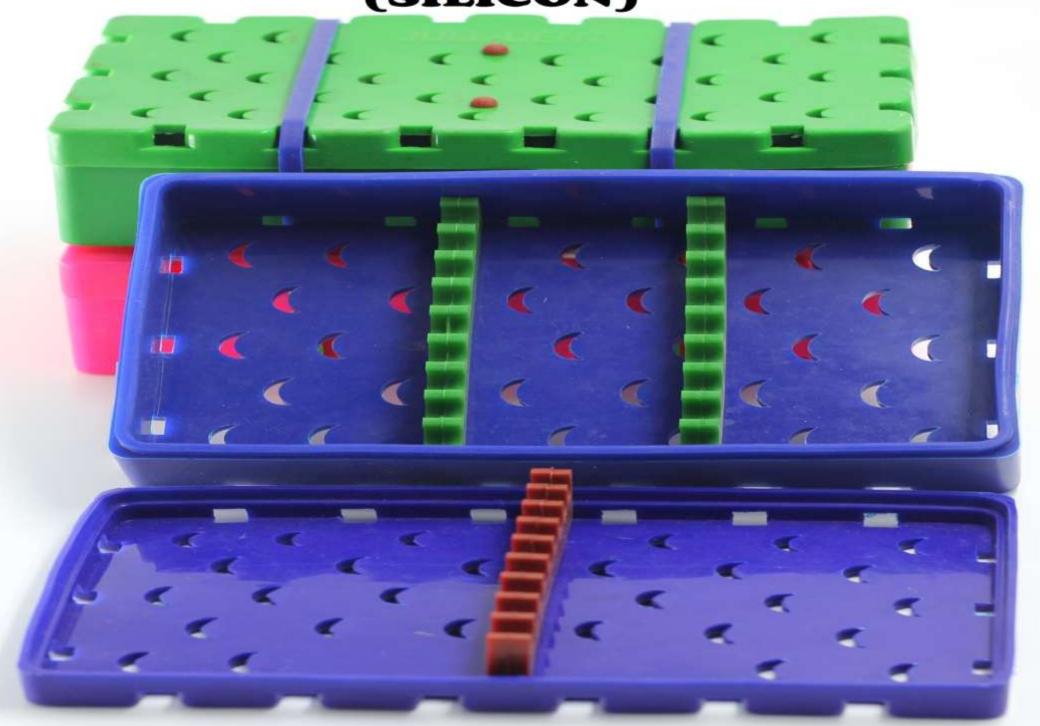
Autoclaves all the surgical instruments. To increase the life of the hand instruments. Sterilize till 135* Autoclavable.

Good box to carry around for consultants. No pricking of pointy edges of Perio Instruments. Protects the Tips of the instruments.

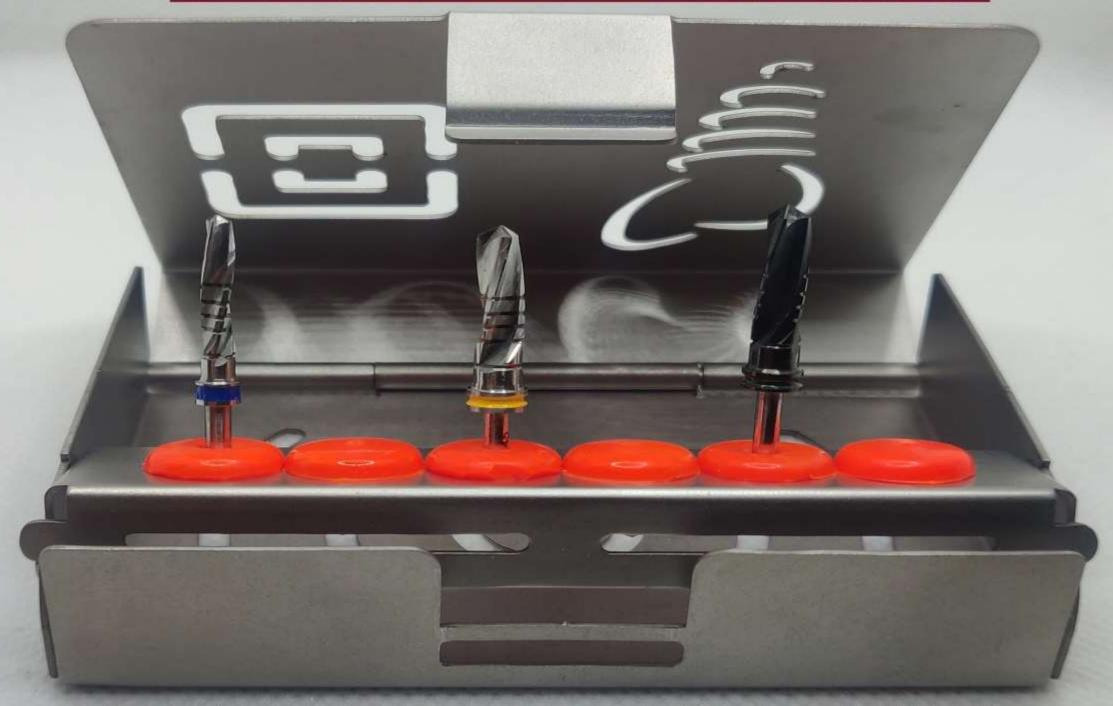
Comes with Silicon Matt (To avoid rambling of instruments). These cassettes are deep.

Fits more than 8 Extraction forceps or elevators. Material: Medical Grade Plastic (For more than 500 autoclaving cycles).

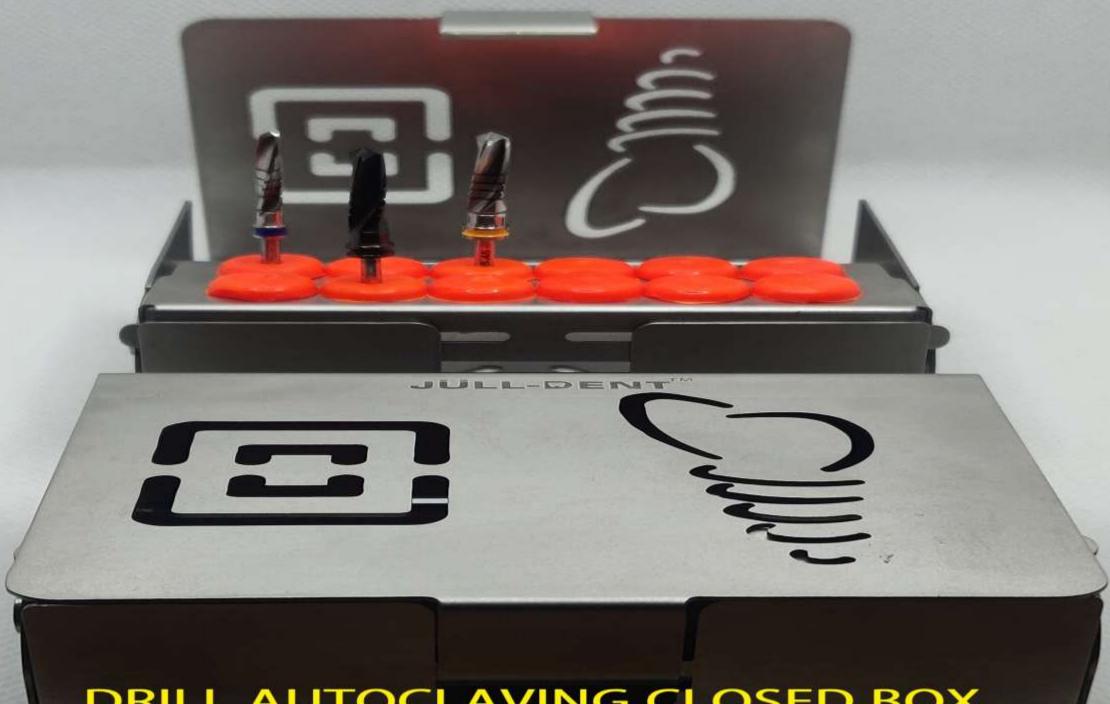
AUTOCLAVABLE STERILIZATION BOX (SILICON)



DRILL AUTOCLAVING CLOSED BOX

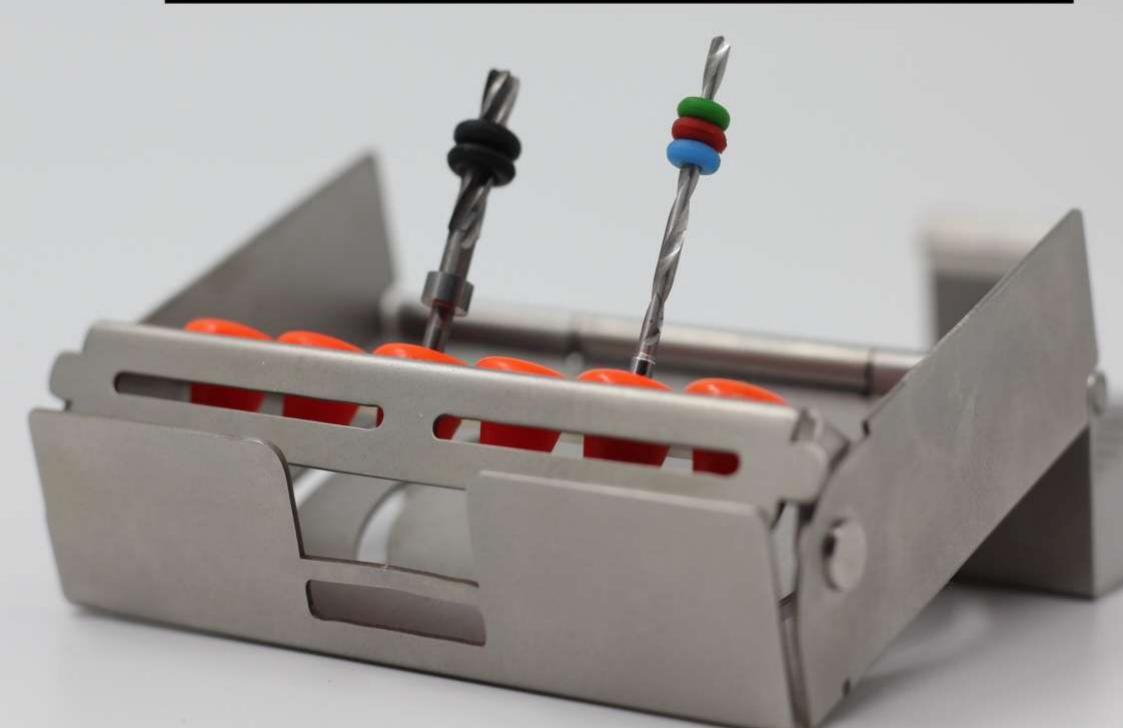


SINGLE LAYER FOR 6 DRILLS (PREMIUM)

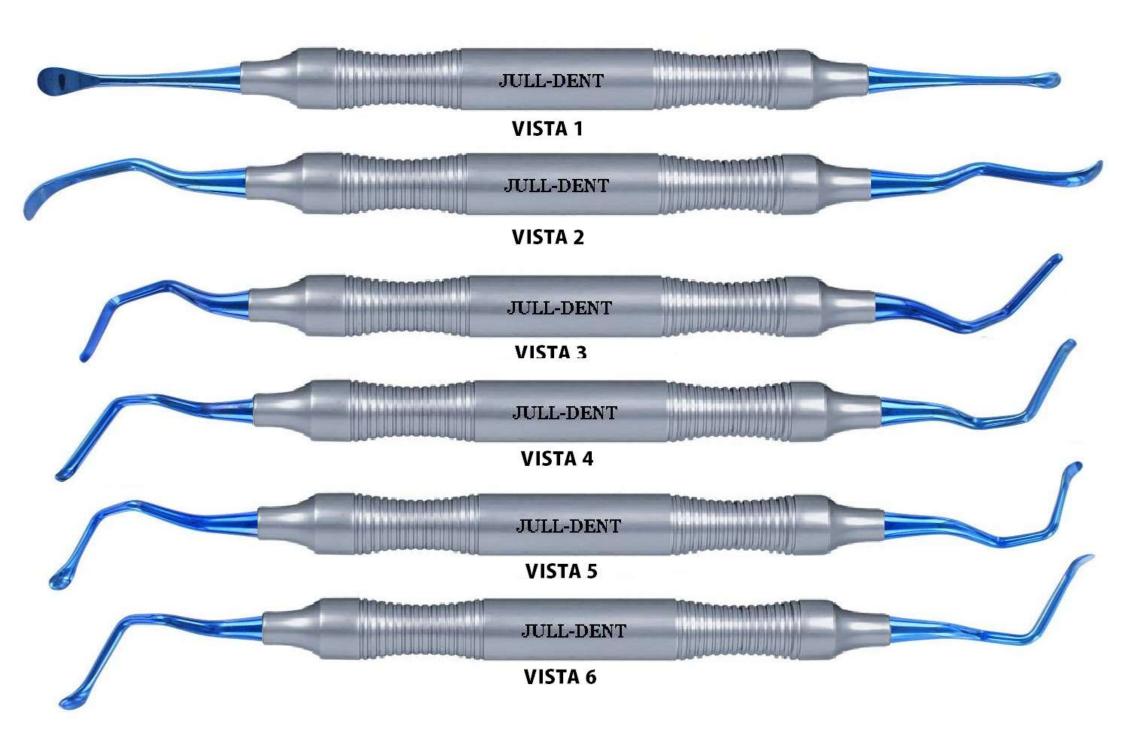


DRILL AUTOCLAVING CLOSED BOX
DOUBLE LAYERS FOR 12 DRILLS (PREMIUM)

UNIVERSAL DRILL STOPPERS (SILICON)



VISTA TUNNELING KIT



Subperiosteal Tunnel



- · Begin creation of a subperiosteal tunnel using VITSA-1 elevator
- · Point each elevator with the concave side facing bone
- The leading edge of each elevator has to remain in contact with bone throughout tunnel elevation

Subperiosteal Tunnel



 Alternatively, the S-shaped end of VITSA-2 elevator can be used for the initial step in tunnel elevation

Subperiosteal Tunnel



VITSA-5 and VISTA-6 elevators can be used to access areas in opposite site of the mouth.

Subperiosteal Tunnel



VITSA-3 and VISTA-4 elevators are used to extend the tunnel under each papilla. The mucoperiosteal complex is separated from the underlying bone as far interproximally as possible.

Subperiosteal Tunnel





 The C-shaped end of VITSA-2 elevator can be used when the tunnel is extended beyond the distal aspects of canines.

Subperiosteal Tunnel



VISTA-4 is longer and is used for reflecting papillae that are farther away from access incision.

SOFT BRUSHING KIT



The Soft Brushing Release Kit takes the headache out of flap surgery, and increases your ability to gain primary closure.

The kit contains 5 instruments:

- 1. Regular
- 2. Angulated R (right) for posterior area
- 3. Angulated L (left) for posterior area
- 4. Medium size
- 5. XL size

TACK KIT



KIT INCLUDES:

5 TACK PINS 3.5mm (TITANIUM)

5 TACK PINS 4.5mm (TITANIUM)

1 OFFSET DRIVER

1 AUTOCLAVING BOX

1 TACK REMOVER

1 TACK PUSHER

1 TACK POINTER TOOL





GBR KIT GUIDED BONE REGENERATED KIT

SELF DRILLING TITANIUM SCREWS

- 5 UNITS 1.5X4mm
- 5 UNITS 1.5X8mm
- **5 UNITS 2.0X10mm**
- 5 UNITS 2.0X12mm



AUTOCLAVING BOX

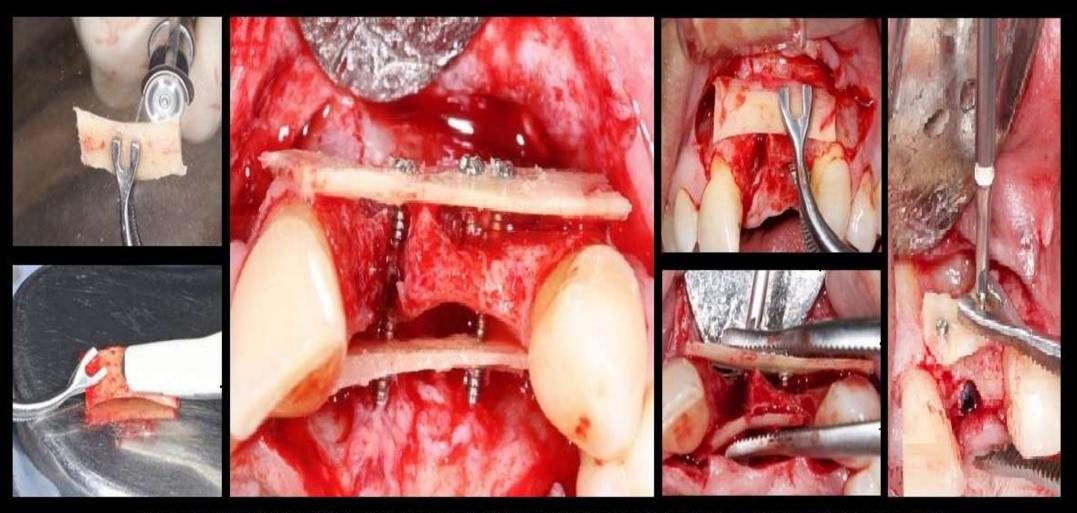
GBR FORCEPS

GBR FORCEPS



APPLICATION FOR BONE BLOCK HOLDER

- This Bone holding forceps allows one to effectively hold the bone plate or the bone block and at the same time
 having adequate space for the bone screws and driver.
- The holder is easy to use with one hand due to its ratchet design and firmly grips either the bone plate or block on its own thereby allowing fixation of the plate at the desired distance from the bone.
- It holds both the bone block and recipient site thereby enabling easy bone fixation. The bone vice is designed to work with both large and small blocks.



TITANIUM MESH









PRF BOX



JULL - DENT

MAGIC PRF & GRF BOX

MAGIC PRF BOX

Patient blood following centrifugation; Upper segment: platelet poor plasma; Middle segment: platelet rich fibrin clot. Lower segment: red blood cell clot.

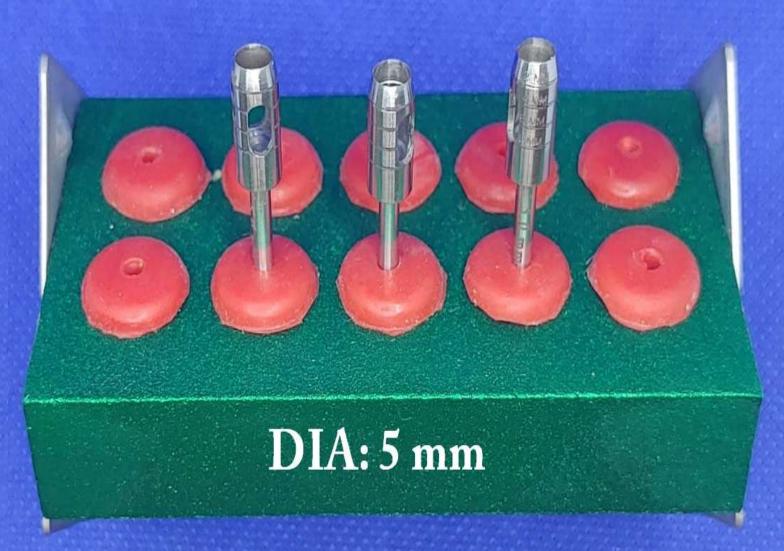
- The Magic PRF Box fibrin clot is drawn using the surgical tissue forceps.
- Removal of the red blood cell clot using the back of the surgical curved scissors.
- Placing of the Magic PRF Box fibrin clots in the Magic PRF Fabrication Box.
- Placing of the Magic PRF Box fibrin clots in a cylinder of the Magic PRF Fabrication Box.
- The Magic PRF Box fibrin clots are processed using a piston.
- Magic PRF Box cylinder with 1cm in diameter for the application in extraction sockets.
- Magic PRF Box fibrin matrixes produced using the Magic PRF Fabrication.
- Magic PRF Box fibrin matrix that can be sutured and cut to size.



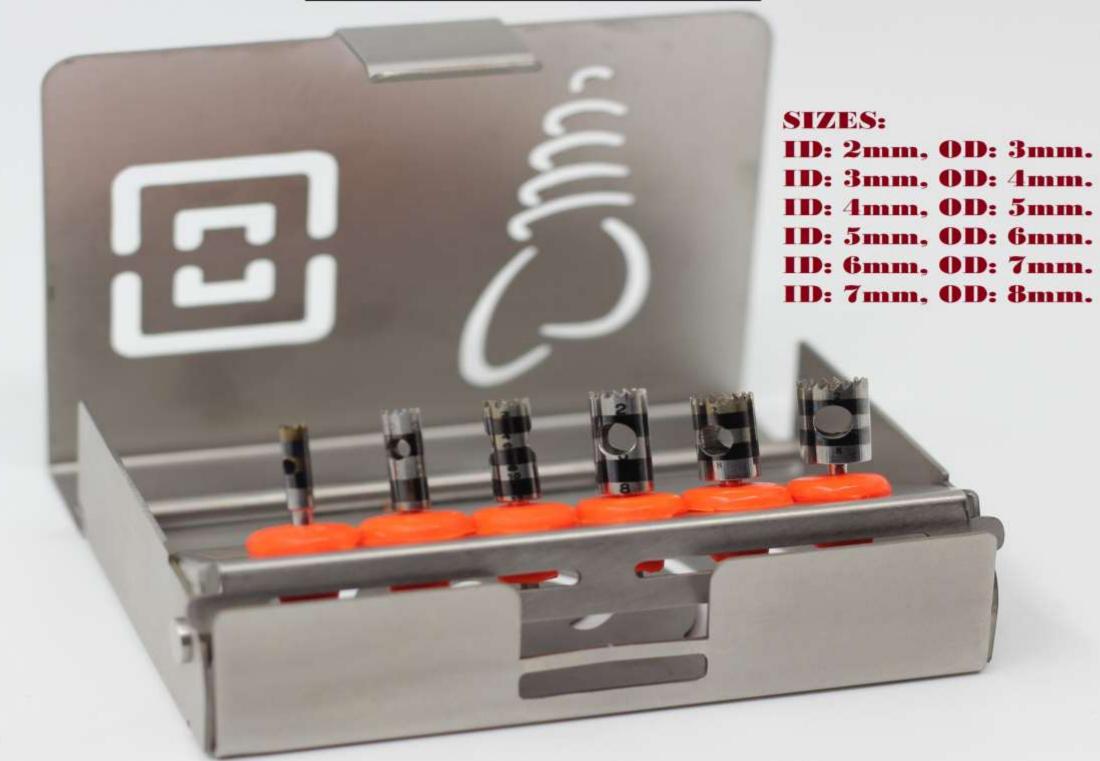
TISSUE PUNCH MOTOR DRIVEN

FOR FLAPLESS SURGERIES

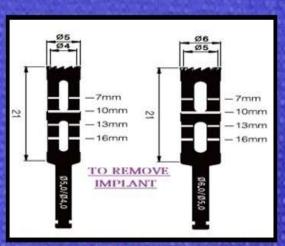


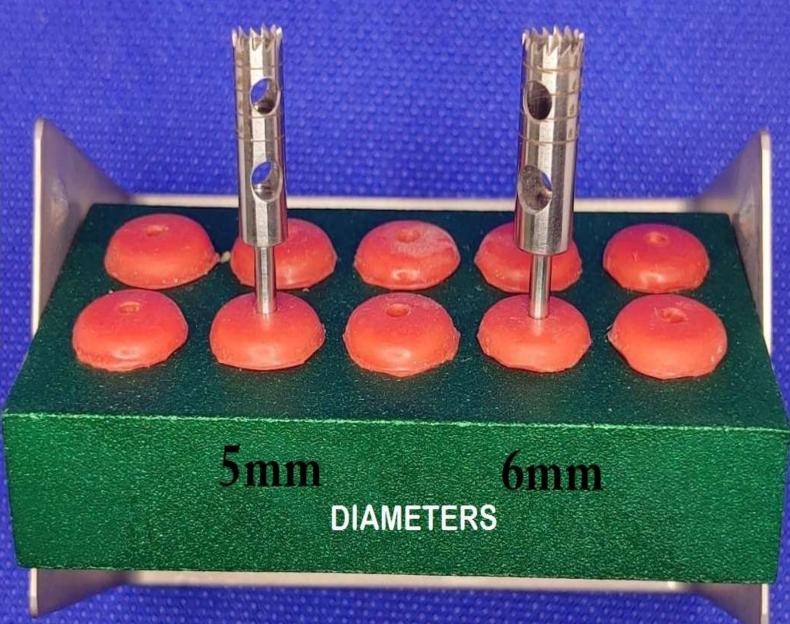


TREPHINE DRILLS



IMPLANT REMOVAL TREPHINE DRILLS





BONE MORSELIZER / BONE CRUSHER



PREMIUM BONE SCRAPER (EUROPEAN DESIGN)

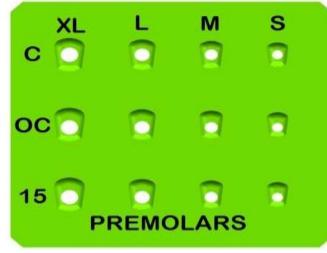


EMERGENCE PROFILE SILICON INDEX

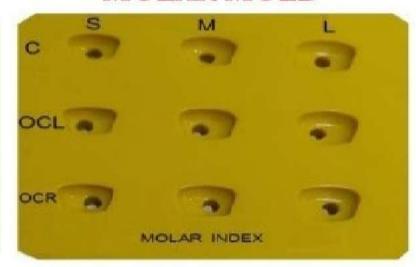
ANTERIOR MOLD

XL L M S

PREMOLAR MOLD



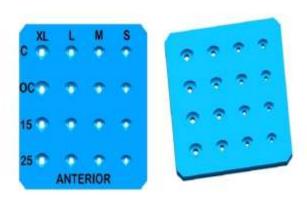
MOLAR MOLD



EMERGENCE PROFILE SILICON INDEX

ANTERIOR

ANTERIOR MOLD

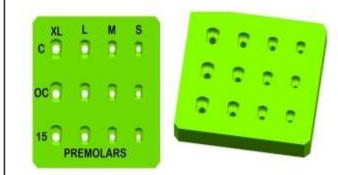


- 1) "C" STANDS FOR CENTERED HOLE FOR PLACING STRAIGHT IMPLANTS.
- 2) "OC" STANDS FOR OFFCENTERED HOLE FOR STRAIGHT IMPLANTS.
- 3) "15" STANDS FOR THE CUSTOMISED ANGLE IN DEGREE.
- 4) "25" STANDS FOR THE CUSTOMISED ANGLE IN DEGREE.

COLUMNS HAVE BEEN DESIGNED WITH 4 DIFFERENT SIZES TO ACCOMODATE UNIVERSALLY ANY CASE.

EMERGENCE PROFILE SILICON INDEX

PREMOLAR MOLD



- "C" STANDS FOR CENTERED HOLE FOR PLACING STRAIGHT IMPLANTS.
- 2) "OC" STANDS FOR OFFCENTERED HOLE FOR STRAIGHT IMPLANTS.
- # COLUMNS HAVE BEEN DESIGNED WITH 4 DIFFERENT SIZES TO ACCOMODATE UNIVERSALLY ANY CASE.

3) "15" STANDS FOR THE CUSTOMISED ANGLE IN DEGREE.

EMERGENCE PROFILE SILICON INDEX

MOLAR MOLD





- "C" STANDS FOR CENTERED HOLE FOR PLACING STRAIGHT IMPLANTS.
- 2) "OCL" STANDS FOR OFF CENTERED HOLE FOR LEFT SIDE INCLINED IMPLANT PLACEMENT.
- "OCR" STANDS FOR OFF CENTERED HOLE FOR RIGHT SIDE INCLINED IMPLANT PLACEMENT.
- # COLUMNS HAVE BEEN DESIGNED WITH 4 DIFFERENT SIZES TO ACCOMODATE UNIVERSALLY ANY CASE.

EMMERGENCE PROFILE SILICON INDEX (EPSI)

NEED FOR CUSTOMIZATION OF GINGIVAL EMMERGENCE:

Most of gingival former and cervical part of the implant abutments are rounded. While following the anatomy it is not rounded all the time.

- A) In anterior it is triangular
- B) In posterior it is semi trapezoid
- C) In premolars it is ovoid in shape.

AIM OF EMMERGENCE PROFILE SILICON INDEX:

- 1) The EPSI is a set of 3 silicone moulds that aim to modify the cervical contour of implant prosthetics and accessory components into anatomical shape.
- 2) This allows the peri-implant soft tissue to attain a better architecture and allows for a more natural emergence profile for implant prosthesis.
- 3) It can be used to shape healing collars, Ti- bases, temporary and final abutments, as well as impression copings.

PROPERTIES OF EMMERGENCE PROFILE SILICON INDEX

The cervical former is -

- 1) Fabricated from a biocompatible silicon material. It is autoclavable.
- 2) Is compatible with any implant system and any abutment
- 3) It is in 37 different gingival shapes that matches most of the clinical situations
- 4) There is no need to add separate medium.
- 5) Can be used to preserve the keratinized soft tissue after implantation.
- 6) Helps in recording accurate impression for implant and soft tissue around the implant.
- 7) The cervical former can be used with ALL IMPLANT SYSTEMS (Universal).

INDICATION ON THE SILICON INDEX:

N.B: threaded healing collars can be used only with centered shapes(denoted with letter C)

For other shapes a two piece healing collar or any other 2-piece accessory should be used.

STEPS FOR CUSTOMIZATION OF THE PROSTHETIC COMPONENTS:

1.Select the mould (anterior, premolar or molar) you want to use. Select the most suitable size based on the meso-distal width.

Usually the best size is 2-3 mm smaller than the meso-distal size of the tooth to be restored . This can be measured with a periodontal probe or a calibre.

2. Place the accessory to be modified inside the patient's mouth to identify the facial side.

Mark the centre of the facial site with a burr or an indelible marker. The trial will allow the identification if the implant inclination and if the implant is centralised or not.

3.Attach your accessory to an implant analogue and place it in the selected site in the former with the mark made intraorally facing the buccal or labial of the mould.

4.Adjust the vertical level by moving the analogue up or down . Eg. If the soft tissue is very thick or the implant is sub crestal, the analogue is moved further down and vice versa.

Note: It is important to have at least 0.5-1 mm of the accessory above the bone level before the customised composite part to avoid undue crestal bone loss. Customisation in immediate extraction socket is an exception to this precaution.

5.If you want to secure the composite to the used accessory, you can make the side walls rough with a burr.

On the contrary if you want to make a temporary crown on an abutment, you can paint it with Vaseline.

6. When everything is aligned and secured inject flowable composite or a similar material into the mould.

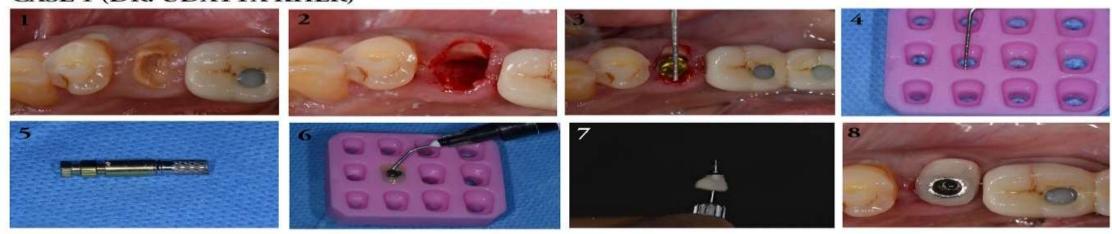
When using light cured resins it is advisable to enjoy and cure it on 2 steps if you are using a conventional light cure.

If you have a light cure that has 4 mm or more curing depth, you can do it in a single step. If you are using a dual cure resin you can inject it in a single step.

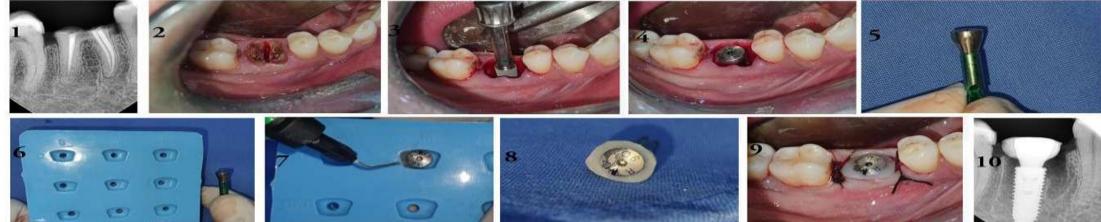
7. After curing, it is advisable to trim excess resin flashes. Usually only polishing using composite polishing tips is required.

Do not over finish to avoid altering the concavo-convex profile. Inspect for voids. If any, fill it with flowable resin and finish.

CASE 1 (DR. UDATTA KHER)



CASE 2 (DR. AKASH AKINWAR)





FLEXIBLE PERIOTOME STRAIGHT



Anterior with a straight ROUNDED blade and Socket Expander.



JULL-DENT

Contra Angle for Posteriors.

RIGID PERIOTOME

JULL-DENT

Anterior with a straight ROUNDED blade and Socket Expander.



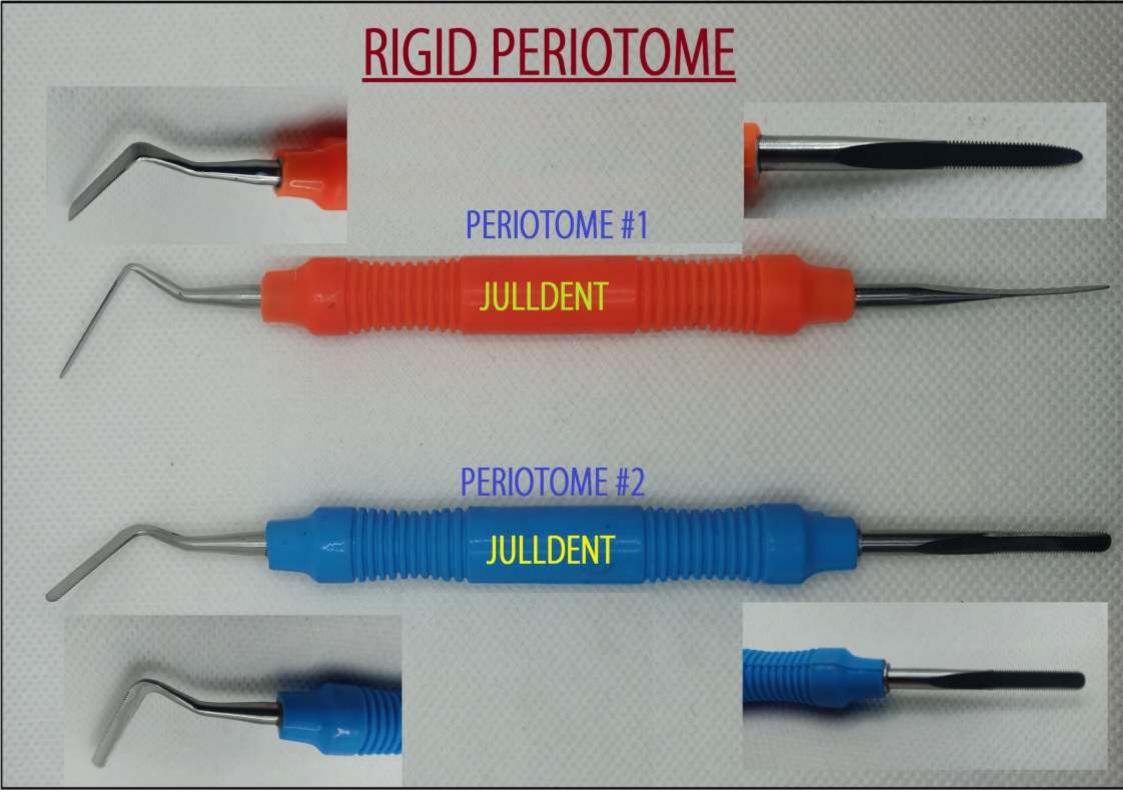




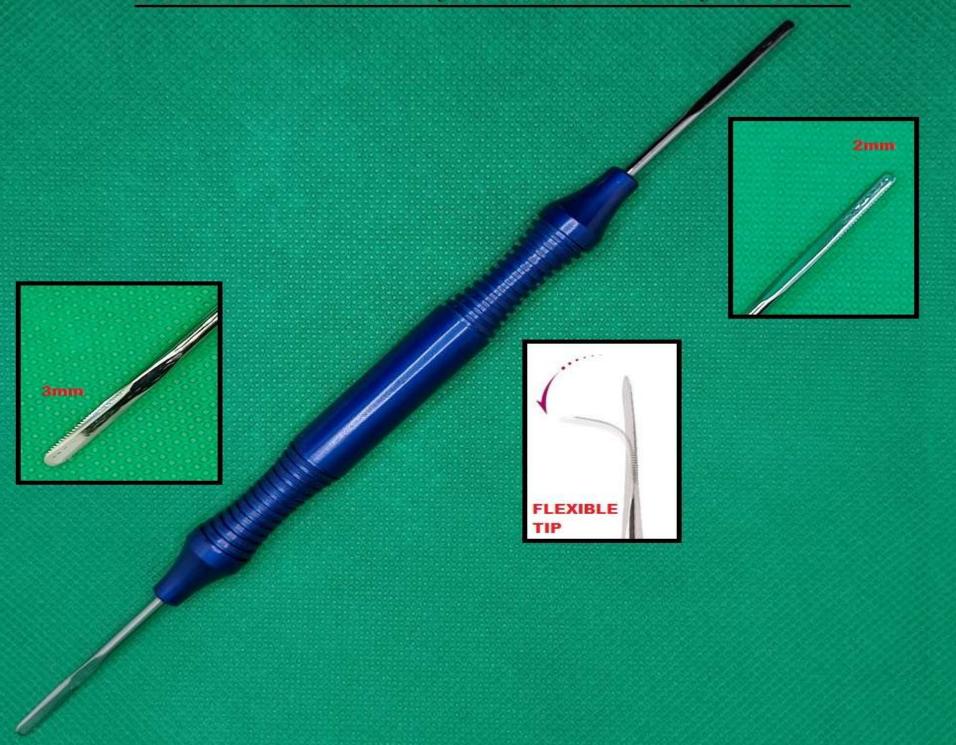




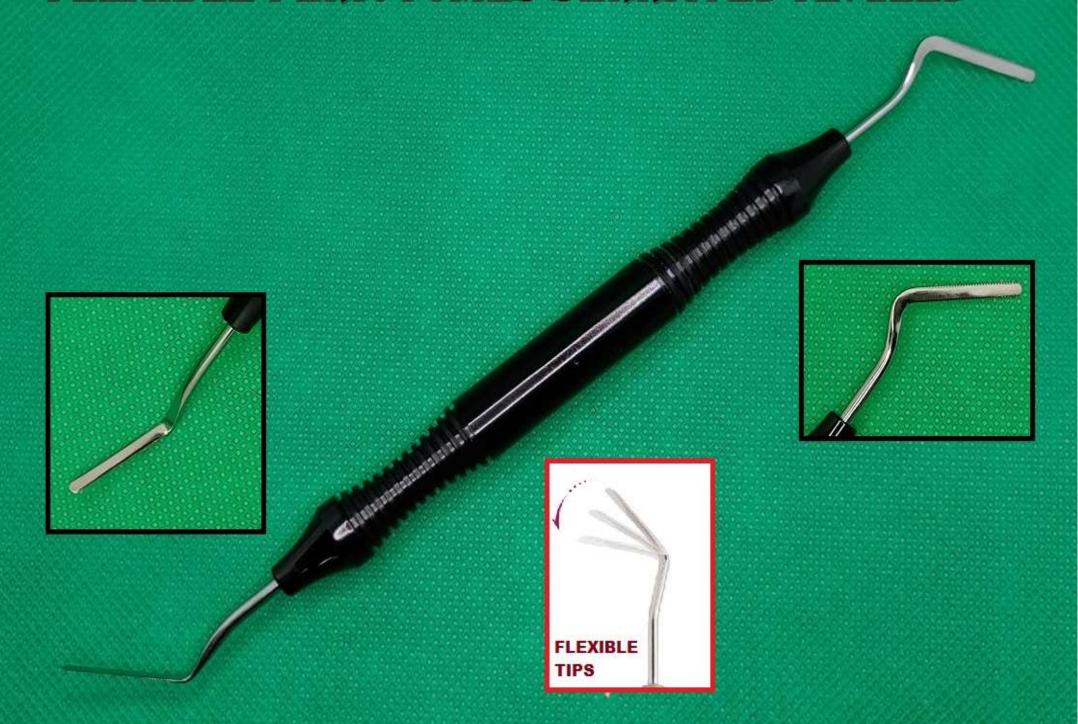




FLEXIBLE PERIOTOME STRAIGHT



FLEXIBLE PERIOTOMES SERRATED ANGLED



ROOT EXTRACTOR

SEPARATE THE PDL USING THE FLEXIBLE PERIOTOMES AND RIGID LUXATOR BEFORE USING THE ROOT EXTRACTOR.







- ☼ IT CAUSES LESS TRAUMA TO THE AREA THAN MOST ROOT REMOVER SYSTEMS.
- **NO NEED TO REMOVE EXCESS BONE ESSENTIAL TO RECONSTRUCTION.
- ☼ IF A ROOT TIP BREAKS OFF, IT TAKES FEW MINUTES NOT HOURS TO REMOVE IT.
- TIS SMALL SIZE ALLOWS FOR MINIMAL NAVIGATION AND CLEAR VIEW OF THE ROOT TIP FOR QUICK AND EASY REMOVAL. IT MOVES THROUGH DECAY TO ANCHOR INTO SOLID TOOTH STRUCTURE FOR ROOT TIP REMOVAL.



ROOT EXTRACTOR

MANUAL KNOB







ROOT PIECE EXTRACTION FORCEPS



LUXATORS

LUXATOR STRAIGHT 2mm



LUXATOR STRAIGHT 3mm



LUXATOR STRAIGHT 4mm



LUXATOR BACKWARD 3mm



LUXATOR CONTRA ANGLE 2.5mm



LUXATOR DUAL EDGE 2mm/3mm



LUXATOR LEFT ANGLE 3mm



LUXATOR RIGHT ANGLE 3mm



TWIST ROOT ELEVATORS

CUT THE PERIODONTAL LIGAMENTS AND REMOVE ROOT FRAGMENTS WHILE EXPANDING THE SURROUNDING BONE.



"TWIST THE ROOT TIPS OUT"



Step 1

Place the tip of the periotome to the gum line and apply pressure.

Step 2

Once engaged, continue to apply pressure and slowly begin to twist the periotome around the root.





Root Fragment Removal

Follow steps 1 & 2 until the **Twist Periotome** has wrapped around the fragment. At this point twist and lift until the fragment is dislodged.

Be careful not to use too much force as this may cause the periotome to bend and/or break.







TWIST ELEVATORS



FOR ATRAUMATIC ROOT PIECE REMOVAL

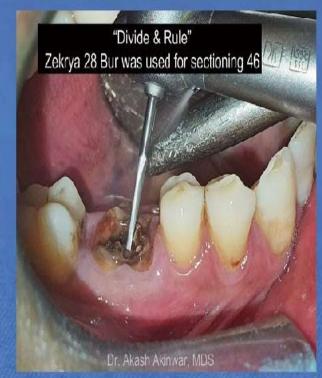
NEW PATTERN CROWN REMOVER



SOCKET SHIELD BURS LONG SHANK ZEKYRA 28 PREMIUM SET OF 3.





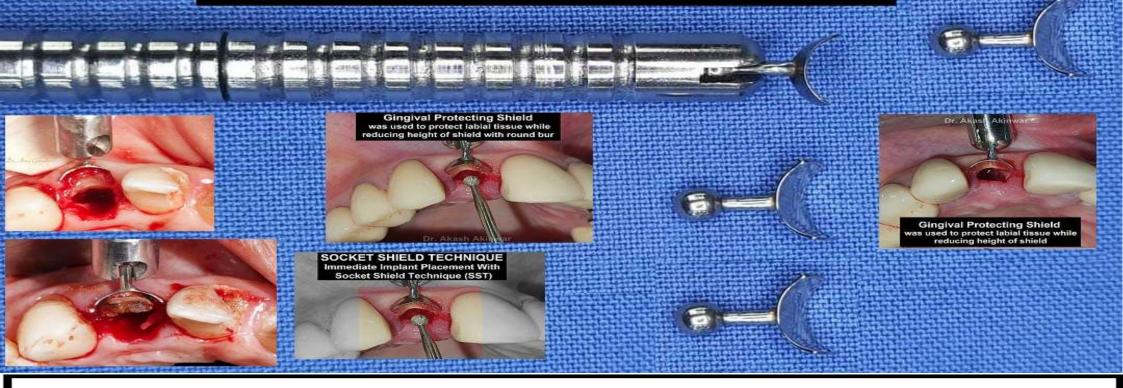




SOCKET SHIELD RETRACTOR/GINGIVAL RETRACTOR



Gingival Protecting Shield





Gingival Protector is a stainless steel instrument featuring an exclusive crescent-shaped tip attached to a metal handle. This dental instrument is ideal for gingival retraction and protection for veneer preparations, finishing porcelain, or resin veneer margins, Class V subgingival caries removal, checking marginal fit of crowns and checking loose bridges. Protects gums during tooth preparation without sacrificing visibility or mobility. Two different size stainless steel arcs shield the gingiva and are designed to fit the necks of all teeth.

GINGIVAL PROTECTOR ALLOWS:

- Retraction of the gum without injury-risk
- Complete protection of the gum during tooth preparation
- Good visibility

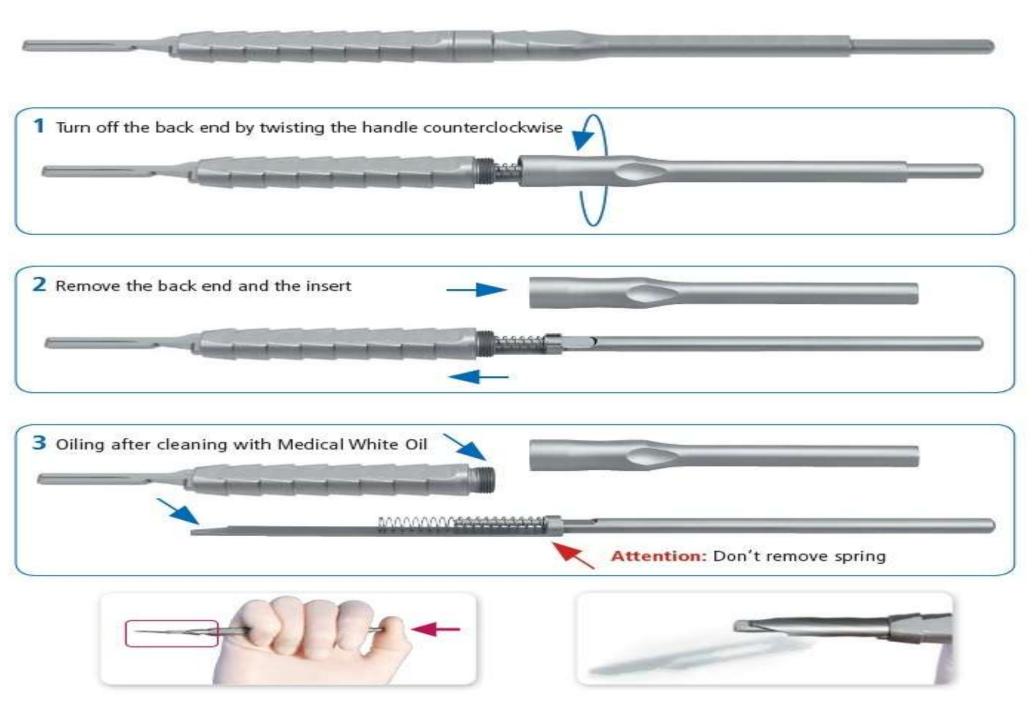
TIPS FOR USE:

- · Place the protector on the mandrel in the desired position and fix it firmly
- · Protect the patient's lips by placing a cotton roll between gum and lips
- Press the protector firmly against the tooth neck so that it fits
- Spray with water in order to prevent overheating while using a rotary instrument

SOCKET SHIELD RETRACTOR (DR. UDATTA KHER'S DESIGN)

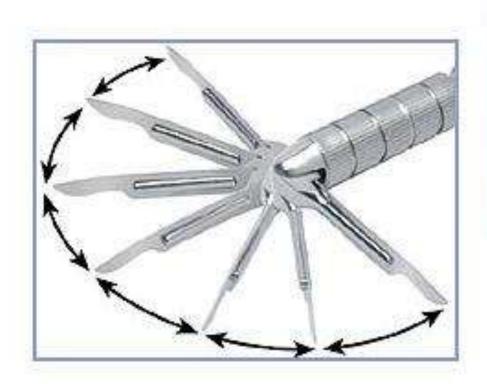


EASY EJECT SCALPEL HANDLE



Controlled dropping of the blade

SIX WAY ADJUSTABLE ANGLED SCALPEL HANDLE



It is very easy to mount knife blade since it is processed by precision machine.

Locks In At 90°, 60°, 30°, Straight, -30°, -60°, -90° Angles

SCALPEL BP HANDLE



ROUND BP HANDLE

360°ROTATABLE SCALPEL HANDLE

SAFETY BLADE REMOVER









loosen the screw

ilnsert the blade













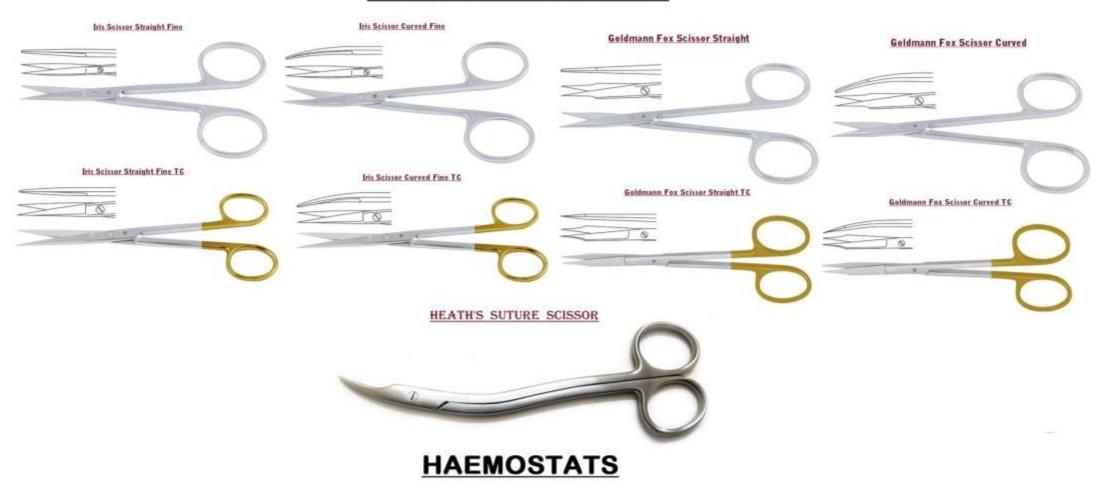


3
PULL THE BLADE FORWARD

SCALPEL BLADE 15C



SURGICAL SCISSORS





TISSUE FORCEPS



CASTROVEIJO MICRO SCISSORS



CASTROVEIJO MICRO NEEDLE HOLDER



MICRO SURGICAL FORCEPS 6"

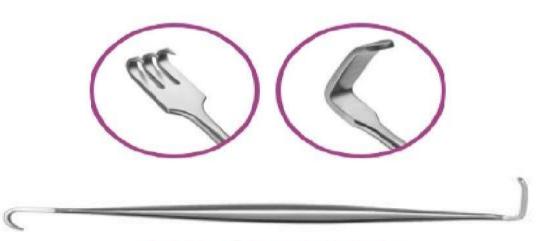


IMPLANT SURGICAL RETRACTORS









Kilner Cheek Retractor

AUSTIN CHEEK RETRACTORS



LIP AND CHEEK RETRACTOR



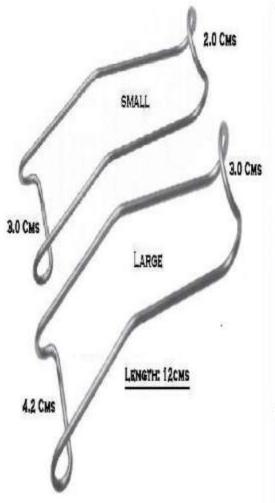
Weider Cobra TCR Retractor

Doyen Jansen Mouth Gag

Sternberg Cheek Retractor

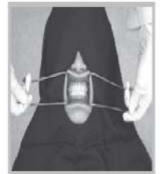












MINNEASOTA RETRACTOR WITH SUCTION



LASTER 3RD MOLAR RETRACTOR

SPECIAL RETRACTOR FOR UPPER IMPACTED WISDOM TEETH.

THE SHAPE OF THE HANDLE ALLOWS TO RETRACT THE CHEEK AND THE MUCOPERIOSTEUM

AND TO HOLD ANOTHER INSTRUMENT IN THE SAME HAND SIMULTANEOUSLY.



CHEEK, LIP AND TONGUE RETRACTOR



ALL IN ONE RETRACTOR 1.0

DESIGNED BY: DR. AKASH AKINWAR

- MALLAEBLE: CAN BE ADJUSTED TO ANY ANGLE.
- AUTOCLAVABLE.
- SOFT SILICON MATERIAL FOR SOFT RETRACTION.
- WILL NOT BEND WITH CHEEK, TONGUE OR LIP PRESSURE.
- INNOVATIVE.

USED: ALL RETRACTION NEEDS. SPECIALLY DESIGNED FOR INTRA ORAL SCANNING.



TONGUE RETRACTION

ALL IN ONE RETRACTOR 1.0



RVG SENSOR POSITIONER



- * IT IS COMPATIBLE WITH ALL RVG SENSORS
- *AUTOCLAVABLE

ENDO ASPIRATOR



ENDO FILE HOLDER



ENDO FILE HOLDING FORCEPS

