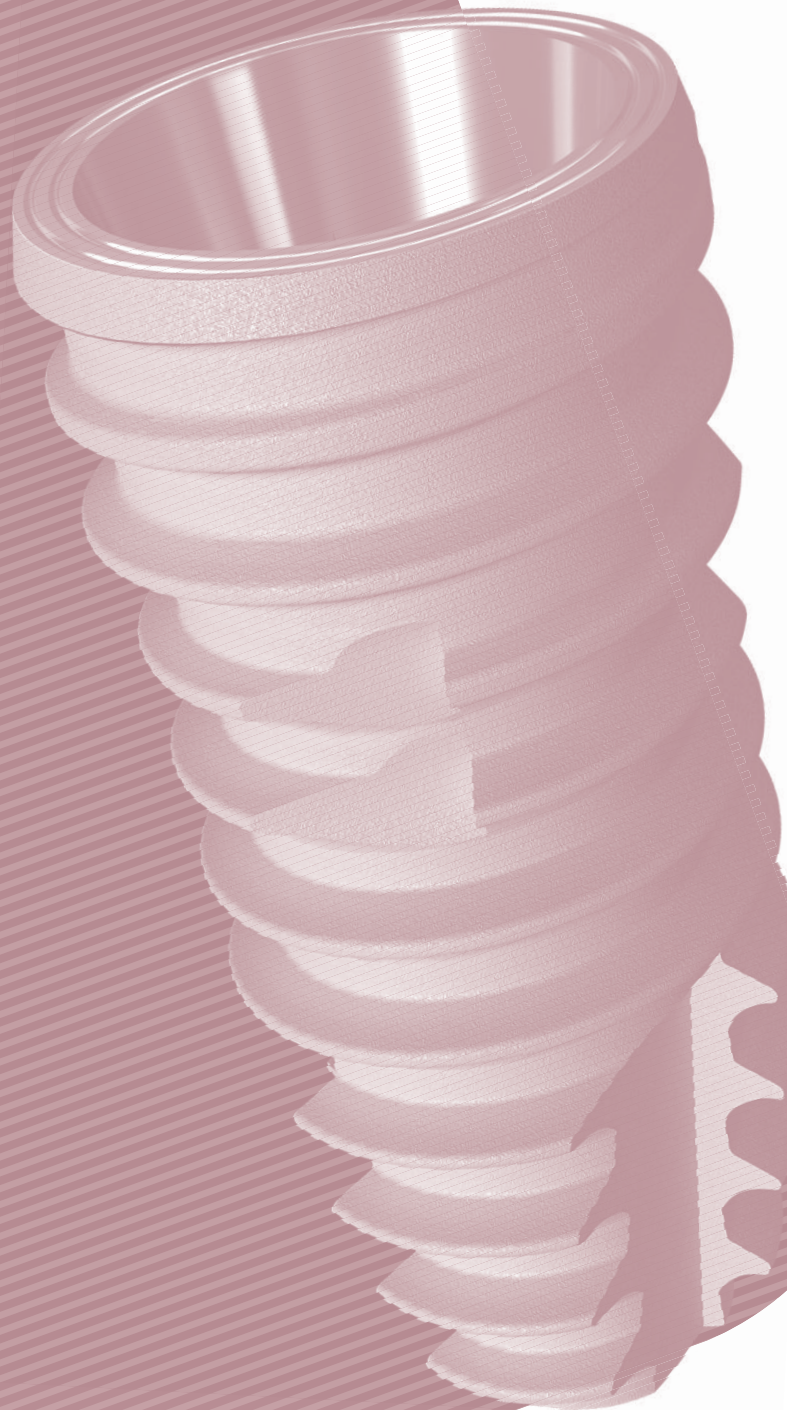


NEW
PRODUCTS

IS-III

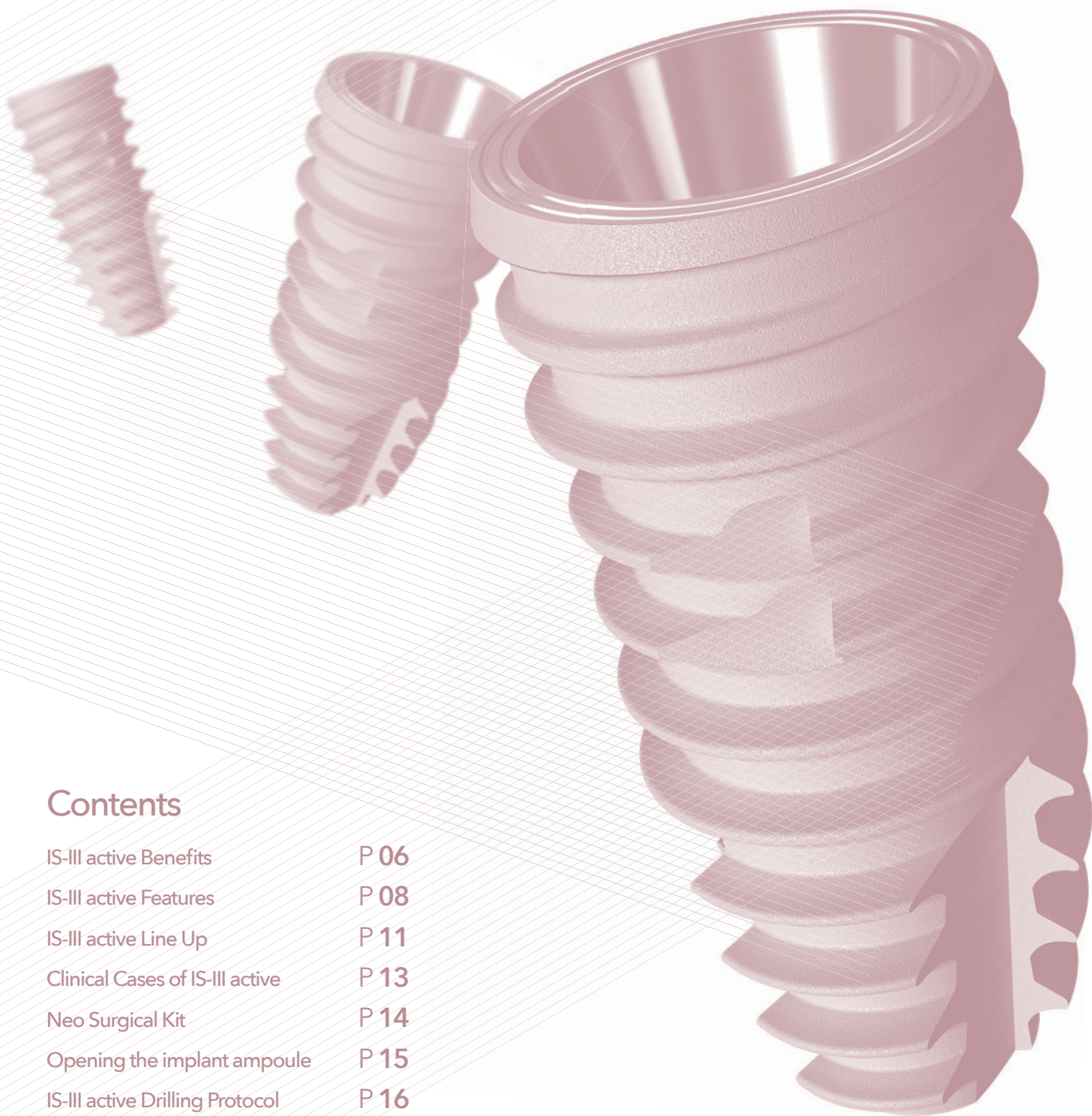
active



2017.03 E-Ver.01

Neo
Biotech
Satisfaction to Dentists



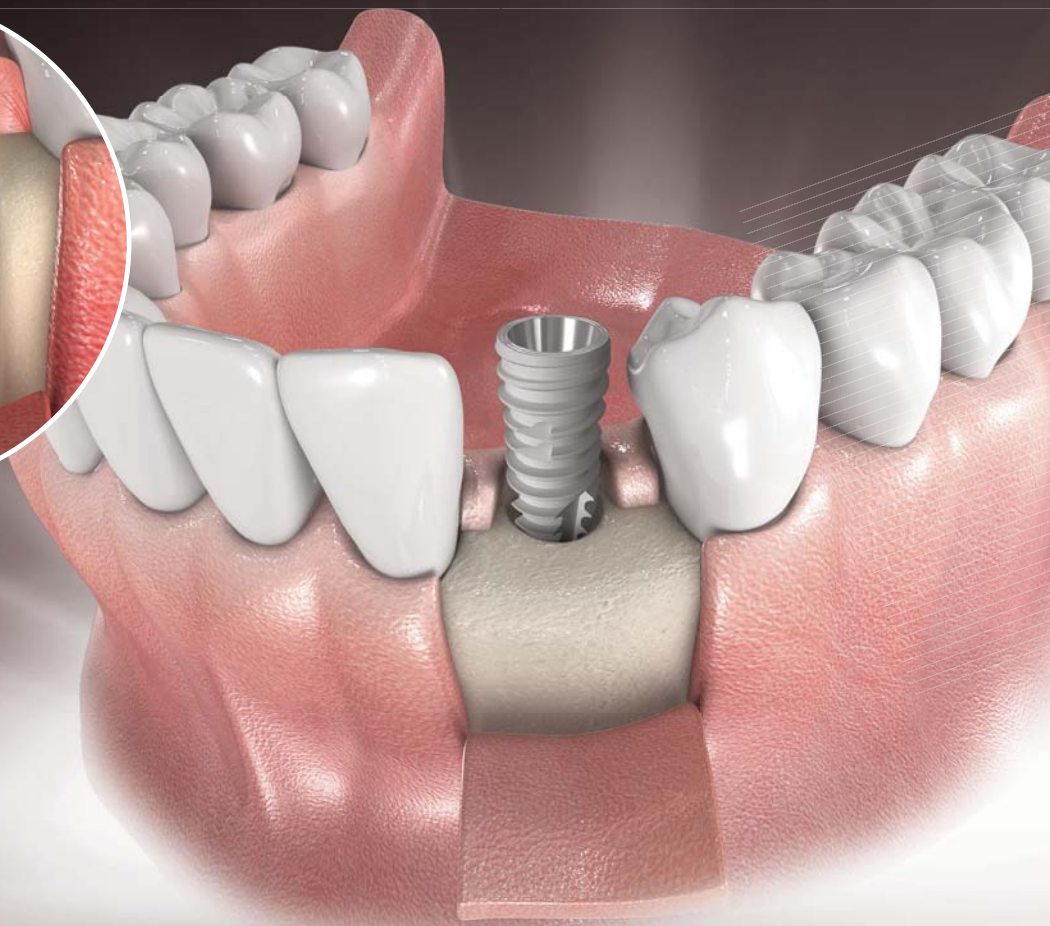
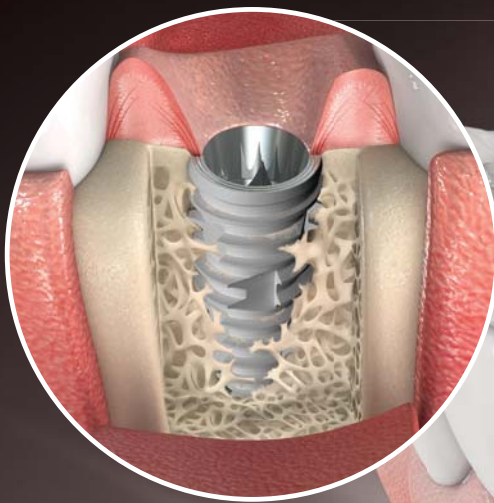


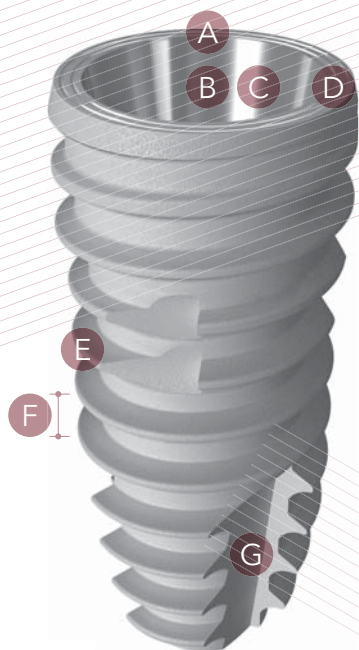
Contents

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WHY IS-III active?

IS-III active implant is structured to maximize initial stability and facilitate faster osseointegration with its scientifically proven SLA surface and fixture body design.





01/ Connection

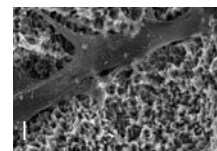
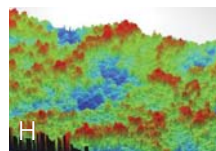
- A. Thicker Platform
- B. Anti-screw Loosening
- C. Abutment Compatibility

02/ Design

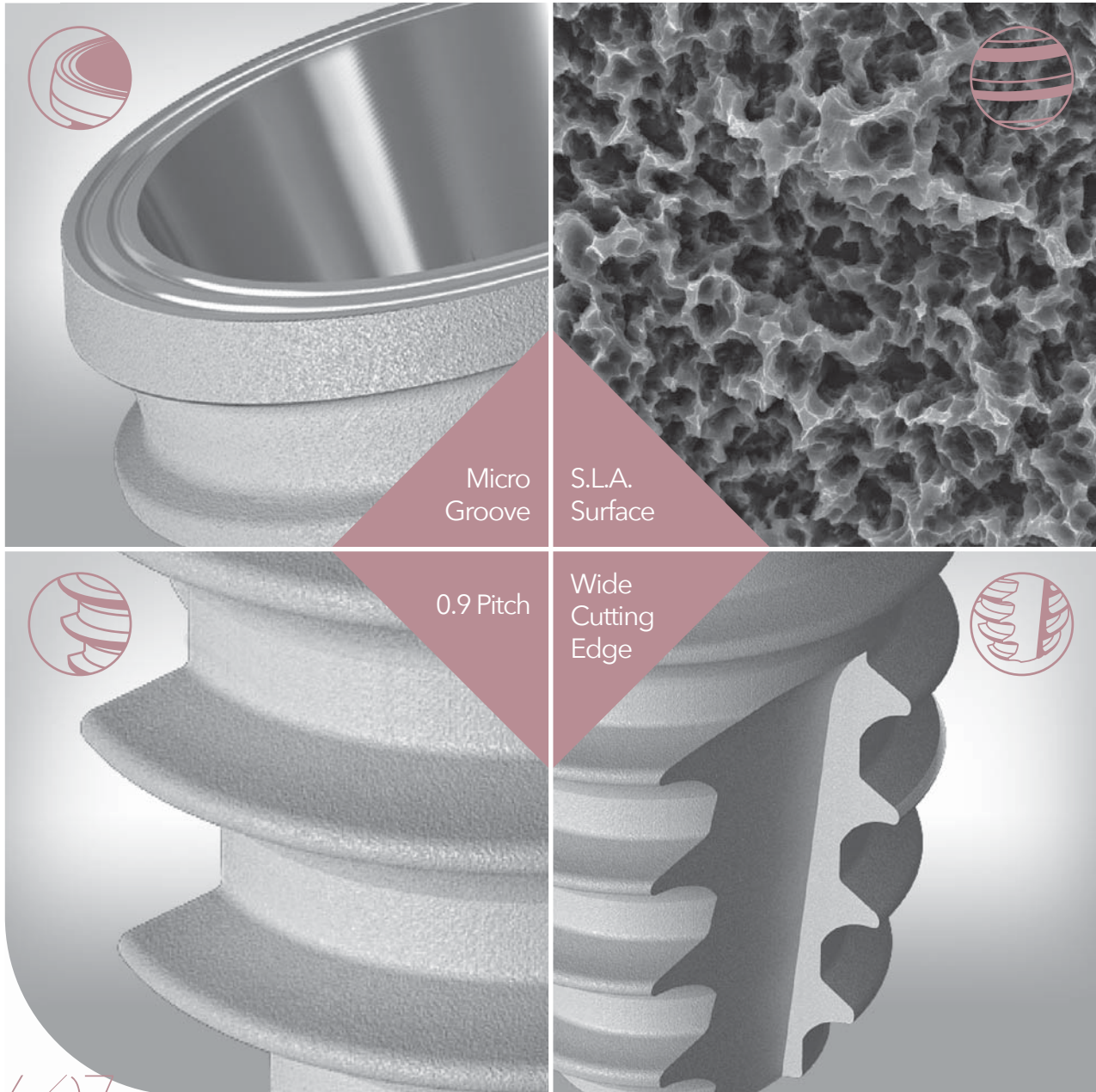
- D. Platform Microgroove
- E. Magic Threads
- F. 0.9 Pitch
- G. Cutting Edge

03/ Surface

- H. S.L.A. Surface
- I. Cell Adhesion Ability



IS-III active Benefits



06/07

01/ Connection

Anti-screw Loosening ▶ Two Connection Points

▶ **Eliminate screw fracture**

Abutment Compatibility ▶ Compatible with IS type

▶ **Conical 11° / Internal 2.5 Hex**

02/ Design

Platform Microgroove ▶ Enhanced Soft Tissue Sealing

▶ **Minimize bone loss**

0.9 Pitch ▶ Reduced Bone Compression

▶ **Optimal for Osseointegration**

Wider Cutting Edge ▶ Improved Self-tapping Ability

▶ **Maximize initial stability**

Magic Threads ▶ Endure Vertical/Lateral Force

▶ **Maximize initial stability**

03/ Surface

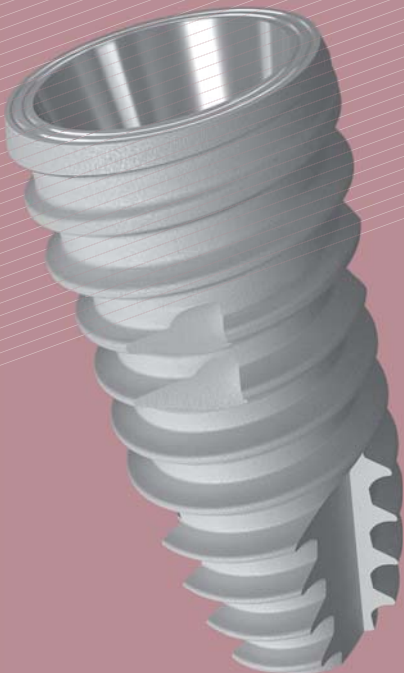
Improved Surface ▶ Increased Surface Area

▶ **Facilitate faster osseointegration**

Greater Cell Adhesion Ability ▶ More Cell adhesion

▶ **Facilitate faster osseointegration**

- ✓ Predictable Implant Placement
- ✓ Successful Primary & Secondary Stability
- ✓ Faster Patient Recovery & Masticatory Function



IS-III active Features

Platform & Connection



Minimize Bone Loss

Microgroove design at the upper platform of the fixture enhances soft tissue sealing, thus prevents bone loss.



Platform microgroove



Enhanced soft tissue barrier seal

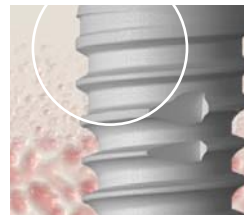


Minimize bone loss through soft tissue integration and optimized soft tissue seal

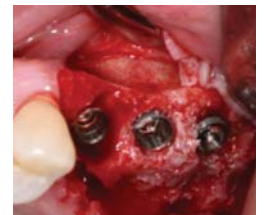
The coronal area of the fixture is also S.L.A. surface treated and takes a bevel border with open threaded design. These features facilitate osseointegration to crestal bone level, as well as minimize bone loss and maintain bone level.



Open threaded bevel coronal



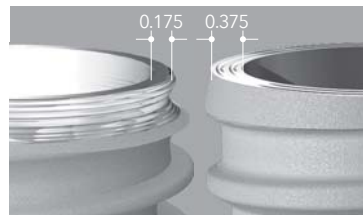
Minimize bone loss & maintain bone level



Successful osseointegration to bone level

Stronger Connection

Thicker connection through increased platform thickness.



Maintains connection thickness over 3mm



Increased strength of connection

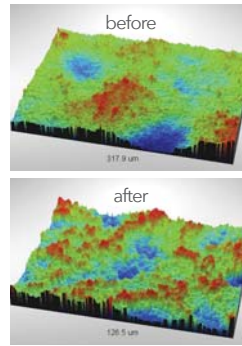
S.L.A. Surface



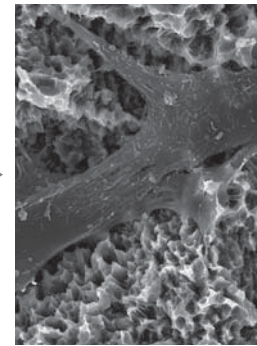
The new S.L.A. Surface with 40% greater surface area and 50% more cell adhesion promotes faster osseointegration.



Improved processing technique of the S.L.A. Surface



40 percent increase in surface area

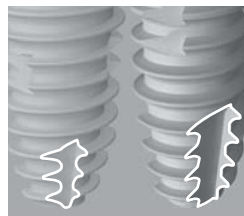


Reduced osseointegration time (50 percent increase in cell adhesion)

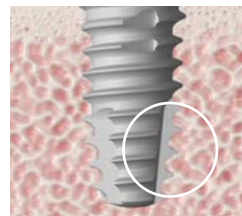
Wide Cutting Edge



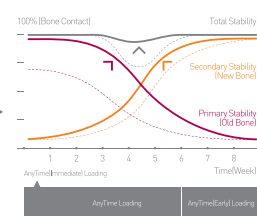
Wider cutting edge and enlarged surface area enhances initial fixation and offers clinicians more stable implant placement.



Doubled cutting edge surface



Improved Self-tapping ability while minimizing bone compression



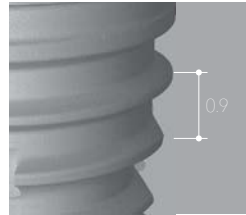
Maximized initial fixation (AnyTime Loading)

IS-III active Features

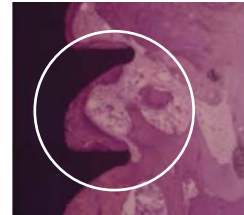
0.9 Pitch



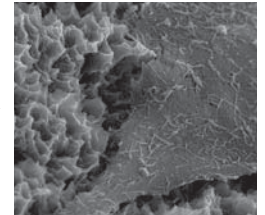
Optimum Pitch for Osseointegration.



Increase in thread pitch to 0.9



Minimal bone compression
(Prevent bone necrosis)



Provide optimal condition
for osseointegration

Surgical Kit

More accessibility with improved cutting force of the surgical drills, now available in two different lengths.



Dual drill length

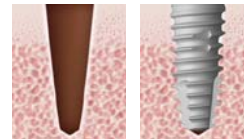


Clinicians decide the loading time by utilizing either the cortical drill or the cortical tap according to the patient's bone density and oral conditions.



Cortical Drill

Utilized for Delayed Loading by drilling the crestal cortical bone.

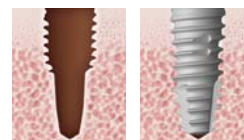


Delayed Loading



Cortical Tap

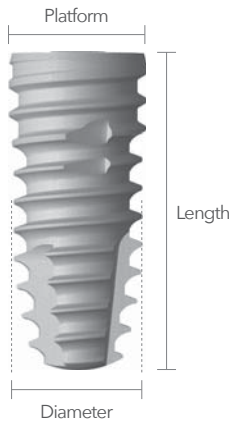
Utilized for Immediate (Any-Time) Loading by tapping the crestal cortical bone.



Immediate Loading (AnyTime Loading)



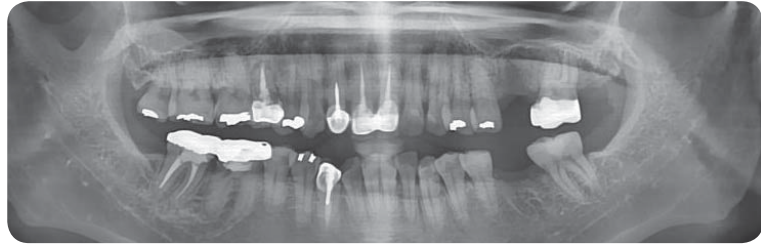
IS-III active Line Up



Diameter	Platform	Length (mm)				
		7.3	8.5	10.0	11.5	13.0
Ø3.5	Ø3.6					
			WIS3508AP	WIS3510AP	WIS3511AP	WIS3513AP
Ø4.0	Ø4.1					
		WIS34007AP	WIS34008AP	WIS34010AP	WIS34011AP	WIS34013AP
Ø4.5	Ø4.5					
		WIS34507AP	WIS34508AP	WIS34510AP	WIS34511AP	WIS34513AP
Ø5.0	Ø5.0					
		WIS35007AP	WIS35008AP	WIS35010AP	WIS35011AP	WIS35013AP
Ø5.5	Ø5.5					
		WIS35507AP	WIS35508AP	WIS35510AP	WIS35511AP	WIS35513AP
Ø6.0	Ø6.0					
		WIS36007AP	WIS36008AP	WIS36010AP	WIS36011AP	WIS36013AP

Clinical Cases of IS-III active

Case 1



Missing tooth



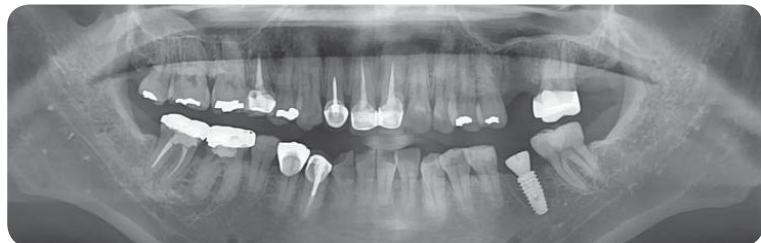
IS-III active Placement



35~40Ncm of Insertion Torque



Healing Abutment & Suture



Case 2



Missing tooth



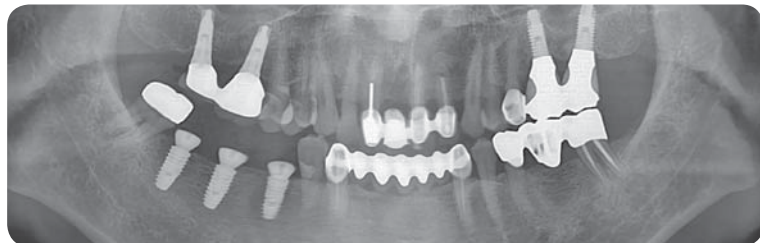
Drilling & Cortical Tapping



35~40Ncm of Insertion Torque



Healing Abutment & Suture



Opening the **implant ampoule**



Remove the square-shaped ampoule from the blister.



Turn the lid to open the ampoule.



Remove the inner circular ampoule from the outer square-shaped ampoule.



Drop the inner ampoule onto the operating table.



Remove the safety cap (A cover screw can be found inside the cap).



Hold the sides of the ampoule when removing the cap.
Must be cautious not to grip on the clip. (Opening of the clip will cause the fixture to fall into the ampoule.)



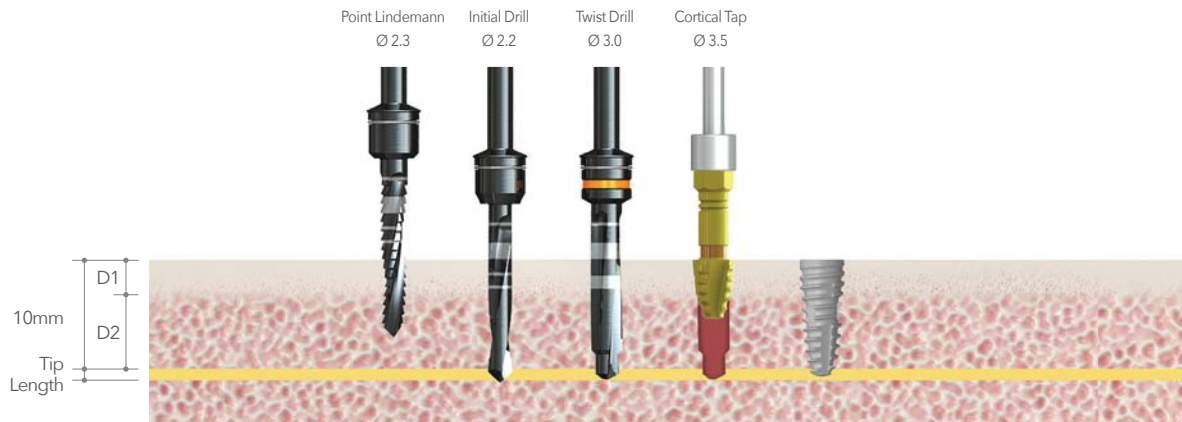
Hold the upper part of the clip and connect the fixture driver to the implant.



Simultaneously, push the lower part of the clip for clip opening and lift the implant out of the ampoule.

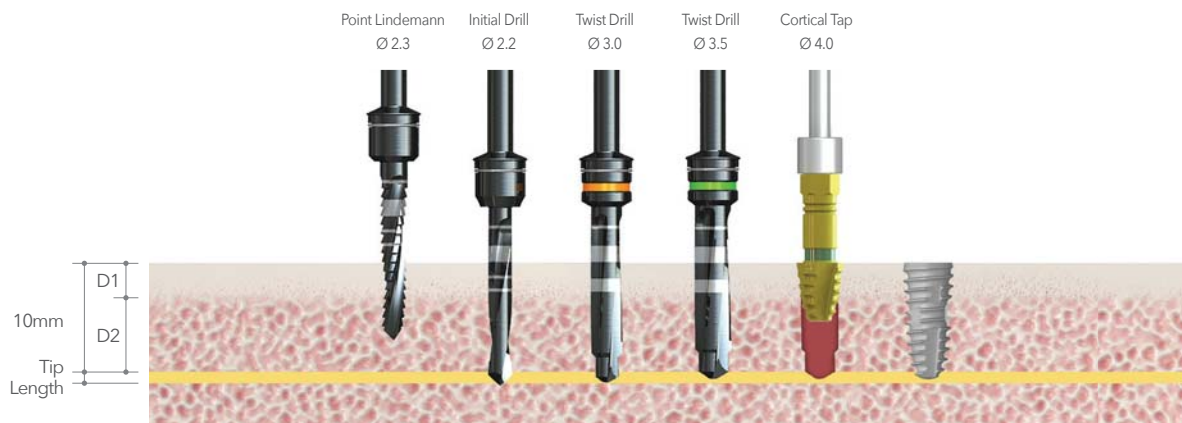
IS-III active Drilling Protocol

IS-III active Fixture $\text{Ø}3.5 \times 10\text{mm}$ (D1/D2 bone)



In soft(D4) bone, use $\text{Ø}2.2$ initial drill as the final drill

IS-III active Fixture $\text{Ø}4.0 \times 10\text{mm}$ (D1/D2 bone)

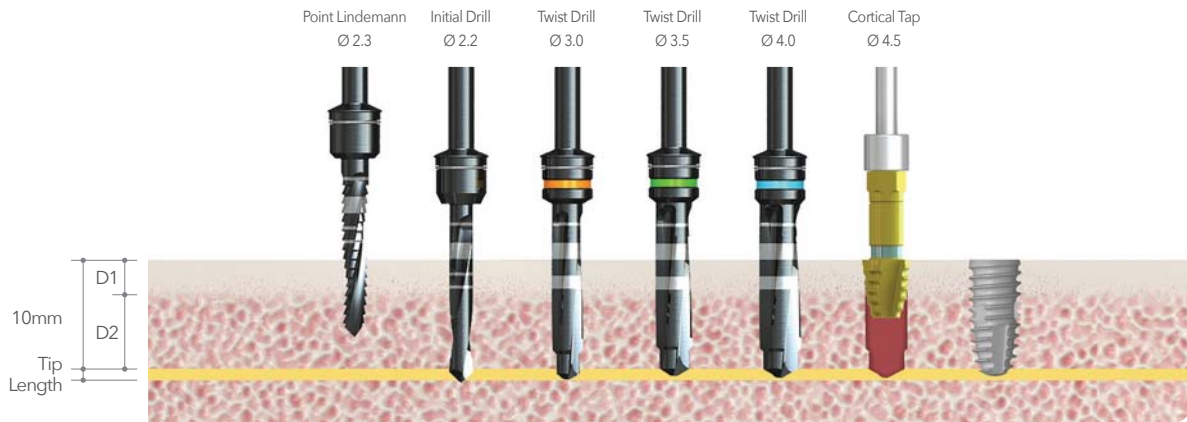


In soft(D4) bone or in condition of getting initial fixation at implant apex, $\text{Ø}3.0$ twist drill is the final drill

Drilling Speed & Torque

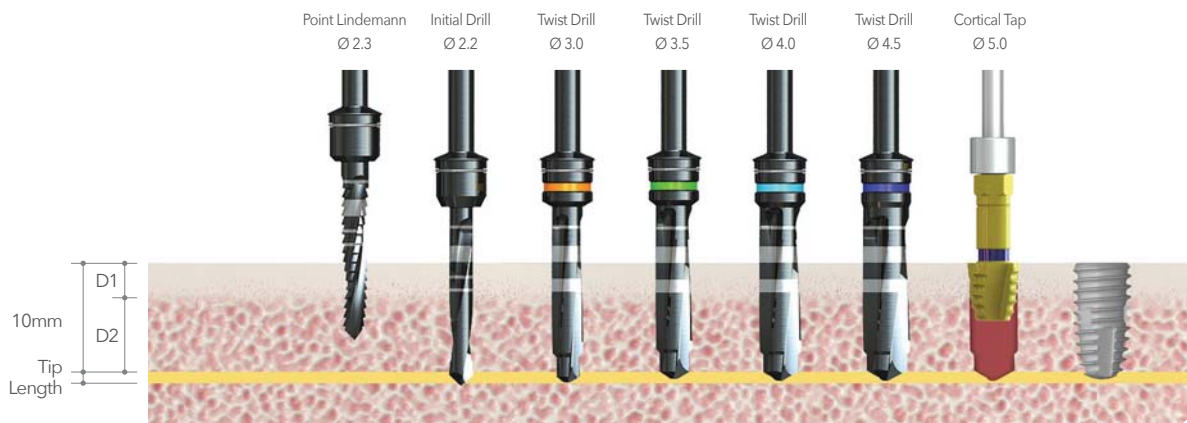
Point Lindemann, Initial Drill, Twist Drill : 1,200rpm / 35~45Ncm Cortical Tap : 50rpm / 50Ncm
Cortical Drill : 1200rpm / 50Ncm (Conventional Loading case)

IS-III active Fixture $\varnothing 4.5$ X 10mm (D1/D2 bone)



In soft(D4) bone or in condition of getting initial fixation at implant apex, $\varnothing 3.5$ twist drill is the final drill

IS-III active Fixture $\varnothing 5.0$ X 10mm (D1/D2 bone)



In soft(D4) bone or in condition of getting initial fixation at implant apex, $\varnothing 4.0$ twist drill is the final drill



History of Neobiotech

Sep.2016	IS-III active
Jul. 2016	EZ GBR System
May 2015	Encoded Healing abutment
Apr. 2015	CAMeleon cs
May 2014	World Class 300
Dec.2013	Manufactured CAMeleon
Nov.2013	EB-II active
Oct. 2013	SinusAll Kit PickCap Impression Kit
Jun. 2013	IT-II active
Oct. 2012	Prosthetic Kit / Accessory Kit
Jun. 2012	Neoguide system
Mar. 2012	GBR Kit
Oct. 2011	IS-II active, Quicktight
Jun. 2011	IS-II, S-mini & ACM
Oct. 2010	CTi - mem
Feb. 2010	SR Kit
Jun. 2009	FR Kit
Mar. 2009	Wide Implant
Nov. 2008	CMI IS implant
Jul. 2008	SLA-Kit
Mar. 2008	SCA-Kit
Mar. 2008	Obtain the patent of CMI Implant
Sep. 2007	Merged with "Osscare.Co.Ltd"
Jun. 2007	CMI implant(External Type)
Feb. 2007	Change of Management
Jul. 2000	Foundation of "Neobiotech.Co,Ltd,,"



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