

Reasons you need Ritter Implants













The **Reasons** part 1

PAGE 6



Reason#1

Ritter Implants are made of the strongest "**Grade 5**" **Titanium** alloy which goes through a special **sandblasting and etching process.**



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Reason#2

All Ritter Implants include a Cover Screw.



PAGE 8



Reason#3

All Ritter Abutments are packaged including an Abutment Fixation Screw made of Titanium Grade 5.



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Reason#4

The overall **superior Implant design** attributes to the Ritter Implants Increased primary stability and High Insertion torque values.



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Reason#5

The internal **Hex Connection** (Platform) is the most widely used connection in the industry.



PAGE 16



Reason#9

Ritter Implants Abutments provide an **Emergence Profile** for perfect soft tissue management.



PAGE 12



Reason#6

Ritter Implants has **two platforms** and a wide range of **Platform Shifting/Switching.**



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Reason#10

Ritter Implants is the only company who provides an **Angled Closed Tray Impression Coping**, 15°/25°.



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Reason#7

6 mm **short Implants** in the 5 and 6 mm Diameters.



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Reason#11

Ritter Implants Scan Body/Abutment is a dual purpose scan body and temporary/provisional abutment.



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Reason#8

Ritter Implants provides a **Narrow Line** with diameters of 3.0/3.3 mm









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Reason#12

Ritter Implants Pick Up transfer abutments "PUT" can not only be used for taking an impression but also for the final prosthesis made from Titanium Grade 5. Our "PUT" also come in Angled 15°/25°, exclusively by Ritter Implants.



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Reason#13

All Ritter abutment screws are customized to accept the same screw driver - no matter what platform or type of abutment.



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Reason#14

Ritter's AZA line are made in both Chromium Cobalt and Titanium and are dual purpose as they can be used as Castable with Chromium Cobalt or a Tibase made from Titanium.





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Reason#15

Clica™ Overdenture is known around the world as an "Equator," offering a narrower profile than tradtional overdenture abutments.***



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Reason#19

Ritter Multi Abutments have been manufactured with a wider stronger M1.6 screw instead of a M1.4 screw that most companies use on Multi unit restorations. Ritter offers this packaged with very commonly used accessories.





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Reason#16

Reason#17

Clica™ Overdenture PLUS offers a

more traditional wide profile ***

Clicg™ Overdenture is manufactured in angled versions encompassing 18° and 30°. ***



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Reason#20

Ritter Multi Abutments are also made for its 3.0 and 3.3 Narrow line platform.



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Reason#18

The Clica™ overdenture Plus is manufactured in angled versions encompassing 18° and 30°. ***



*** All Clicq™ products include all the traditional processing parts.





The **Reasons** part 2

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Reason#21

Multi Unit Kits*: **Special Kit Comes** with **36 Abutments** making a complicated procedure much easier!



*** NOTICE: NOT ALL ITEMS OF THIS CA-TALOG ARE APPROVED FOR SALES IN ALL COUNTRIES. PLEASE CHECK THE IMPORT REGULATIONS OF YOUR TERRITORY.***

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Reason#22

Ritter Implants were the first to transition a patient from a removable Denture to an "all on X" as a removable case can be planned with the "Angled Clicq"" abutments.





Reason#23

All Surgical Kits contain all basic tools to place **all Ritter Platforms.**

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Reason#24

The Compact Surgical Kit contain all basic tools and drill stop function provided by drill stopper sleeves with the tools to place all Ritter Platforms.









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Reason#28

Our Complete Surgical Kit provides

implant placing drivers with

special measuring and registration

markings on all tools.

Flatside Indicator

Reason#30

The Guided Kit is one of the Best and Easiest on the Market containing a





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Reason#25

All Ritter Implants Surgical Kits are equipped with a complete prosthetic selection of the Ratchet, Handpiece, Hand Toraue Drivers purchase of a separate Prosthetics Kit is unnecessary with Ritter Implants.



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Reason#29

1 mm

All Implant Drivers are spring loaded - making it Impossible for an Implant to be dislodged.

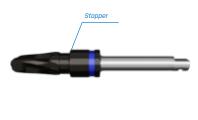


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Reason#26

Our Complete Surgical Kit is the easiest and safest Surgical Kit - containing all the items of the Compact kit- except the **Stoppers** are built into each drill - there is a drill for every Implant we produce and more!





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PAGE 53

Reason#32

Reason#31

Most guided kits need to use

spoons to change drill diameter -

Ritter is spoonless!

STANDARD LINE

Most guided kits need metal sleeves in the guide because they guide the cutting portion of the drill - Ritter guides the barrel of the drill - and is sleeveless!



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Reason#33

The Torque Ratchet has a simple Screw to reverse the direction of turning.

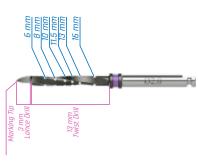


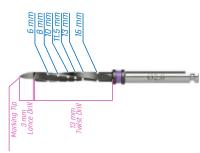
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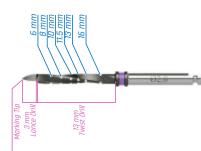


Reason#27

Our Complete Surgical Kit is equipped with our exclusive 3 in 1 Starter/Marking/Lance Drill.







Ritter SB/LA method

The Implant surface – Sand blasted with Large Grit, Acid Etched



- There are only two companies who use a certified SB/LA surface treatment. Ritter is one of them.
- 2) Ritter Implants was the first to develop the SB/LA surface on Grade 5 with KKS in Switzerland and it was proven successful.
- 3) Titanium Grade 5 with SLA is still the very best surface treatment in the world.



Scan me and watch video about Ritter Implants surface treatment

Ritter Implants are made of a "Grade 5" Titanium alloy (Ti6AL4VELI: 90 % Titanium, 6 % Aluminum, 4 % Vanadium), which goes through a special sandblasting and etching process.

Our method creates large surface differences that allow **strong adsorption of plasma proteins and blood** into the micropores of the implant immediately after insertion.

Benefits

- · Bone strengthening due to early Implant contact
- · Increased stability
- · Shortened healing phase
- \cdot Higher predictability of the healing process

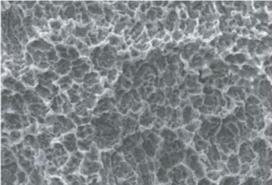
Corundum sandblasting and acid etching of the implant surface

- Sandblasting creates a macro surface of 20–40 µm (microns)
- Double thermal acid etching process creates structures between 1–5 µm
- · Material forms a hydrophilic titanium oxide layer

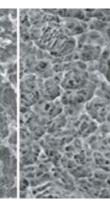


Titanium Grade 5 ELI

Better physical properties & biocompatibility







Ritter Implants **SB/LA SEM Image,** Titanium Grade 5



With the secondary electron mode of Ritter Implants Image the topography is more pronounced while the back-scattering mode reflects better the material contrast.

Conclusion: Ritter Implants SB/LA reaches the results even better with alloy Titanium Grade 5, (Ti6AL4VELI: 90 % Titanium, 6 % Aluminum, 4 % Vanadium)



"The excellent biocompatibility and physicochemical properties of Ti dental implants position Ti as the gold standard in implant dentistry. While the safety and success of Grade 4 Ti is well documented, Grade 5 offers better physical properties and similarly outstanding biocompatibility and survival. As for the various surface modifications. SLA appears to combine the advantages of the physical and chemical methods successfully, making it a favorable alternative. High levels of osseointegration and favourable long-term survival of SLA dental implants were confirmed by several in vitro and clinical studies." Based on the current literature, we can conclude that Grade 5 Ti with SLA-modified surfaces assures the best dental implantation outcomes.



By the ICOI - International Congress of Implantology

Sandblasted, large grit, acid-etched implant surface, (SLA) is a type of surface treatment that creates surface roughness with the goal of enhancing osseointegration through greater boneto-implant contact (BIC). The SLA process increases the rate at which osseointegration occurs by using a combination of grit and acid etching to give the surface increased roughness on multiple levels. This allows osteoblasts to proliferate and adhere to the implant surface. Through osseointegration, SLA can help provide increased stability of the implant which will ultimately lengthen its longevity. The use of specialized implants by Straumann SLA implants, such as the SLActive implant and the Roxolid SLA implant, reduces the amount of treatment time required while also increasing the treatment predictability. The Roxolid SLA implant can also reduce the need for bone augmentation to assist those patients who have insufficient bone. The SLA process offers a variety of benefits to patients requiring increased ossification prior to an implant.

Cover and Fixation Screw

All Implants & Abutments include screws



Reason#2

includes a
Cover Screw







Reason#3

Every Ritter Abutment

includes an
Abutment
Fixation Screw



Most Ritter Implants Screws
are made of Grade 5 Titanium
and are not comparable to any
other screws!





The unique packaging design

Clean & safe packed





The LOT Number is clearly marked on the outside, so the treatment team can quickly and reliably identify the diameter and length of the implant.

All implants are supplied in single or 10-packs; while prosthetic components are packed in single 20-packs. (some inventory may still be packed in 6 or 10 packs).

The Ritter Spiral Implant SB/LA is protected by a sealed package with a sterile barrier. The implant is supplied including the Cover Screw, which is located in the bottom lid of the inner tube. (old packaging)



- Clean & safe packed
- Sophisticated design
- Easy handling



Ritter Implants single package top and side view. The different dia-8mm meters are color coded and help 8mm 3,75 Ø with easy handling. **⊕ ⊕ ⊕ ⊕**

SB/LA



old packaging



new packaging



Scan me and watch a video about the packaging usage and handling.



The key features

Ritter Implant Internal HEX construction



The internal hex connection (Platform) is the most widely used connection in the industry – the benefits are that compatible parts exist in every part of the world. **Over 50 % of all Implant production are made with Internal Hex.** This connection (or "platform connection") is used by Zimmer®, Bio Horizons®, MIS®, Implant Direct Legacy® and many more. The Internal Hex is also the easiest connection to restore against the 2nd most popular connection the **tapered Internal Hex.** Often called a morse taper or conical connection (see next page).

The overall superior Implant design attributes to the Ritter Implants increased primary stability and high insertion torque values.

Connection

Internal Bevel-Hex connection, without micro gaps

Unique Thread

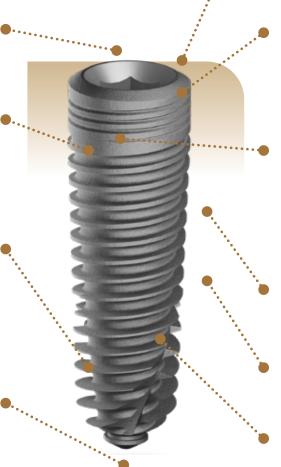
Wider threads in the upper body that increase surface area and reduce bone stress, then transition to sharper threads for self-tapping function

Apical blades

Allow angular adjustment for parallelism during the insertion process

Rounded Apex

The rounded opex minimizes the risk of rupture of the membrane during sinus lift procedures



Platform switching

Standard abutments fit all regular diameters 3.75 mm, 4.2 mm, 5 mm & 6 mm

Narrow Line Abutments fit all narrow diameters 3.0 mm & 3.3 mm

Micro Grooves

Add greater surface area and reduce stress on crestal bone, prevent loss of marginal bone and increase "bone-to-implant" contact.

SB/LA

Sandblasted with large particles, acid etched macro surface of 20-40 µm to a micro surface of about 2 Micrometer, (also called micron, metric unit of measure for length equal to 0.001 mm, or about 0.000039 inch.)

Tapered Body

Increases initial stability while protecting adjacent roots

Dual Cutting Edge

Enhances self-tapping and increases ease of insertion

Progressive Threads

Relaxes stress points in bone, creates better hold in soft bone, suitable for all bone densities



^{*}The brand names® mentioned are protected and the property of their respective brand owners.

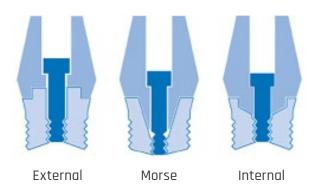
Internal HEX Connection

Platform Switch



Tapered Hex, Morse Taper and Conical Connection are the 2nd most common connection and are used in popular manufacturers such as Nobel®, Hiossen®/Ostem®, Neodent® and Megagen®.

As you can see in the illustration that the body of the abutment engages into the body of the implant. The manufacturers of these products claim that this creates a better seal between the abutment and the Implant than an internal hex. There exist no scientific proof of such myth. Contrarily the abutment weakens the coronal portion of the Implant and coronal breakage is very common in these implants. In addition, the tapered shape of the connection creates a cold welding of the abutment into the implant, making nearly impossible to remove or replace an abutment without removing an Implant.







Ritter Implants

Made in **GERMANY**

Ritter Implant sizes and diameters

SNAP SB/LA Implants – all surfaces sand blasted and acid etched



This wide range of Platform Shifting/Switching.

Ritter Implants has **two Platforms.** Our Standard Platform encompasses the most popular Diameters of Implants and thus Ritter has the capability of Platform Shifting from 3.75 mm all the way to 6 mm in diameter, in total a complete line with **21 different sizes using the same Platform Diameter/Platform Connection/Abutments/Healing Caps – over 1000 different prosthetics fit into this group of Implants.**



The Standard Platform is also known as the Standard Line features with 6 mm short Implants in the 5 mm and 6 mm Diameters.

Standard Platform

The different diameters are color coded and help with easy handling.









SB/LA	Spiral Implant 3.75	Spiral Implant 4.2	Spiral Implant 5.0	Spiral Implant 6.0	
ø (mm)	3.75	4.2	5.0	6.0	
Length (mm)	8, 10, 11.5, 13, 16	8, 10, 11.5, 13, 16	6, 8, 10, 11.5, 13, 16	6, 8, 10, 11.5, 13	
Apical ø (mm)	3.2	3.6	4.25	5.25	
Platform ø (mm)	3.75	3.75	3.75	3.75	
Surface	SB/LA SB/LA		SB/LA	SB/LA	
Hex-Size (mm)	2.43	2.43 2.43		2.43	
Connection	Internal Hex 3.75	Internal Hex 3.75	Internal Hex 3.75	Internal Hex 3.75	
Product Codes Diameter/ Length	SBLA-3.75-8 SBLA-3.75-10 SBLA-3.75-11.5 SBLA-3.75-13 SBLA-3.75-16	SBLA-4.2-8 SBLA-4.2-10 SBLA-4.2-11.5 SBLA-4.2-13 SBLA-4.2-16	SBLA-5.0-6 SBLA-5.0-8 SBLA-5.0-10 SBLA-5.0-11.5 SBLA-5.0-13 SBLA-5.0-16	SBLA-6.0-6 SBLA-6.0-8 SBLA-6.0-10 SBLA-6.0-11.5 SBLA-6.0-13	





Reason#8

The Narrow Platform 2.9 mm encompassing 8 additional Implants in 3.0 and 3.3 Implants – for obvious reasons they cannot be on the same diameter platform as the Standard Line. Our Platform have a full line of Multi Unit and Overdenture Abutments – rendering the need for ONE PIECE or MINI Implants to be obsolete because you can restore all options with this Narrow Implant and are not tied to cement or permanently fused abutments. The parts for this platform are always depicted in purple fonts and colors.

ONE PIECE or commonly called Mini Implants tie the patient to the same type of prosthesis, he/she must have the old Implants removed in order to upgrade their prosthesis.



SB/LA	Narrow Line Spiral Implant 3.0
ø (mm)	3.0
Length (mm)	10, 11.5, 13, 16
Apical ø (mm)	2.6
Platform ø (mm)	2.9
Surface	SB/LA
Hex -Size (mm)	2.0
Connection	Internal Hex 2.9





Narrow Line Spiral Implant 3.3
3.3
10, 11.5, 13, 16
2.6
2.9
SB/LA
2.0
Internal Hex 2.9

Ø 3.3 mm

The narrow diameters: Narrow Line

Product Codes Diameter/Length NL-SBLA-3-10 NL-SBLA-3-11.5 NL-SBLA-3-13 NL-SBLA-3-16

Product Codes Diameter/Length NL-SBLA-3.3-10 NL-SBLA-3.3-13 NL-SBLA-3.3-13 NL-SBLA-3.3-16

Platform Shift/Platform Switch

SNAP SB/LA Implants – each size Standard Platform

Important information here about the sizes of the Implants. In addition to different types of Platform Connections **most companies have several platform diameters.** Ritter has only two! The "platform (diameter)" is described as the diameter of the point where the abutment seals to the implant. The platform is represented by the platform size. In the past Implant companies

made a platform for each Diameter Implant or paired most similar two diameter Implants into one platform diameter. This is known as **Platform Matching.**

Standard Platform





Data later showed that if the abutment connection diameter (platform) was less wide than the Implants actual Diameter – then more bone would grow over the neck of the implant. This phenomenon became know as **Platform shifting** or **Platform Switching**.



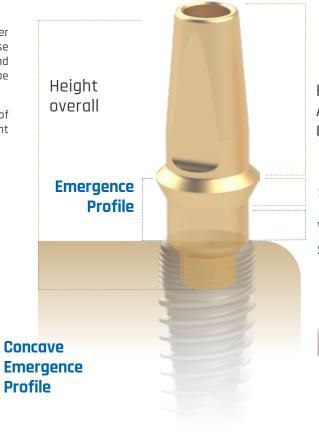
Emergence Profile

Ritter Vertical Platform Shift



Vertical Platform Switch Profile – Ritter was the first to produce a full line of these products to promote soft tissue healing and growth but also so that an Implant may be placed sub-crestal (below the bone).

The shape of the shoulder or the flare out of the abutment as it comes out of the implant is called the **Emergence Profile.**



H=Shoulder height

Implant /Bone level line

Height Abutment-Body Cone Height

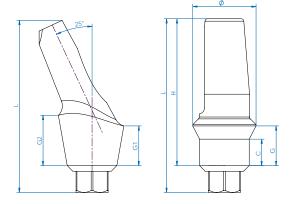
Shoulder

Vertical Platform switch*



Ritter Vertical Emergence Profile





Symbol Meaning
L Total length
H Length from platform to top edge
G Gingival height
G1 Gingival height on short side
G2 Gingival height on long side
Ø Diameter at widest point
C Collar height of platform switch
NL Narrow Line for 3.0 & 3.3 mm ø Implants

Shoulder, Collar, Gingival Margin, Gingival height – all mean the same thing – as the abutment emerges off the platform of the Implant to shape the soft tissue (gums/gingiva/sulcus) and rises to a certain height which matches the height distance of a persons bone level to the depth of the tissue.



Torque Values

Ritter recommended torque values for Implants and Abutments

Implant Insertion Torque: Its Role in Achieving Primary Stability of Restorable Dental Implants.

Gary Greenstein, John Cavallaro

A literature review was conducted to determine the role of insertion torque in attaining primary stability of dental implants. The review is comprised of articles that discussed the amount of torque needed to achieve primary implant stability in healed ridges and fresh extraction sockets prior to immediate implant loading. Studies were appraised that addressed the effects of minimum and maximum forces that can be used to successfully place implants. The minimum torque that can be employed to attain primary stability is undefined. Forces ≥30 Ncm are routinely used to place implants into healed ridges and fresh extraction sockets prior to immediate loading of implants. Increased insertion torque (≥50 Ncm) reduces micromotion and does not appear to damage bone. In general, the healing process after implant insertion provides a degree of biologic stability that is similar whether implants are placed with high or low initial insertion torque. Primary stability is desirable when placing implants, but the absence of micromotion is what facilitates predictable implant osseointegration. Increased insertion torque helps achieve primary stability by reducing implant micromotion.

Furthermore, tactile information provided by the first surgical twist drill can aid in selecting the initial insertion torque to achieve predictable stability of inserted dental implants.

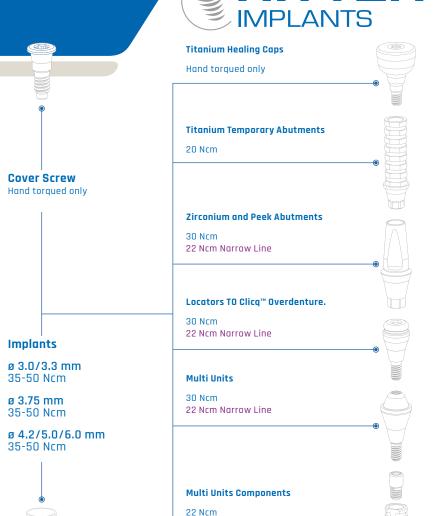


Please scan for review

Implant Insertion Torque: Its Role in Achieving Primary Stability of Restorable Dental Implants

Gary Greenstein, John Cavallaro





* Note: All torque values are recommended guideline values that may vary depending on the physical situation. They cannot be scientifically proven even though numerous tests tend towards these results.

Healing Caps/Gingiva Formers

Preparing the soft tissue for the final Prosthesis

Standard Platform





HC-3N

HC-3W

HC-3WC

HC-3EW

HC-3EWC







Standard Line H 3 mm | Ø 4.5 mm

> Standard Line H 3 mm | Ø 4.5 mm C= 1.5 mm Collar Vertical Platform switching

Standard Line slim H 3 mm | Ø 3.8 mm

> Standard Line wide H 3 mm | Ø 5.5 mm

Standard Line wide H 3 mm | Ø 5.5 mm C= 1.5 mm Collar Vertical Platform switching

Standard Line extra wide H 3 mm | Ø 6.3 mm

Standard Line extra wide H 3 mm | Ø 6.3 mm C= 1.5 mm Collar Vertical Platform switching





HC-5

HC-5C

HC-5N

HC-5W

HC-5WC

HC-5EW





Standard Line H 5 mm | Ø 4.5 mm

> Standard Line H 5 mm | Ø 4.5 mm C= 1.5 mm Collar

Vertical Platform switching

Standard Line slim H 5 mm | Ø 3.8 mm

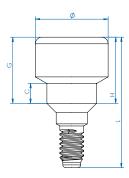
Standard Line wide H 5 mm | Ø 5.5 mm

Standard Line wide H 5 mm | Ø 5.5 mm C= 1.5 mm Collar Vertical Platform switching

Standard Line extra wide H 5 mm | Ø 6.3 mm

Standard Line extra wide H 5 mm | Ø 6.3 mm C= 1.5 mm Collar Vertical Platform switching

Standard Line H 7 mm | Ø 4.5 mm



Healing Caps/Healing Abutments/Gingiva Formers/ Sulcus Formers – this item is used to shape the gums after the implants has been placed and healed. The

diameters, heights and shapes are to be decided by the dentist as to prepare and shape the gums for the

final Crown/Prosthesis.

Symbol	Meaning			
L	Total length			

Length from platform to top edge

Gingival height

Diameter at widest point

Collar height of platform switch Narrow Line for 3.0 & 3.3 mm ø Implants

Narrow Line Platform

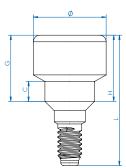


The narrow diameters/Narrow Line ø 3.0 and ø 3.3 mm









Symbol	Meaning
Ĺ	Total length
Н	Length from platform to top edge
G	Ginaival heiaht

Ø Diameter at widest point

C Collar height of platform switch

NL Narrow Line for 3.0 & 3.3 mm ø Implants

Impression Copings

Open and Closed Tray procedure

Closed Tray transfer



ACT-15 Standard Line - 15° angled Closed Tray Transfer H 11 mm | Ø 4.4 mm,

Incl. TSA-8.3 screw

ACT-25 Standard Line - 25° angled

Closed Tray Transfer H 10.9 mm | Ø 4.4 mm Incl. TSA-8.3 screw



NL-ACT-15 Narrow Line - 15° angled Closed Tray Transfer

H 11 mm | Ø 4.8 mm Incl. NL-TSA-8.3 screw

NL-ACT-25 Narrow Line - 25° angled Closed Tray Transfer

H 11 mm | Ø 4.8 mm Incl. NL-TSA-8.3 screw



Angled Closed Tray – This allows a doctor to take an Impression of two angled implants at the same time that would otherwise not be possible and require two Impressions to be taken – this makes Ritter unique!

Impression Copings, Impression Pins, Impression Abutments or Impression Posts - they all mean the same.

These are used to register the depth and orientation of the Implant inside the bone as it relates to the surrounding teeth so that the laboratory can fabricate the crown/ Final Prosthesis.

Closed Tray - this part is screwed into the implant and a traditional Impression is taken over this part. When the material is dried in the mouth – the impression tray is removed. An impression of the part is left inside the material. The tray is sent to the laboratory who in turn reverse pours a model into a replica of the teeth and now can build the final prosthesis to screw into the implant. The closed tray Impression coping is then unscrewed and kept by the doctor for possible future use after sterilization.

Open Tray – same process except that the coping tray stays inside the tray and goes to the lab - this make the labs job easier and is more accurate – because the lab can attach the analog to the open tray providing the exact position and creating the mouth replica at the same time/step.



NL = Narrow Line for 3.0 & 3.3 mm \emptyset Implants

Impression Copings

Open and Closed Tray procedure/Scan Body/Scan Abutment

Closed Tray transfer



Standard Line slim
CTT-10.8N Closed Tray Transfer
H 10.9 mm | Ø 3.8 mm

Narrow Line slim
NL-CTT-10.8N Closed Tray Transfer
H 10.9 mm | Ø 3.8 mm

Standard Line slim
CTT-13.8N Closed Tray Transfer
H 13.9 mm | Ø 3.8 mm
Incl. TSCT-17 screw

Narrow Line slim
NL-CTT-13.8N Closed Tray Transfer
H 13.9 mm | Ø 3.8 mm

Top view

Open Tray transfer

OTT-10.8N

OTT-13.8W



Standard Line slim Open Tray Transfer H 10.8 mm | Ø 4 mm Incl. TSOT-24 screw

Narrow Line slim NL-OTT-10.8N Open Tray Transfer H 10.8 mm | Ø 3.8 mm Incl. NL-TSOT-24 screw

OTT-13.8N Standard Line slim
Open Tray Transfer
H 13.9 mm | Ø 4 mm
Incl. TSOT-24 screw

Narrow Line slim
NL-OTT-13.8N Open Tray Transfer
H 13.9 mm | Ø 3.8 mm
Incl. NL-TSOT-24 screw

Standard Line wide Open Tray Transfer H 13.9 mm | Ø 5.5 mm Platform switching Incl. TSOT-24 screw



Scan Body/Abutment – these are used to avoid Open and Closed Tray traditional ANALOG impressions. They register a digital Impression of the location of the Implant. This product is preformed and made from Peek. Peek is the most common plastic material to make temporary crowns; therefore this a dual purpose scan body and temporary/provisional abutment.

Temporary Abutments are commonly made after the Impression is made. An impression is taken to make a final crown/prosthesis which can take a few weeks and that is why a Temporary or also know as provisional is needed.





3DSPA-8C

DUAL PURPOSE
Scan Body +
temporary/provisional
abutment

Scan Abutment
Standard Line
Plastic Abutment for 3D Scanner
5 mm Abutment-body,
1.6 mm Shoulder
C= 1.5 mm Vertical Platform switching

Incl. TSA-8.3 screw

NL-3DSPA-8C

Narrow Line
Plastic Abutment for 3D Scanner

Scan Abutment

5 mm Abutment-body, 1,6 mm Shoulder

C= 1.5 mm Vertical Platform switching

Incl. NL-TSA-8.3 Screw

Pop Up Impression with PUT

All in one Pop Impression Transfer Abutment

The following pick transfer abutments are another





MULTI PURPOSE

All PUT-XX can be used as

Impression, Healing, Temporary and Final Abutment!

way to take an Impression with Ritter. Our abutments are made with Grade 5 titanium and can not only be used for taking an impression but also for the final prosthesis. Our Pick up Transfer abutments also come in Angled (no one else has this). This is the ability to use for a final/angled and Vertical shift pick transfer abutments from Ritter.

Place PUT Abutment with flat side facing the buccal side and hand tighten

with HHDA 1.29 hex tool.



Torque to 30 Ncm.

One week

Place PUP-CA Impression Cap on PUT Abutment, aligning flat interior of PUP-CA with the flat of the PUT Abutment (which should be facing the buccal). Press downward until you feel the parts snap into place.



Place impression tray over components until hardened and remove tray.



The PUP-CA will remain in the tray.





Send tray along with the appropriate IA-PUT (S, M, L) to lab for your

final crown.



Place the TC-PUT on PUT Abutment until final restoration is delivered. (Alternatively, a temporary crown may be placed directly on the PUT Abutment.)



Abutment is



Implant place holder LAB models



IA-3.75

Standard Line Implant Analog Standard Platform for 3.75 mm, 4.2 mm, 5.0 mm & 6.0 mm



Narrow Line Implant Analog Narrow Line NL-IA-3.0 Platform for 3.0 mm and 3.3 mm



Standard Line, Titanium Screw for Closed Tray Transfer – 13 mm TSCT-14 Narrow Line. Titanium Screw for NL-TSCT-14 Narrow Line, Closed Tray Transfer - 13 mm TSCT-17 Standard Line, Titanium Screw for Closed Tray Transfer – 16 mm NL-TSCT-17 Narrow Line, Titanium Screw for Narrow Line, Closed Tray Transfer - 16 mm TSOT-24 Standard Line, Titanium Screw for Open Tray Transfer – 22.8 mm NL-TSOT-24 Narrow Line, Titanium Screw for Narrow Line, Open Tray Transfer - 23.2 mm

Original PUT ready for final restoration.

Analogs are used by laboratories to replicate the Implant in a plaster model, this is done in order not to use a real Implant for this purpose. There are two types of analogs – Implant level and Abutment level

Since Ritter has two platforms, we only need two Implant Level Analogs – one for the NL/Narrow Line 2.9 Platform and one for the SL/Standard Line 3.75 platform.



Standard Line Titanium Screw 7.6 mm for TSA-8.3 straight and angled Abutments Narrow Line. Titanium Screw 7.8 mm NL-TSA-8.3 for straight and angled Abutments

PUT System

The diameters, heights and shapes are to be decided by the dentist as to prepare and shape the gums for the final crown/prosthesis.



Platform switching PUT System

MULTI PURPOSE

All PUT-XX can be used as

Impression, Healing, Temporary

and Final Abutment!



Standard platform

PUT-1S	4 mm Abutment-Body, 1.1 mm Shoulder
PUT-1SC	4 mm Abutment-Body, 0.6 mm Shoulder C= 0,5 mm Vertical Platform switching
PUT-1M	6 mm Abutment-Body, 1.1 mm Shoulder
PUT-1MC	6 mm Abutment-Body, 0.6 mm Shoulder C= 0.5 mm Vertical Platform switching
PUT-1L	8 mm Abutment-Body, 1.1 mm Shoulder
PUT-1LC	8 mm Abutment-Body, 0.6 mm Shoulder C= 0.5 mm Vertical Platform switching
PUT-2S	4 mm Abutment-Body, 2.1 mm Shoulder
PUT-2SC	4 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
PUT-2M	6 mm Abutment-Body, 2.1 mm Shoulder
PUT-2MC	6 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
PUT-2L	8 mm Abutment-Body, 2.1 mm Shoulder
PUT-2LC	8 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
PUT-3S	4 mm Abutment-Body, 3.1 mm Shoulder
PUT-3SC	4 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching



PUT-3MC	6 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching
PUT-3L	8 mm Abutment-Body, 3.1 mm Shoulder
PUT-3LC	8 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching
PUT-4L	8 mm Abutment-Body, 4.1 mm Shoulder





PUT-15-1M	15° angles 6 mm Abutment-Body, 1 mm Shoulder
PUT-15-2M	15° angles 6 mm Abutment-Body, 2 mm Shoulder
PUT-15-3M	15° angles 6 mm Abutment-Body, 3 mm Shoulder
PUT-25-1M	25° angles 6 mm Abutment-Body, 1 mm Shoulder
PUT-25-2M	25° angles 6 mm Abutment-Body, 2 mm Shoulder
PUT-25-3M	25° angles 6 mm Abutment-Body, 3 mm Shoulder

Narrow platform

NL-PUT-1S	4 mm Abutment-Body, 1.1 mm Shoulder
NL-PUT-1M	6 mm Abutment-Body, 1.1 mm Shoulder
NL-PUT-1MC	6 mm Abutment-Body, 0.6 mm Shoulder C= 0.5 mm Vertical Platform switching
NL-PUT-1L	8 mm Abutment-Body, 1.1 mm Shoulder
NL-PUT-1LC	8 mm Abutment-Body, 0.6 mm Shoulder C= 0.5 mm Vertical Platform switching
NL-PUT-2S	4 mm Abutment-Body, 2.1 mm Shoulder
NL-PUT-2SC	4 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
NL-PUT-2M	6 mm Abutment-Body, 2.1 mm Shoulder
NL-PUT-2MC	6 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
NL-PUT-2L	8 mm Abutment-Body, 2.1 mm Shoulder
NL-PUT-2LC	8 mm Abutment-Body, 1.1 mm Shoulder C= 1 mm Vertical Platform switching
NL-PUT-3SC	4 mm Abutment-Body, 1.1 mm Shoulder C= 2 mm Vertical Platform switching

All PUT abutments including plastic Cap PUP-CA and TSA-8.3/NL-TSA-8.3 Titan screw





PUT System

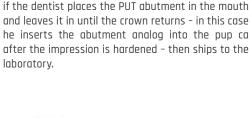
Accessories



Narrow platform

PUT accessories: **PUP CA:** closed tray Impression – included with PUT abutment **WS:** Waxing Sleeves are used by the laboratory to clone the shape of the abutment inside the crown.

TC: The dentist may leave the PUT abutment in the mouth and use the TC as a healing cap or temporary crown.



IA: is the Analog which replicates the abutment

THEREFORE IT IS AN ABUTMENT LEVEL ANALOG PAR-

TICULARLY FOR THE PUT LINE ONLY - this is only used



PUP-CA Plastic cap for PUT-S, M & L



WS-PUT Wax Sleeve for all PUT Abutments (red) not rotational



WS-PUT-R Wax Sleeve for all PUT Abutments (white) rotational



Temporary Cap (4 mm) for PUT-S



TC-PUT-M Temporary Cap (6 mm) for PUT-M

TC-PUT-L Temporary Cap (8 mm) for PUT-L



IA-PUT-S
Analog for PUT-S (4 mm)
Abutment

IA-PUT-M
Analog for PUT-M (6 mm)
Abutment

IA-PUT-L
Analog for PUT-L (8 mm)
Abutment



Single Unit Prosthetic Components

All Ritter Abutments come with a fixation screw. Single Units have traditionally been manufactured to encompass incremental heights/incremental gingival heights/and Incremental angles – while the crown

would compensate/over compensate for intermediary angles/heights and be cemented to the abutment in

All Ritter abutments screws are customized to accept the same screw driver – no matter what platform or type of abutment.



the mouth.

Same abutment fixation Driver HHDA for Standard & Narrow Platform



Same HEX Driver HHDA
for standard & Narrow Platform
means same Driver/Tool
for abutment fixation







Temporary Abutments

Peek/Titanium



PEEK Abutments Temporary Restoration Abutments

PASA-2



PASA-1

Standard Line
Peek-On anatomical,
straight abutment
1 mm Shoulder,
L 11.1 mm

Standard Line
Peek-On anatomical,
straight abutment
2 mm Shoulder,
L 12.1 mm

PASA-3

Standard Line
Peek-On anatomical,
straight abutment
3 mm Shoulder,
L 13.1 mm

If a dentist is not using our dual Purpose Scan/ Temp Abutment, she/he can purchase any of the angles, heights or shoulder heights to make the temporary or provisional crown – Ritter also offers a popular version in Titanium.

Titanium Temporary Abutments



TTA-ZI-H

Temporary-Titanium-Abutment, Anti-Rotational, ø 4.5 mm L= 9.5 mm

NL-TTA-ZI-H

Narrow Line for 3.0/3.3

Anti-Rotational



TTA-ZI-R

Temporary-Titanium-Abutment, Rotational, ø 4.5 mm L= 9.5 mm

NL-TTA-ZI-R

Narrow Line for 3.0/3.3



*** NOTICE: NOT ALL ITEMS OF THIS CATALOG ARE APPROVED FOR SALES IN ALL COUNTRIES. PLEASE CHECK THE IMPORT REGULATIONS OF YOUR TERRITORY.***

Abutments for Casting/LAB

Ti-Base with casting sleeves/for LAB use

Ritter's AZA line are made in both Chromium Cobalt and Titanium and are dual purpose as they can be used as Castable with Chromium Cobalt or a Ti-Base made from Titanium.





AZA

Standard Line
Titanium Abutment
with Plastic Sleeve
Titanium base for accurate
restorations.

NL-AZA

Narrow Line Titanium Abutment with Plastic Sleeve Titanium base for accurate restorations.



AZA-CC

Standard Line
Cobalt Chrome Abutment
with Plastic Sleeve
Cobalt Chrome base for
accurate restorations.



Narrow Line
Cobalt Chrome Abutment
with Plastic Sleeve
Cobalt Chrome base for
accurate restorations.



AZA-L

Standard Line Long Titanium Abutment with Plastic Sleeve

AZA-CC-L

Standard Line Long Cobalt Chrome Abutment with Plastic Sleeve



PAC-H

Standard Line Burn-It Plastic Sleeve for Laboratory, Anti-Rotational

NL-PAC-H

Narrow Line Burn-It Plastic Sleeve for Laboratory, Anti-Rotational



PAC

Standard Line Burn-It Plastic Sleeve for Laboratory, **Rotational**

Ti-Bases/Milling Blanks

TI-Base/Tibase Cerec



Prosthetics Scan Abutments and Ti-Bases



Standard Line
ML-10-23 Millable Blanks
with 2.42 Hex

Narrow Line
NL-ML-10-23 Millable Blanks
with 2.0 Hex

Rotational						
H H	Straight Ti-Base					
C						
С	0.5 mm	1.5 mm				
Н	4.7 mm	4.7 mm				
Ø	4.2 mm	4.2 mm				
Art. No.	TBC-0.5R	TBC-1.5R				
Narrow Line NL	NL-TBC-0.5R	NL-TBC-1.5R				

Anti-Rotational



*** NOTICE: NOT ALL ITEMS OF THIS CA-TALOG ARE APPROVED FOR SALES IN ALL COUNTRIES. PLEASE CHECK THE IMPORT REGULATIONS OF YOUR TERRITORY.*** As technology has advanced – it has been discovered that cementing should no longer be performed in the mouth – so if you must cement out of the mouth then you need a hole in the crown to cement to the abutment – this was the advent of the "screw retained crown/restoration" and the birth of the Ti-Base. As milling technology became better and cheaper – custom abutments also became very popular – a custom abutment is a more expensive restorative option where the exact angle/height ect of the abutment is made specifically for the patient.

Those who continue to use the stock abutmentscemented out of the mouth – with a screw access whole – refer to this process as screw-mentable. Before there were Ti-Bases and customized abutments there were UCLA and Burn out abutments both were in the category of castable – used to cast gold or other metals into the shape of the custom abutment desired by the lab.

UCLA abutments are traditionally made from Titanium, Gold and Chromium Cobalt. Burn out abutments are made from plastic. For laboratories or Dentists who have titanium milling Machines – Ritter's ML – Milling blank will be used to make custom titanium abutment.

The **CD Ti-Base** has the ability to angle the screw hole towards the inside of the mouth where the screw access hole van be hidden from view. It uses a screw that has a different head and driver. TBC - Ti base Cerec. This product has made for dentist who own a cerec milling machine - this means they make the crowns in their office. They normally need to buy this from Cerec Sirona. Ritter sells it for a lower price and Ritter not only has this with 3 gingival heights - they only have one height - **but Ritter also makes this in rotational and non rotational!** A dentist needs one rotational/non hexed if he is making one solid bridge over 2-3 Implants.

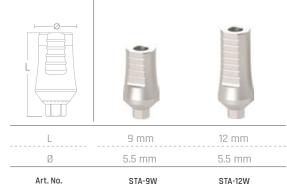
Titanium Abutments

Preparable Abutments, straight/angled









STA-XXW

Traditionally these abutments are manufactured to encompass incremental heights, incremental gingival heights and incremental angles – while the crown would compensate/over compensate for intermediary angles/heights and be cemented to the abutment in the mouth.

The diameters, heights and shapes are to be decided by the dentist as to prepare and shape the gums for the final crown/prosthesis.

10 mm



Narrow Line NL Narrow Line Straight Titanium Abutment





Inkl. TSA-8.3/NL-TSA-8.3 Titanium screw

Also available as STA-5 - L=5 mm and STA-7- L=7 mm

Titanium Abutments

Preparable Abutments, angled



EATA-XX Standard Line – 15° Angled Titanium Abutment Anatomic Emergency Profile

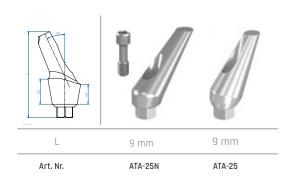


Incl. TSA-8.3 Titanium screw

EATA-XX Standard Line – 25° Angled Titanium Abutment Anatomic Emergency Profile



Incl. TSA-8.3 Titanium screw



Incl. TSA-8.3 Titanium screw

25°

Titanium Abutments

Preparable Abutments, straight









Narrow Line – Straight Titanium Abutment – X mm Shoulder

ABU

Across Brand Usability



Ritter Implants system has ABU with many other brands:



















AB Dental JDentalCare Adin MegaGen Alfa MIS Alpha Bio NeoBiotec Nobel Biocare Alpha Dent Astra Tech Noris Medical Axelmed Osstem BEGO Оху Paltop Biohorizons Ritter Implants Cortex Dentegris SGS Dental Spiral Tech Dentium Dio Straumann Surgikor Ditron Edison Medical TAG

Hiossen TAV Dental Implant Direct TRI Dental Implants AG

iRes Zimmer



Overdenture Abutments

Overdenture abutments are simply abutments to anchor dentures to Implants. There are several types but they can be broken into two categories – removable and fixed.

Removable can be removed and replaced by the patient – simply snapping the denture into place, and unsnapping it whenever they want.

Fixed can only be removed by the Dentist and are mainly retained with screws.







Ball Attachments and Accessories



Art. No.	BA-1	BA-2	BA-3	BA-4	BA-5	BA-6	BA-7
Narrow Line NL	NL-BA-1	NL-BA-2	NL-BA-3	NL-BA-4			

Description

Ball-Attachment, Titanium nitride coated, incl. 1 SCB-P, 1 BA-SP, 1 – MCB Metal Cap

NL = Narrow Line for 3.0 & 3.3 mm ø Implants



+++ REPLACEMENT KITS OF CAPS WILL COME BY 4 PCS. THE MCB METAL CAP COMES SINGLE PACKED +++

As shown, ball attachments are screwed into the Implant to hold a denture in place – they were the first products invented to hold a denture in the mouth without glue. A metal cap is placed and imbedded into the plastic denture – aligning with the location of where the ball attachment will protrude from the Implant. The polyamide inserts are simply shock absorbers.

These products were originally designed to place 2 implants on each side of the mouth.



BA-X comes with 3 components – the caps are inserted in the full arch overdenture.

1 BA-X 1 SCB-P,

1 MCB Metal Cap



Polyamide Caps for Ball Attachment (SCB)

SCB-T: Transparent (4 pcs.): slightly elastic,

retention 2.5-2.9 lbs (1.13-1.32 kg)

SCB-P: Pink (4 pcs.): elastic, retention 1.75-2.0 lbs

(0.79-0.90 kg) - STANDARD INCLUDED

SCB-Y: Yellow (4 pcs.): very elastic, retention 1.0–1.3 lbs

(0.45-0.6 kg)

SCB-G: Green (4 pcs.): extremely elastic,

retention <1 lbs (<0.45 kg)

SCB-B: Black (4 pcs.): for laboratory use only

BA-SP: Separator O-Rings for Ball Attachment and

Clicq™ Overdenture

MCB: Metal Insert cap for Ball

Attachment Prosthesis

Overdenture Abutments

Removable LOCATOR® System by ZEST®

LOCATOR® R-Tx



30200-05-SB LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 5 mm Cuff

In 1972 The Zest Locator Company perfected the Overdenture Abutment and patented the Locator. The original Locator was proven to provide better retention than the ball attachment and remains the most popular overdenture abutment in the world. They use the same principle as the ball attachment with a metal cap and silicon inserts for cushioning. We do not make these so the screw driver is different. Also Note it is expensive and all parts are sold separately. In Recent years the Zest Corporation has launched two new versions of the Locator.

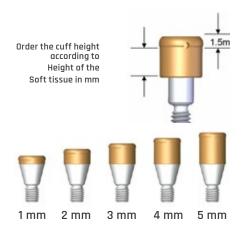
In an effort to offer a wider range of angle correction they produced the R-TX. The top portion of the abutment allows the metal housing to swivel. The thought was they could give the same retention and allow for greater angulation in Implant placement.

*** They really needed to make an angled version, but made this option instead.

Art. No.	LOCATOR R-TX ATTACHMENT SYSTEM	Art. No.	LOCATOR R-TX ATTACHMENTS & ACCESSORIES
31500-04-SB	LOCATOR R-TX Attachment System, 3.0 mm Internal Hex Connection, 4.0 mm Cuff	30002-01	LOCATOR R-TX Low Retention Insert, Blue, Includes 4
30200-00-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 0.5 mm Cuff	30003-01	LOCATOR R-TX Medium Retention Insert, Pink, Includes 4
30200-01-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 1 mm Cuff	30004-01	LOCATOR R-TX High Retention Insert, Clear, Includes 4
30200-02-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 2 mm Cuff	30021-01	LOCATOR R-TX Retention Insert Tool
30200-03-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 3 mm Cuff	30053-01	LOCATOR R-TX 4x Macro Model
30200-04-SB	LOCATOR R-TX Attachment System, 3.5 mm Internal Hex Connection, 4 mm Cuff		

Removable LOCATOR® Attachment System





Measurement for the height of the tissue sleeve: The height of the LOCATOR® Tissue Cuff ranges from 1–5 mm (platform to the bottom of the 1.5 mm coronal section).

Art. No.

The upper section, 1.5 mm of each locator is the same. The transition to the platform (EN) and the connection is different.

02284-RT-SB	LOCATOR Abutment 1.0 mm Cuff for Ritter Implants Standard Platform	
02285-RT-SB	LOCATOR Abutment 2.0 mm Cuff for Ritter Implants Standard Platform	
02286-RT-SB	LOCATOR Abutment 3.0 mm Cuff for Ritter Implants Standard Platform	
02287-RT-SB	LOCATOR Abutment 4.0 mm Cuff for Ritter Implants Standard Platform	
02288-RT-SB	LOCATOR Abutment 5.0 mm Cuff for Ritter Implants Standard Platform	
NL-02308-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 0.75 mm, final packing	
NL-02309-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 2 mm, final packing	
NL-02310-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 3 mm, final packing	
NL-02311-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 4 mm, final packing	
NL-02312-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 5 mm, final packing	
NL-02313-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 5 mm, final packing	
NL-02313-RT-SB	LOCATOR Abutment for intern. Hex Ø: 3 mm, Cuff: 6 mm, final packing	
NL = Narrow Line for 3.0 & 3.3 mm ø Implants		

LOCATOR® ABUTMENTS for Ritter Implants

Interocclusal distance:

Less than 3.2 mm for external hex and 2.5 mm for implants with internal connection (with 0 mm cuff height).

Standard Line:

08529 Extra Light

1.5 lbs

0-10° Angle

08527

Light

3 lbs

08524

Regular

5 lbs







08915

Light



Extended Line:

08548

Extra Light

Red

1 lbs

08558

Gray O lbs

Yellow at Bar constructions

08547 Regular Orange Green 4 lbs > 10° Angle to 20° per Implant

Art. No.	LOCATOR® ABUTMENTS for Ritter Implants
08393-RT-SB	LOCATOR Core Tool
08390-RT-SB	LOCATOR Abutment Driver, gold
08519-2-RT-SB	LOCATOR Plug Processing Set, 4 Pieces
08505-RT-SB	LOCATOR Impression Coping, 4 Pieces
08510-RT-SB	LOCATOR Replacement Denture Cap, Metal, 4 Pieces
08530-RT-SB	LOCATOR Analogs 4 mm ø, 4 Pieces
08519-10-RT-SB	Male Processing Package, Includes 10
08524-RT-SB	LOCATOR Denture Cap, clear, 4 Pieces
08527-RT-SB	LOCATOR Denture Cap, light adhesion, pink, 4 Pieces
08529-RT-SB	LOCATOR Denture Cap, extra light adhesion, blue, 4 Pieces
08547-RT-SB	LOCATOR Denture Cap, green, 4 Pieces
08915-RT-SB	LOCATOR Denture Cap, orange, 4 Pieces
08548-RT-SB	LOCATOR Denture Cap, extra light adhesion, red, 4 Pieces
08558-RT-SB	LOCATOR Denture Cap, no adhesion, gray, 4 Pieces
08517-RT-SB	LOCATOR Parallel Post, 4 Pieces
08515-RT-SB	LOCATOR Black Plug Processing Set, 4 Pieces
09530-RT-SB	LOCATOR Angle measurement guide
09566-RT-SB	Chairside Attachment Processing Material
08260-RT-SB	LOCATOR 35 Ncm Torque Screwdriver, 15 mm

Straight 3 mm 4 mm 5 mm 6 mm 7mm Art. No. COD-0.5 COD-1 COD-2 COD-3 COD-4 COD-5 COD-6 COD-7 Narrow Line NL NL-COD-0.5 NL-COD-2 NL-COD-3 NL-COD-4 NL-COD-5 NL-COD-6 NL-COD-1

NL-COD-18-3

The Clicq™ overdenture is known around the world as an Equator – this type of product was produced to compete with the Original Zest Locator without violating their patents.



Reason#15/16/17

- More narrow profile #15
- Angled Versions available #16
- All the processing parts included #17

Angled Clicq™ 18° - K=Kit Included TSAMU, NL-TSAMU Screw G2 2.5 mm 3.5 mm 4.5 mm 5.5 mm G1 1 mm 2 mm 3 mm 4 mm Ø 3.85 mm 3.85 mm 3.85 mm 3.85 mm COD-18-3 COD-18-4 Art. No.

NL-COD-18-2

Clicg™ Set: Titanium nitride coated, incl. SCL-T, SCL-P, SCL-Y, SCL-B,

1 - BA-SP. 1 - MC-COD



Angled Clicq™ 30° - K=Kit

Description

Narrow Line NL

NL-COD-18-1

Clicq™/Analog and Accessories

Content of the COD-X KIT includes:

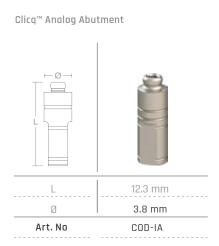
1 x COD-X (size)

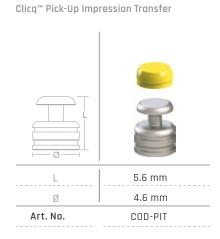
4 x SCL Retentive Caps, each B/Y/P/T

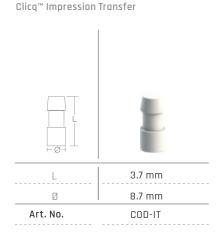
1x MC-COD Metal Housing

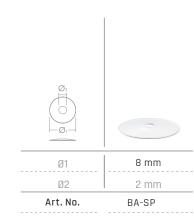
1 x BA-SP Disk

Clicq™ Protective Disk (4 pcs/pack)





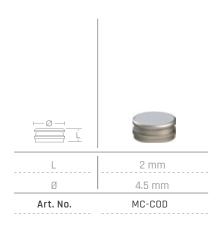




Clicq™ Metal Housing (2 pcs/pack)

Clicq™ Retentive Cap (4 pcs/pack)

+++ REPLACEMENT KITS OF CAPS WILL COME BY 4 PCS. THE MC-COD METAL CAP COMES SINGLE PACKED +++







Clicq™ PLUS

The Clicq™ overdenture Plus was created for the Dentist to have a wider option of the Abutmentthis has the Same Principle purpose as Ball Attachments, Zest Locator, and Clicq™. More than one option for angled Overdenture abutments is makes Ritter unique.

Reason#18





Clicq™ PLUS/Analog and Accessories

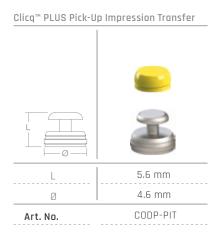
Content of the COD-XP KIT includes:

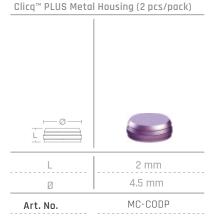
1x COD-XP (size)
4 x CODP Retentive Caps, each B/Y/P/T
1x MC-CODP Metal Housing
1x CODP-PD Disk

Clicq™ PLUS Analog Abutment L 12.3 mm Ø 3.8 mm

CODP-AN

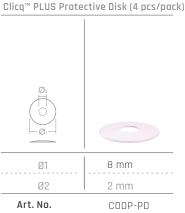
Art. No.













⁺⁺⁺ REPLACEMENT KITS OF CAPS WILL COME BY 4 PCS. THE MC-CODP METAL CAP COMES SINGLE PACKED +++





Ritter Implants were the first to transition a patient from a removable Denture to an "all on X". why?

Because a removable case can be planned with the "Angled Clicq™" Abutments.



Multi Unit Abutments (MUA) were created by Nobel Biocare® for the concept of replacing all teeth with a full porcelain or Zirconia Bridge instead of a plastic Denture over 4 Implants. **This procedure was called** "All on 4®".

This procedure involved at least placing two posterior Implants at a minimum of at least a **17 Degree angle and 2 more at any angle.** The angulation is required for cross arch stability.

It is now known to be called all on X because 6-8 Implants are now being used.

Multi unit abutments are designed so that the teeth (denture/bridge/prosthesis) can be removed without removing the actual abutments from the implants.

They are similar to the overdenture principle in that a part must be fused or cemented into the prosthesis just like the metal housing in an overdenture. However the attachments for Multi units are traditionally titanium cylinders with screw access holes – these parts are screwed into the multi unit abutments instead of being snapped onto overdenture abutments.

This MU- part replaces the metal housing of Overdenture Abutments

One Piece Multi-Unit Abutments, straight and angled Multi-Unit KS-System

Ritter Multi Abutments have been manufactured with a wider stronger M1.6 screw instead of a M1.4 screw that most companies use on Multi unit restorations. Ritter offers this packaged with very commonly used accessories making it simple for a

dentist to order parts. #19 Ritter makes this for its 3.0 and 3.3 Narrow line platform #20 and most companies narrow platform are strong enough to support this type of abutment on such narrow Implants.



Includes TSAMU Titanium Screw for one piece angled Multi Unit Includes MU-KSTS Titanium Screw & MU-HD Holder for one piece angled Multi Unit



MU-KS10 NL-MU-KS10 Standard Line Straight Multi Unit 1 mm Shoulder



MU-KS1710 NL-MU-KS1710 Standard Line 17° angled Multi Unit 1.1 mm/2.5 mm Shoulder (G1/G2)



30

MU-KS3010 NL-MU-KS3010

Standard Line 30° angled Multi Unit 1.1 mm/3.5 mm Shoulder (G1/G2)



MU-KS20 NL-MU-KS20 Standard Line Straight Multi Unit 2 mm Shoulder



MU-KS1720 NL-MU-KS1720 Standard Line 17° angled Multi Unit 2.1 mm/3.5 mm Shoulder (G1/G2)



MU-KS3020 NL-MU-KS3020

Standard Line 30° angled Multi Unit 2.1 mm/4.5 mm Shoulder (G1/G2)



MU-KS30 NL-MU-KS30 Standard Line Straight Multi Unit 3 mm Shoulder



MU-KS1710H

Standard Line 17° angled Multi Unit 1.1 mm/2.5 mm Shoulder (G1/G2)with Anti-rotation



MU-KS3010H

Standard Line 30° angled Multi Unit 1.1 mm/3.5 mm Shoulder (G1/G2)with Anti-rotation



MU-KS40 NL-MU-KS40 Standard Line Straight Multi Unit 4 mm Shoulder



MU-KS1720H

Standard Line 17° analed Multi Unit 2.1 mm/3.5 mm Shoulder (G1/G2) with Anti-rotation



MU-KS3020H

Standard Line 30° analed Multi Unit 2.1 mm/4.5 mm Shoulder (G1/G2)with Anti-rotation

Also available: MU-KS50, NLMU-KS50

Also available: MU-KS1730, NL-MU-KS1730 MU-KS1740, NL-MU-KS1740 Also available: MU-KS3030, NL-MU-KS3030 MU-KS3040, NL-MU-KS3040

One Piece Multi-Unit Abutments, straight and angled Multi-Unit KS-System



Multi Unit Sets/Kits including all necessary components = K



MU-KS10K NL-MU-KS10K Multi Unit Kit 1 mm Shoulder height



MU-KS1710K NL-MU-KS1710K 17° angled Multi Unit Kit 1 mm/2.4 mm Shoulder height (G1/G1)



MU-KS20K NL-MU-KS20K Multi Unit Kit 2 mm Shoulder height



MU-KS1720K NL-MU-KS1720K 17° angled Multi Unit Set 2 mm/3.3 mm Shoulder height (G1/G1)



MU-KS30K NL-MU-KS30K Multi Unit Kit 3 mm Shoulder height



MU-KS3010K NL-MU-KS3010K 30° angled Multi Unit Kit 1 mm/3.3 mm Shoulder height (G1/G1)



MU-KS40K NL-MU-KS40K Multi Unit Kit 4 mm Shoulder height

Also available: MU-KS50K, NLMU-KS50K



MU-KS3020K NL-MU-KS3020K 30° angled Multi Unit Kit 2 mm/4.4 mm Shoulder height (G1/G1)

Also available:

MU-KS1730K, NL-MU-KS1730K, MU-KS1740K, NL-MU-KS1740K MU-KS3030K, NL-MU-KS3030K, MU-KS3040K, NL-MU-KS3040K

Multi Unit Set Components



Includes: Healing Cap, open and closed Transfer, Plastic Sleeve, Titanium Sleeve, Analog & 2 Screws

1x MU-KSxxxx Multi Unit Abutment
1x MU-KSTST Screw
1x MU-KSOTT open impression
1x MU-KSPT closed impression
1x MU-KSAN Analog Abutment
1x MU-KSHC Healing cap
1x MU-KSSLP Plastic sleeve
1x MU-KSSL Titanium sleeve

Screw

2x MU-KSTS

Note: Illustration for display purposes only. The items are supplied in blister packaging, In some Countries items can be supplied in the Kit/Tray above.

Includes TSAMU Titanium Screw for one piece angled Multi Unit Includes MU-KSTS Titanium Screw & MU-HD Holder for one piece angled Multi Unit

One Piece Multi Unit Abutments, straight and angled Multi Unit KS-System, Accessories



MU-KSAN

Analog Abutment for Multi Unit KS System (Cone with M 1.6 X 0.35),



MU-KSPT

Closed Plastic Transfer for Multi Unit KS System (Assembled with MU-KSTS Titanium Screw MU-KSPTB Basis for closed Transfer)



The accessories are all used for the descriptions previously



MU-KSOTT

Open Transfer for Multi Unit KS System (MU-KSTSOT Titanium Screw included)



MU-KSTS

Titanium Screw for Multi Unit Cone ABUTMENT LEVEL M 1.6 X 0.35 - KS System

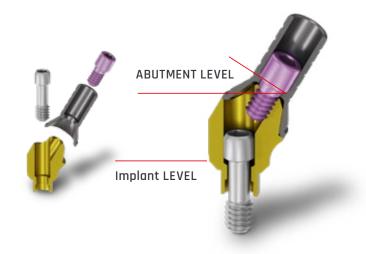


MU-KSHC

Healing Cap for Multi Unit KS System (Assembled with MU-KSTS Titanium Screw)



shown in Single units but are all ABUTMENT LEVEL ACCES-**SORIES** and can only be used for Ritter MUA.





MU-KSSL

Titanium Sleeve for Multi Unit KS System (MU-KSTST includes)



MU-KSSLP

Plastic Sleeve for Multi Unit KS System (MU-KSTS Titanium Screw includes)



MU-KSAC-R Prosthetic Cap, rotating (MU-KSTS Titanium Screw includes)



MU-KSAC-AR Prosthetic Cap, non-rotating For single restoration (MU-KSTS Titanium Screw includes)

One Piece Multi Unit Abutments, straight and angled Multi-Unit KS-System







Multi Unit Professional Kit Parts:

Accessories Included

Item Code	Description	QTY
MU-KSAN	Analog Abutment	6
MU-KSOTT	Open Tray Transfer	6
MU-KSSL	Titanium Sleeve	6
MU-KSPT	Closed Tray Transfer	6
MU-KSHC	Healing Cap Includes Screw	6
MU-KSSLP	Plastic Sleeve	6
MU-KSAC-R	Rotational Adhesive Cap	2
MU-KSAC-AR	Anti Rotational Adhesive Cap	2
MU-KSTS	Screw for Cone Connection	10
HHDA	Screw Driver	1
MU-KSSB	Scan Body	1

Abutments Included

Includes Screw MU-KSTS and Carrier MU-HD not sold individually:

Item Code	QTY	Also available in Narrow Line NL
MU-KS10	4	NL-MU-KS10
MU-KS20	4	NL-MU-KS20
MU-KS30	4	NL-MU-KS30
MU-KS40	4	NL-MU-KS40
MU-KS50	4	NL-MU-KS50
MU-KS1710	3	NL-MU-KS1710
MU-KS1720	3	NL-MU-KS1720
MU-KS1710H	1	NL-MU-KS1710H
MU-KS1720H	1	NL-MU-KS1720H
MU-KS3010	3	NL-MU-KS3010
MU-KS3020	3	NL-MU-KS3020
MU-KS3010H	1	NL-MU-KS3010H
MU-KS3020H	1	NL-MU-KS3020H





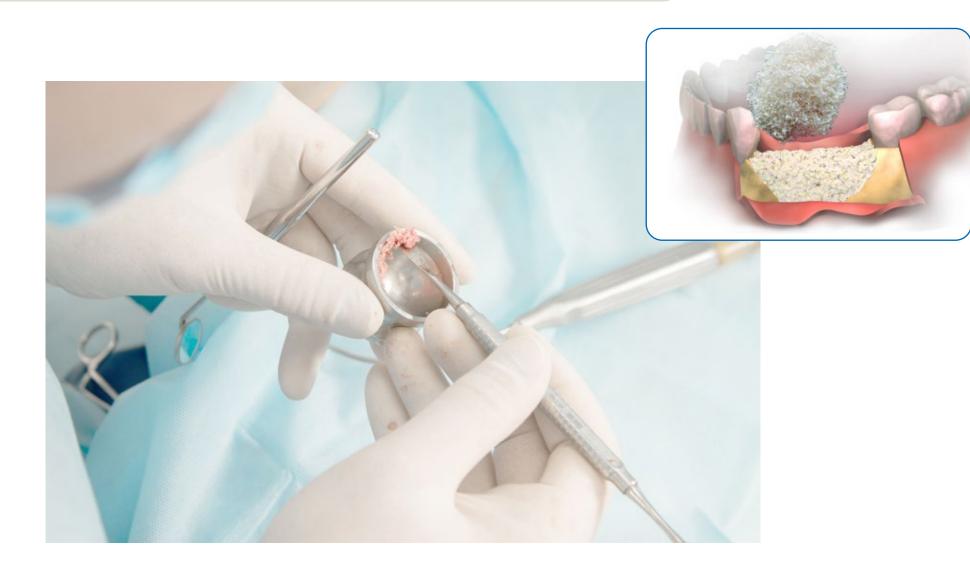
This special Kit Comes with **36 Abutments** so the doctor does not have to open several packages – this makes complicated procedure much easier!





Biologics Bone Graft Materials

Only Available in the US for Domestic Non-Laboratory or Research Use



DentalFix™ Dental Bone Particulate

Only Available in the US for Domestic Non-Laboratory or Research Use



Image	Item No.	Description
DentalFix™ Mineralized Cancellous	423202	0.25 cc
Particulate	423205	0.5 сс
120	423210	1.0 сс
Castle San San	423220	2.0 сс
1	423250	5.0 cc
DentalFix™ Mineralized Cort/Canc	423002	0.25 cc
Particulate	423005	0.5 сс
100	423010	1.0 cc
	423020	2.0 сс
100	423050	5.0 cc
DentalFix™ Mineralized Cortical	423102	0.25 cc
Particulate	423105	0.5 сс
100	423110	1.0 cc
	423120	2.0 сс
	423150	5.0 сс

Elongated particle design for maximum surface area Indications for use: sinus and ridge augumentation, socket preservation, bone void filling.

- · Mineralized cortial particulate jar
- · Mineralized cancellous particulate jar
- · Mineralized cortical/cancellous particulate jar
- Five year shelf life
- · Sterility assurance level (SAL) of 10-6



DentalFix™ regenerative implants provide quality grafting solutions for the informed clinician.

Reliable grafting options are available in the form of DBM putty, dermis, Matrix OI® FlexIT, Matrix OI®, demineralized and mineralized cortical and cancellous grafts, including particulate bone, for optimal long-term osteointegration and esthetic results. Clinicians can avoid the need for clinically challenged secondary surgical site autografts associated morbidity by using CellRights DentalFix™ products.

Technologies® validated BioRinse™ sterilization process uses proprietary rinsing agents in multiple combinations designed to kill pathogenic microorganisms, vegetative bacteria and spores. These steps include the removal of debris, blood, bone marrow, and lipids. The BioRinse™ process is a technologically advanced science developed for use in all product families including osteoinductive invivo verified Matrix OI® family of products. BioRinse™, in combination with our final sterilization step, ensures a medical device sterility assurance level (SAL 10-6) for all CellRight products.

The grafts should be stored in ambient temperatures (59-86°F or 15-30°C).

DentalFix™ implants are currently used in oral regenerative procedures including:

- periodontal defects
- tunnelling soft tissue augmentation
- · sinus augumentation
- extraction socket with partial Buccal wall
- \cdot socket extraction procedures
- \cdot repair of 3-wall defects
- repair to access windows
- sinus-lift with lateral access & lateral ridge augmentation

MatrixOI® FlexIT

Only Available in the US for Domestic Non-Laboratory or Research Use

Image	Item No.	Description
Matrix OI®	446001	10 x 10 mm
Flexit	446002*	15 x 10 mm
TO SERVICE	446003	15 x 15 mm
20,000	446004*	20 x 20 mm
	446005	30 x 30 mm
1	446006*	50 x 25 mm
	446007	17 x 10 mm

^{*} Available upon request, not available online.

Matrix OI® FlexIT, when hydrated, is a thin pliable cortical sheet that has the ability to be sized with scissors or a scalpel.

To accelerate graft reconstitution, submerge the Matrix OI® FlexIT in luke warm water or saline for 10-30 minutes and manipulate periodically, especially for larger size grafts. Graft pliability may occur sooner than 10-30 minutes.

Matrix OI® products are verified for osteoinductivity prior



to release for distribution. In-vivo Matrix OI® test results demonstrate all five (5) bone-forming elements present (Chondrocytes, Osteocytes, Bone Marrow, Cartilage, and New Bone). In-vitro Matrix OI® test results for BMP levels demonstrate Matrix OI® products have up to 19x the native BMP levels of the BMP-2 control.

The grafts are freeze-dried and sterilized using low-dose gamma irradiation to achieve a sterility assurance level (SAL) of 10-6. The grafts should be stored in ambient temperatures (59-86°F or 15-30°C) and have a shelf-life of up to five (5) years from the date of packaging.

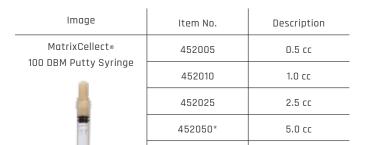
Our proprietary next-generation BioRinse™ processing technology has been proven to preserve native bone morphogenic proteins (BMP's).

Matrix OI® FlexIT is indicated for use in craniomaxillofacial applications including cranial repair, orbital floor, and zygomatic fractures, involving sutures, plates, anchors, and other fixation devices. Other uses for Matrix OI® FlexIT include acetabular reconstruction, posterolateral spinal procedures, long-bone fracture plate, non-unions, and dental procedures.

MatrixCellect® 100 DBM Putty

Only Available in the US for Domestic Non-Laboratory or Research Use



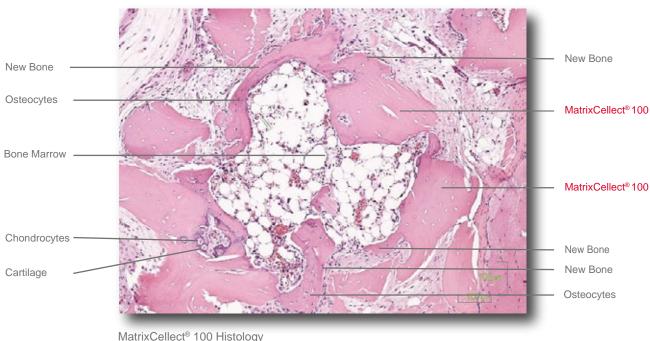


452075*

452100*	10 сс	
* *		

7.5 cc

MatrixCellect® 100 is a DBM Putty derived from 100% allograft bone.



MatrixCellect® 100 is indicated for homologous use for the treatment of surgically created or traumatic skeletal

defects.

We employ strict quality assurance and quality control procedures to ensure patient safety. Our medical director, a licensed physician, performs an extensive medical review of the donor's medical/social history to determine eligibility. Only donors whose screening, serologic, and microbiologic tests meet or exceed the current standards established by the Food and Drug Administration (FDA) and the American Association of Tissue Banks (AATB) are accepted for transplantation.

MatrixCellect® 100 may be used in surgical procedures:

- · Spine
- · Neuro
- · Orthopedics
- · Trauma
- · Reconstruction
- · Foot & Ankle
- · Dental

MatrixCellect® 100 is a 100% DBM putty processed using our proprietary demineralization process. MatrixCellect® 100 has been histologically proven post sterilization to exhibit five elements of bone formation. MatrixCellect® 100 does not contain any extrinsic carriers and is entirely derived from 100% allograft bone. MatrixCellect® 100 is provided in a ready to use syringe or jar.

MatrixCellect® 100 is provided with a medical device Sterility Assurance Level (SAL) 10-6. The product should be stored in ambient temperatures and has a shelf life of up to two years from the date of packaging.

Available upon request, not available online.

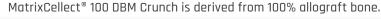
MatrixCellect® 100 DBM Crunch

Only Available in the US for Domestic Non-Laboratory or Research Use

Image	Item No.	Description
MatrixCellect® 100 DBM	455010*	1.0 сс
Crunch Jar	455025*	2.5 сс
	455050*	5.0 cc
and the same of th		

455100*

10.0 cc





MatrixCellect® 100 DBM Crunch is processed using our proprietary demineralization process. It has been histologically proven post-sterilization to exhibit five elements of bone formation. MatrixCellect® 100 DBM Crunch does not contain any extrinsic carriers and is entirely derived from 100% allograft bone. MatrixCellect® 100 DBM Crunch is provided in a jar.

MatrixCellect® 100 DBM Crunch is provided with a medical device Sterility Assurance Level (SAL) 10-6. The product should be stored in ambient temperatures and has a shelf life of up to two years from the date of packaging.

MatrixCellect® 100 DBM Crunch is indicated for homologous use for the treatment of surgically created or traumatic skeletal defects.

We employ strict quality assurance and quality control procedures to ensure patient safety. Our medical director, a licensed physician, performs an extensive medical review of the donor's medical/social history to determine eligibility. Only donors whose screening, serologic, and microbiologic tests meet or exceed the current standards established by the Food and Drug Administration (FDA) and the American Association of Tissue Banks (AATB) are accepted for transplantation.

MatrixCellect® 100 DBM Crunch may be used in surgicalprocedures including:

- · Spine
- · Neuro
- · Orthopedics
- · Trauma

^{*} Available upon request, not available online.

ConCelltrate® 100

Only Available in the US for Domestic Non-Laboratory or Research Use

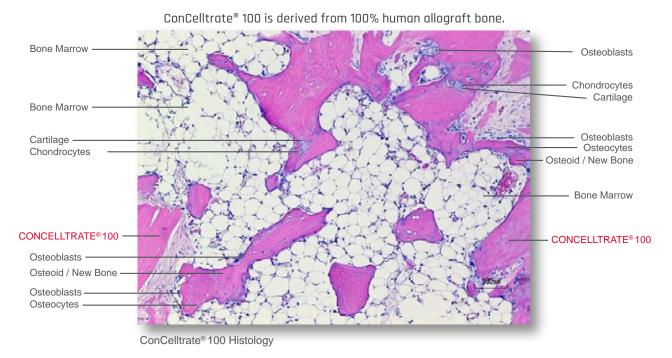


Image	Item No.	Description
ConCelltrate® 100 Jar	453005*	0.5 сс
	453010*	1.0 cc
	453025*	2.5 сс
	453050*	5.0 cc
	453100*	10 сс

 $[^]st$ Available upon request, not available online.

ConCelltrate® 100 has been histologically proven to contain all 5 elements of bone formation including new bone, bone marrow, osteocytes, chondrocytes, and cartilage in the athymic rat post-implantation at 28 days. In-vivo testing is performed by an independent laboratory on every lot post-sterilization.

ConCelltrate® 100 is processed using our proprietary process. ConCelltrate® 100 may be hydrated with saline, blood, Bone Marrow Aspirate (BMA), Platelet Rich Plasma (PRP), or other cellular components in accordance with a physicians well-informed medical judgement. ConCelltrate® 100 does not contain any extrinsic carriers and is entirely derived from 100% human allograft bone. ConCelltrate® 100 is provided in a ready to use mixing jar.



ConCelltrate® 100 is provided sterile with a medical device Sterility Assurance Level (SAL) 10-6. The product should be stored in ambient temperatures and has a shelf-life of up to five years from the date of packaging.

We employ strict quality assurance and quality control procedures to ensure patient safety. Our medical director, a licensed physician, performs an extensive medical review of the donor's medical/social history to determine eligibility. Only donors whose screening, serologic, and microbiologic tests meet or exceed the current standards established by the Food and Drug Administration (FDA) and the American Association of Tissue Banks (AATB) are accepted for transplantation.

ConCelltrate® 100 is indicated for homologous use for the treatment of surgically created or traumatic skeletal defects.

ConCelltrate® 100 may be used in surgical procedures including:

· Spine

· Dental

· Neuro

· Foot & Ankle

· Orthopedics

Reconstruction

· Trauma

MatrixOI[®] Cortical Fibers

Only Available in the US for Domestic Non-Laboratory or Research Use

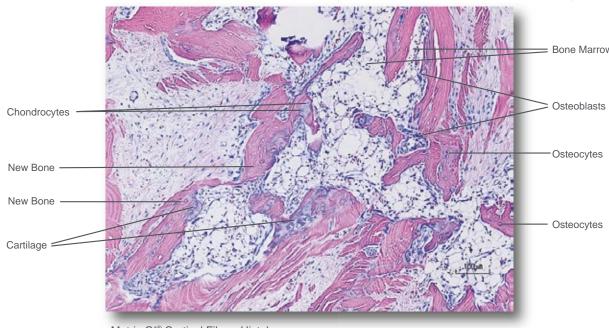
Image	Item No.	Description
Matrix OI® Cortical Fibers	445010*	Extra Small (approx. 1.0 cc)
Jar	445025*	Small (approx. 2.5 cc)
	445050*	Medium (approx. 5.0 cc)
	445100*	Medium (approx. 10 cc)

^{*} Available upon request, not available online.

Matrix OI® cortical fibers have been histologically proven to contain all 5 elements of bone formation including new bone, bone marrow, osteocytes, chondrocytes, and cartilage in the athymic rat post-implantation at 28 days. In-vivo testing is performed by an independent laboratory on every Matrix OI® lot post-sterilization.

Matrix OI® cortical fibers are processed using our proprietary BioRinse® process. Matrix OI® cortical fibers may be hydrated with saline, blood, Bone Marrow Aspirate (BMA), Platelet Rich Plasma (PRP), or other cellular components in accordance with a physicians well-informed medical judgement. Matrix OI® cortical fibers do not contain any extrinsic carriers, and are derived entirely from 100% human allograft bone. Matrix OI® cortical fibers are provided in a ready to use mixing iar.

Matrix OI® cortical fibers are derived from 100% human allograft bone.



Matrix OI® Cortical Fibers Histology

Matrix OI® cortical fibers are provided sterile with a medical device Sterility Assurance Level (SAL) 10-6. The product should be stored in ambient temperatures and has a shelf life of five years from the date of packaging.

We employ strict quality assurance and quality control procedures to ensure patient safety. Our medical director, a licensed physician, performs an extensive medical review of the donor's medical/social history to determine eligibility. Only donors whose screening, serologic, and microbiologic tests meet or exceed the current standards established by the Food and Drug Administration (FDA) and the American Association of Tissue Banks (AATB) are accepted for transplantation.

Matrix OI® cortical fibers are indicated for homologous use for the treatment of surgically created or traumatic skeletal defects.

Matrix OI^{o} cortical fibers may be used in surgical procedures including:

· Spine

Reconstruction

· Neuro

- · Foot & Ankle
- · Orthopedics
- · Dental

· Trauma

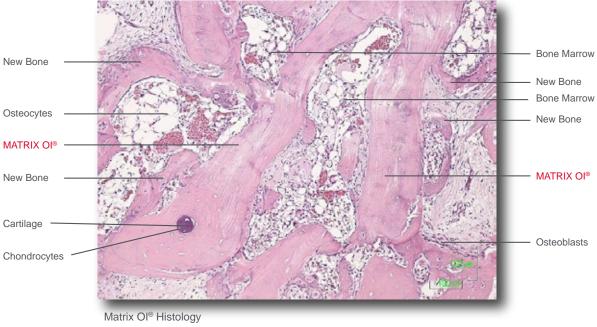
MatrixOI® Fusion Matters

Only Available in the US for Domestic Non-Laboratory or Research Use



Image	Item No.	Description
Matrix OI®	442002*	50 x 7 x 5 mm
Strip	442003*	20 x 15 x 7 mm
	442004*	25 x 10 x 7 mm
	442006*	50 x 10 x 7 mm
	442007*	50 x 20 x 7 mm
	442008*	26 x 19 x 7 mm
	442001*	20 x 10 x 10 mm
Matrix OI®	444025*	2.5 сс
Filler	444050*	5.0 cc
1	444100*	10 сс
	444150*	15 сс
	444225*	2.5 cc Jar
	444250*	5.0 cc Jar
	444300*	10 cc Jar
1	444350*	15 cc Jar
Matrix OI® Block	441010*	10 mm³
	441012*	12 mm³
	441014*	14 mm³
	* Available upon reau	est, not available onlii

Matrix OI® is a compressible Stem Cell Containment™ matrix derived from 100% human bone.



Each lot of Matrix OI® is tested for osteoinductivity post

sterilization in-vivo for 28 days in an athymic rat to ensure the presence of bone morphogenic proteins. BMP's promote mesenchymal (BMA) cells to differentiate into chondrocytes and osteoblasts that lead to bone formation. Preserved native BMP's provide for an unparalleled osteoactive grafting material.

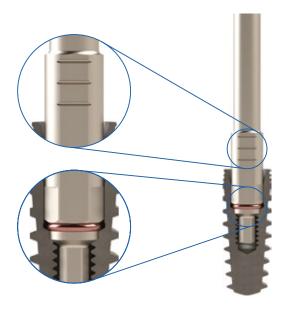
Matrix OI® is processed using next-generation proprietary processing method that maintains the interconnected structure of trabecular bone in a manner that preserves native bone morphogenic proteins. It allows the clinician to hydrate it with the patient's own stem cells, BMA, growth factors, PRP, or with an antibiotic solution.

Matrix OI® is indicated for homologous use in cervical and lumbar spine, scoliosis, lateral gutters, orthopedics, bone voids, recon, CMF, non-unions, foot and ankle, and dental procedures. When hydrated, Matrix OI® is a compressible scaffold that will contour with the defect.

Ritter Surgical Kits & Tools

Surgery





Many insertion tools/motor mounts are provided with a fixing mechanism to prevent loss of the temporary attachment and gingiva height markings in mm increments – for better orientation of the insertion depths.

Compact Surgical Kit

Art. No. RIBUS-SE

Compact Surgical Kit

This Compact Surgical Kit contains all basic tools and drills to place all Ritter SB/LA Implants and system components. **The drill stop function is provided by stopper sleeves.**

#23

This is our Compact Kit and this kit is very similar to most Surgical kits on the Market. It comes with Limited amounts of Drills, one for each Implant Diameter (part # DEP). But unlike most – this kit comes with the tools to place both Ritter Platforms.

#24

In addition it contains Manually applied Drill Stoppers – most companies do not include (part #'s DS-6-13)

All placing tools are included – MMIB are for the Handpiece RDI are for the included torque Ratchet (Tru-70)

The Kit also has prosthetic drivers for both the ratchet and the Handpiece – most companies force you to purchase an additional kit.

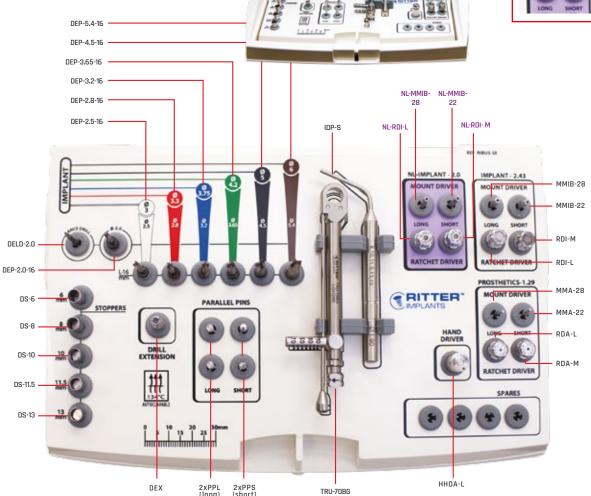
#25

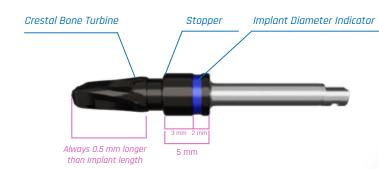




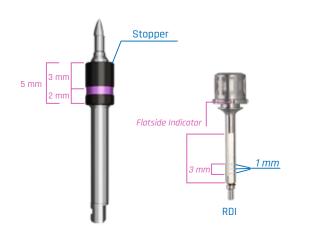
Art. No. RIBUS-SE

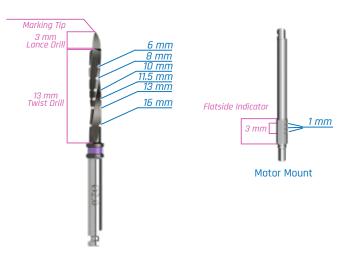






Complete Surgical Kit Art. No. RIBEU-PE







Complete Surgical Kit

Art. No. RIBEU-PE (Rev. 7.0)



Our Complete surgical kit is second to no one. It contains all the items of the Compact Kit – except the **Stoppers are built into each drill** – there is a drill for every Implant we produce and more!

#26

This comes with our exclusive 3 in one – Starter/Marking/ Lance Drill.

#27

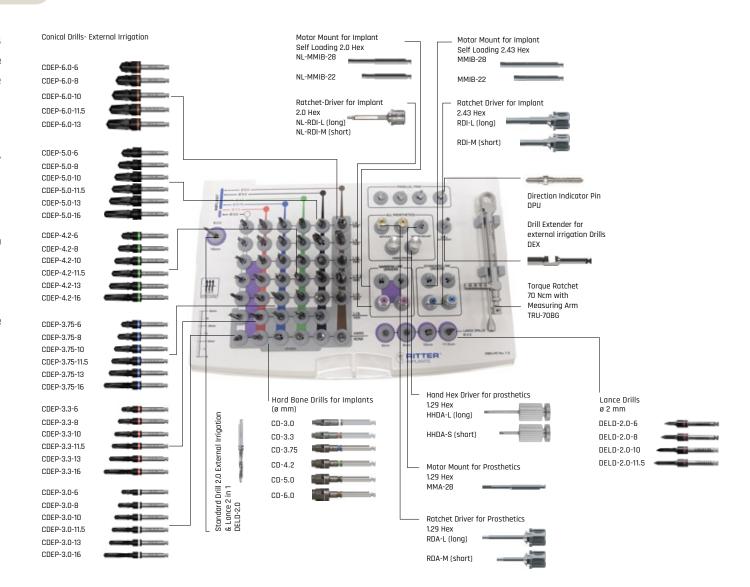
Along with all the special measuring and registration markings on all tools.

#28

All Implant drivers are spring loaded – making it Impossible for an Implant to fall down a persons throat!
#29



Reason#26, 27, 28, 29



Fully Guided navigated surgical kit

Art. No. GS-KIT (Rev. 2.2)

This guided system contains all the tools and drills necessary to perform a guided operation with all diameters except 6 mm, including narrow line.

Class IIa (CE1023) Category

STANDARD LINE



NARROW LINE





UNIVERSAL





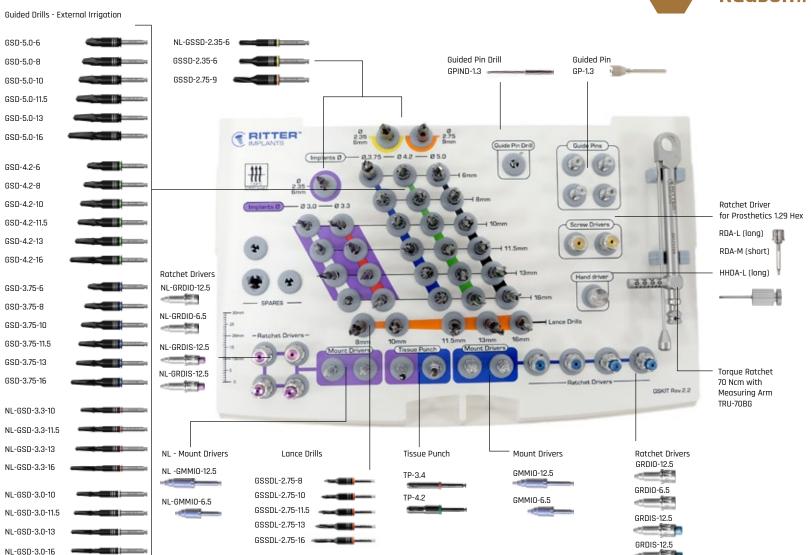
Fully Guided Kit navigated surgical kit

Art. No. GS-KIT





Reason#30, 31, 32, 33



The Guided Kit is one of the Best and Easiest on the Market. **Most guided kits do not have a drill for every length and Diameter - Ritter Does!**

#30

Most Guided kits need to use spoons to change drill diameter - **Ritter is spoonless!** #31

Most Guided kits need metal sleeves in the guide because they guide the cutting portion of the Drill – **Ritter guides the barrel of the drill and is sleeveless!**

#32

The Torque Ratchet has a simple screw to reverse the direction of turning.

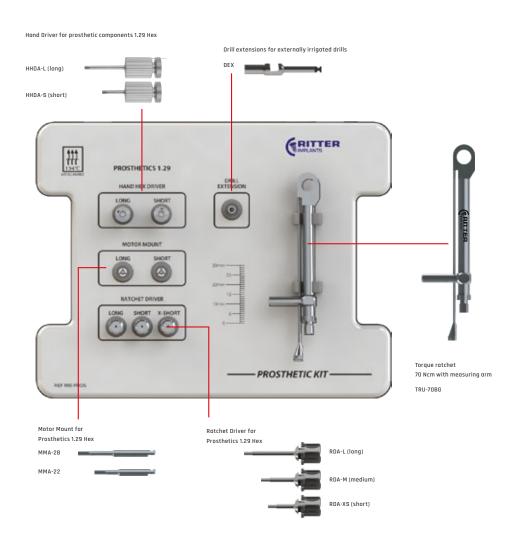
#33

Laboratory/Prosthetics Kit complete

Art. No. RIB-PROS

Art. No. RIB-PROS

The Laboratory Kit with all the necessary tools for prosthetics components.



RIB-PROS Prosthetics Kit – components, individually reorderable

Art. No.	Description
 HHDA-L	Hand Hex Driver for Prosthetics, Hex 1.25, long
 HHDA-S	Hand Hex Driver for Prosthetics, Hex 1.25, short
MMA-22	Motor Mount 22 mm L for Prosthetics, (for Hex 1.29)
 MMA-28	Motor Mount 28 mm L for Prosthetics, (for Hex 1.29)
DEX	Drill Extension for External Irrigation Drill
 RDA-XS	Ratchet Driver for Prosthetics, short for Hex 1.29 mm
 RDA-M	Ratchet Driver for Prosthetics, medium for Hex 1.29 mm
 RDA-L	Ratchet Driver for Prosthetics, long for Hex 1.29 mm
TRU-70BG	70 Ncm Torque Ratchet with Measuring Arm

RIBUS-SE Compact Surgical Kit – components, individually reorderable

	Art. No.	Description
-	DEP-2.0-16	Standard Drill 2.0 mm D 16 mm L External Irrigation
-	DEP-2.5-16	Standard Drill 2.5 mm D 16 mm L External Irrigation
	DEP-2.8-16	Standard Drill 2.8 mm D 16 mm L External Irrigation
-	DEP-3.2-16	Standard Drill 3.2 mm D 16 mm L External Irrigation
	DEP-3.65-16	Standard Drill 3.65 mm D 16 mm L External Irrigation
	DEP-4.5-16	Standard Drill 4.5 mm D 16 mm L External Irrigation
	DEP-5.4-16	Standard Drill 5.4 mm D 16 mm L External Irrigation
	DELD-2.0	Multi Purpose 2.0 Lance Starter Marking Drill
4	DS-6	Drill Stopper 6 mm (Universal)
	DS-8	Drill Stopper 8 mm (Universal)
8	DS-10	Drill Stopper 10 mm (Universal)
24	DS-11.5	Drill Stopper 11.5 mm (Universal)
	DS-13	Drill Stopper 13 mm (Universal)
	DEX	Drill Extension for External Irrigation Drill
	PPL	Parallel Pin Guide - 16 mm (long)
2-0-0-0-0-[6]	PPS	Parallel Pin Guide - 10 mm (short)
	HHDA-L	Hand Hex Driver for Prosthetics, Hex 1.25, long
	MMA-22	Motor Mount 22 mm L for Prosthetics, (for Hex 1.29)
	MMA-28	Motor Mount 28 mm L for Prosthetics, (for Hex 1.29)
	IDP-S	Implant Depth Probe - single end
	TRU-70BG	70 Ncm Torque Ratchet with Measuring Arm
	MMIB-22	Motor Mount 22 mm L for Implant (for Hex 2.43)
-	MMIB-28	Motor Mount 28 mm L for Implant (for Hex 2.43)





Art. No.	Description
RDA-M	Ratchet Driver for Prosthetics, medium for Hex 1.29 mm
RDA-L	Ratchet Driver for Prosthetics, long for Hex 1.29 mm
RDI-M	Ratchet Driver for Implant, medium for Hex 2.43 mm
RDI-L	Ratchet Driver for Implant, long for Hex 2.43 mm
NL-MMIB-22	Motor Mount 22 mm L for Implant (for Hex 2.0 Narrow Line)
 NL-MMIB-28	Motor Mount 28 mm L for Implant (for Hex 2.0 Narrow Line)
NL-RDI-M	Ratchet Driver for Implant, medium (for Hex 2.0 Narrow Line)
NL-RDI-L	Ratchet Driver for Implant, long (for Hex 2.0 Narrow Line)

RIBEU-PE Complete Surgical Kit – components, individually reorderable

	Art. No.	Description
	CDEP-3.0-6	Conical Drill 2.5 mm D 6 mm L External Irrigation
	CDEP-3.0-8	Conical Drill 2.5 mm D 8 mm L External Irrigation
	CDEP-3.0-10	Conical Drill 2.5 mm D 10 mm L External Irrigation
-	CDEP-3.0-11.5	Conical Drill 2.5 mm D 11.5 mm L External Irrigation
	CDEP-3.0-13	Conical Drill 2.5 mm D 13 mm L External Irrigation
ALL DESCRIPTION OF THE PARTY OF	CDEP-3.0-16	Conical Drill 2.5 mm D 16 mm L External Irrigation
1111	CDEP-3.3-6	Conical Drill 2.8 mm D 6 mm L External Irrigation
	CDEP-3.3-8	Conical Drill 2.8 mm D 8 mm L External Irrigation
	CDEP-3.3-10	Conical Drill 2.8 mm D 10 mm L External Irrigation
THE RESERVE	CDEP-3.3-11.5	Conical Drill 2.8 mm D 11.5 mm L External Irrigation
	CDEP-3.3-13	Conical Drill 2.8 mm D 13 mm L External Irrigation
- 1110	CDEP-3.3-16	Conical Drill 2.8 mm D 16 mm L External Irrigation
	CDEP-3.75-6	Conical Drill 3.2 mm D 6 mm L External Irrigation
	CDEP-3.75-8	Conical Drill 3.2 mm D 8 mm L External Irrigation
	CDEP-3.75-10	Conical Drill 3.2 mm D 10 mm L External Irrigation
MI RESTRICTION	CDEP-3.75-11.5	Conical Drill 3.2 mm D 11.5 mm L External Irrigation
	CDEP-3.75-13	Conical Drill 3.2 mm D 13 mm L External Irrigation
	CDEP-3.75-16	Conical Drill 3.2 mm D 16 mm L External Irrigation
	CDEP-4.2-6	Conical Drill 3.65 mm D 6 mm L External Irrigation
	CDEP-4.2-8	Conical Drill 3.65 mm D 8 mm L External Irrigation
42110	CDEP-4.2-10	Conical Drill 3.65 mm D 10 mm L External Irrigation
	CDEP-4.2-11.5	Conical Drill 3.65 mm D 11.5 mm L External Irrigation
421.0	CDEP-4.2-13	Conical Drill 3.65 mm D 13 mm L External Irrigation
	CDEP-4.2-16	Conical Drill 3.65 mm D 16 mm L External Irrigation
	CDEP-5.0-6	Conical Drill 4.5 mm D 6 mm L External Irrigation
	CDEP-5.0-8	Conical Drill 4.5 mm D 8 mm L External Irrigation
	CDEP-5.0-10	Conical Drill 4.5 mm D 10 mm L External Irrigation
	CDEP-5.0-11.5	Conical Drill 4.5 mm D 11.5 mm L External Irrigation
	CDEP-5.0-13	Conical Drill 4.5 mm D 13 mm L External Irrigation
	CDEP-5.0-16	Conical Drill 4.5 mm D 16 mm L External Irrigation
	CDEP-6.0-6	Conical Drill 5.4 mm D 6 mm L External Irrigation
	CDEP-6.0-8	Conical Drill 5.4 mm D 8 mm L External Irrigation
	CDEP-6.0-10	Conical Drill 5.4 mm D 10 mm L External Irrigation
	CDEP-6.0-11.5	Conical Drill 5.4 mm D 11.5 mm L External Irrigation
	CDEP-6.0-13	Conical Drill 5.4 mm D 13 mm L External Irrigation

	Art. No.	Description
OR SHALL STREET	CD-3.0	Hardbone Drill
Of the Party of th	CD-3.3	Hardbone Drill
100	CD-3.75	Hardbone Drill
	CD-4.2	Hardbone Drill
The state of the s	CD-5.0	Hardbone Drill
C. Transport	CD-6.0	Hardbone Drill
< 0.00 PM	DELD-2.0	Multi Purpose 2.0 Lance Starter Marking Drill
	DELD-2.0-6	Lance Drill 2.0 mm D 6 mm L (from Rev. 7.0)
	DELD-2.0-8	Lance Drill 2.0 mm D 8 mm L (from Rev. 7.0)
IMALIA N	DELD-2.0-10	Lance Drill 2.0 mm D 10 mm L (from Rev. 7.0)
	DELD-2.0-11.5	Lance Drill 2.0 mm D 11.5 mm L (from Rev. 7.0)
	DEX	Drill Extension for External Irrigation Drill
	DPU	Direction Indicator Pin
	TRU-70BG	70 Ncm Torque Ratchet with Measuring Arm
$-\!\!\!\!-\!\!\!\!\!-\!$	HHDA-L	Hand Hex Driver for Prosthetics, Hex 1.25, long
	HHDA-S	Hand Hex Driver for Prosthetics, Hex 1.25, short
	MMA-28	Motor Mount 28 mm L for Prosthetics, (for Hex 1.29)
	RDA-M	Ratchet Driver for Prosthetics, medium for Hex 1.29 mm
	RDA-L	Ratchet Driver for Prosthetics, long for Hex 1.29 mm
	MMIB-22	Motor Mount 22 mm L for Implant (for Hex 2.43)
-	MMIB-28	Motor Mount 28 mm L for Implant (for Hex 2.43)
	RDI-M	Ratchet Driver for Implant, medium for Hex 2.43 mm
	RDI-L	Ratchet Driver for Implant, long for Hex 2.43 mm
	NL-MMIB-22	Motor Mount 22 mm L for Implant (for Hex 2.0 Narrow Line)
	NL-MMIB-28	Motor Mount 28 mm L for Implant (for Hex 2.0 Narrow Line)
	NL-RDI-M	Ratchet Driver for Implant, medium (for Hex 2.0 Narrow Line)
	NL-RDI-L	Ratchet Driver for Implant, long (for Hex 2.0 Narrow Line)

GS-KIT Navigated Surgical Kit – components, individually reorderable

	Art. No.	Description
	GSD-3.75-6	Guided Surgery Drill 3.75 mm D 6 mm L
	GSD-3.75-8	Guided Surgery Drill 3.75 mm D 8 mm L
	GSD-3.75-10	Guided Surgery Drill 3.75 mm D 10 mm L
THE REAL PROPERTY.	GSD-3.75-11.5	Guided Surgery Drill 3.75 mm D 11.5 mm L
	GSD-3.75-13	Guided Surgery Drill 3.75 mm D 13 mm L
THE PARTY NAMED IN	GSD-3.75-16	Guided Surgery Drill 3.75 mm D 16 mm L
	GSD-4.2-6	Guided Surgery Drill 4.2 mm D 6 mm L
	GSD-4.2-8	Guided Surgery Drill 4.2 mm D 8 mm L
	GSD-4.2-10	Guided Surgery Drill 4.2 mm D 10 mm L
	GSD-4.2-11.5	Guided Surgery Drill 4.2 mm D 11.5 mm L
	GSD-4.2-13	Guided Surgery Drill 4.2 mm D 13 mm L
	GSD-4.2-16	Guided Surgery Drill 4.2 mm D 16 mm L
	GSD-5.0-6	Guided Surgery Drill 5.0 mm D 6 mm L
	GSD-5.0-8	Guided Surgery Drill 5.0 mm D 8 mm L
	GSD-5.0-10	Guided Surgery Drill 5.0 mm D 10 mm L
	GSD-5.0-11.5	Guided Surgery Drill 5.0 mm D 11.5 mm L
	GSD-5.0-13	Guided Surgery Drill 5.0 mm D 13 mm L
	GSD-5.0-16	Guided Surgery Drill 5.0 mm D 16 mm L
	NL-GSD-3.0-10	Narrow Line, Guided Surgery Drill 3.0 mm D 10 mm L
	NL-GSD-3.0-11.5	Narrow Line, Guided Surgery Drill 3.0 mm D 11.5 mm L
	NL-GSD-3.0-13	Narrow Line, Guided Surgery Drill 3.0 mm D 13 mm L
	NL-GSD-3.0-16	Narrow Line, Guided Surgery Drill 3.0 mm D 16 mm L
	NL-GSD-3.3-10	Narrow Line, Guided Surgery Drill 3.3 mm D 10 mm L
	NL-GSD-3.3-11.5	Narrow Line, Guided Surgery Drill 3.3 mm D 11.5 mm L
	NL-GSD-3.3-13	Narrow Line, Guided Surgery Drill 3.3 mm D 13 mm L
	NL-GSD-3.3-16	Narrow Line, Guided Surgery Drill 3.3 mm D 16 mm L
	NL-GSSD-2.35-6	Narrow Line, Guided Surgery Lance Starter Drill 2.35 mm D 6 mm L
	GSSD-2.35-6	Guided Surgery Lance Starter Drill 2.35 mm D 6 mm L
THE PARTY OF THE P	GSSD-2.75-9	Guided Surgery Lance Starter Drill 2.75 mm D 6 mm L
Company of the last of the las	CD-3.0	Hardbone Drill (only GS-KIT Rev. 1.0)
	CD-3.3	Hardbone Drill (only GS-KIT Rev. 1.0)
Control of the Contro	CD-3.75	Hardbone Drill (only GS-KIT Rev. 1.0)
	CD-4.2	Hardbone Drill (only GS-KIT Rev. 1.0)
	CD-5.0	Hardbone Drill (only GS-KIT Rev. 1.0)
-	GSSDL-2.75-8	Lance Drill 2.75 D 8 mm L (from GS-KIT Rev. 2.2)
-	GSSDL-2.75-10	Lance Drill 2.75 D 10 mm L (from GS-KIT Rev. 2.2)
	GSSDL -2.75-11.5	Lance Drill 2.75 D 11.5 mm L (from GS-KIT Rev. 2.2)
	CCCDI -9.7E-19	Lance Drill 2.75 D 13 mm L (from GS-KIT Rev. 2.2)
	GSSDL-2.75-13	Lunce Din 2.75 D 13 min L (nom 65-km keV. 2.2)

	Art. No.	Description
-	GMMIO-6.5	Guided Motor Mount Self-Loading Barrel 5.1 mm D 6.5 mm L
-12-111	GMMIO-12.5	Guided Motor Mount Self-Loading Barrel 5.1 mm D 12.5 mm L
-	NL-GMMIO-6.5	Narrow Line Guided Motor Mount Self-Loading Barrel 3.4 mm D 6.5 mm L
	NL-GMMIO-12.5	Narrow Line Guided Motor Mount Self-Loading Barrel 3.4 mm D 12.5 mm L
September 1	GRD10-6.5	Guided Ratchet Driver Self-Loading Barrel 5.1 mm D 6.5 mm L
	GRD10-12.5	Guided Ratchet Driver Self-Loading Barrel 5.1 mm D 12.5 mm L
	GRDIS-12.5	Guided Ratchet Driver Screw Receiving Barrel 5.1 mm D 12.5 mm L
- mmin	NL-GRDIO-6.5	Narrow Line Guided Ratchet Driver Self-Loading Barrel 3.4 mm D 6.5 mm L
-	NL-GRDIO-12.5	Narrow Line Guided Ratchet Driver Self-Loading Barrel 3.4 mm D 12.5 mm L
- man	NL-GRDIS-12.5	Narrow Line Guided Ratchet Driver Screw Receiving Barrel 3.4 mm D 12.5 mm L
	GPIND-1.3	Guided Pin Drill
	GP-1.3	Guided Pin
	HHDA-L	Hand Hex Driver for Prosthetics, Hex 1.25, long
	RDA-M	Ratchet Driver for Prosthetics, medium for Hex 1.29 mm
	RDA-L	Ratchet Driver for Prosthetics, long for Hex 1.29 mm
	TRU-70BG	70 Ncm Torque Ratchet with Measuring Arm
	TP-3.4	Narrow Line Tissue Punch 3.4 mm D
	TP-4.2	Tissue Punch 4.2 mm D

Miscellaneous components

	DP-3.0	Direction Pins for 3.0 mm D Implant
	DP-3.3	Direction Pins for 3.3 mm D Implant
	DP-3.75	Direction Pins for 3.75 mm D Implant
_	DP-4.2	Direction Pins for 4.2 mm D Implant
	DP-5.0	Direction Pins for 5.0 mm D Implant
	DP-6.0	Direction Pins for 6.0 mm D Implant
	MM-ADP-7	Motor Mount Adapter with Ballfriction 7 mm
11000	LD-2.0	Lance Drill 2.0 - 16 mm L

Drilling Protocols





For placement of all Implant diameters always use of Marking/Lance Drill DELD-2.0 is highly recommended

Drilling Sequence

Standard Platform

Implant Diameter	3.75 mm	4.2 mm	5.0 mm	6.0 mm
Color Code	blue	green	black	brown
Previous of the regular drills with CDEP	1	2	3	4
Conical drill width CDEP	3.2 mm	3.2-3.65 mm	3.2-4.5 mm	3.2-5.4 mm
Final regular drill with max. depth / according to the length of the implant	3.2 mm	3.65 mm	4.5 mm	5.4 mm





For placement of all Implant diameters always use of Marking/Lance Drill DELD-2.0 is highly recommended





Drilling Protocols

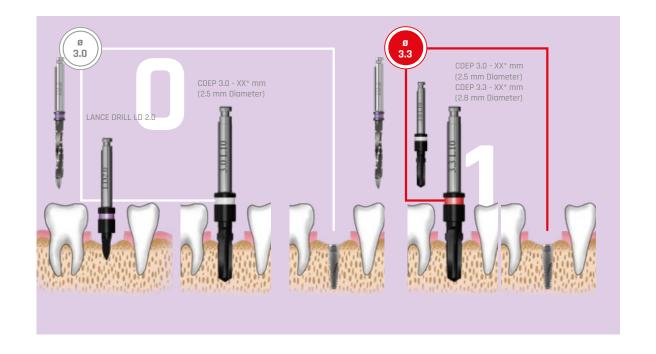


Narrow Line 3.0 and 3.3 mm Platform

Implant Diameter	3.0 mm	3.3 mm
Color Code	white	red
Previous of the regular drills with CDEP	only Pilot- Drill LD 2.0	1
Conical Drill width CDEP		2.8 mm
Final regular drill with max. depth / according to the length of the implant	2.5 mm	2.8 mm



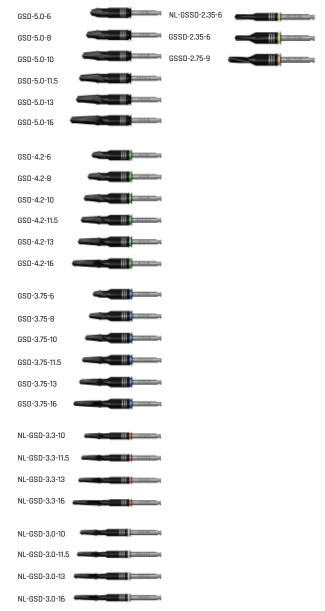
For placement of all Implant diameters always use of Marking/Lance Drill DELD-2.0 is highly recommended



Drilling Sequence GS/Guided Kit

Guided Protocol using Sleeves – Standard Platform & Narrow Line

		Drill 1	Drill 2	Drill 3	Drill 4	Drill 5	Sleeve
Narrow Line							
NL-SNAP-3-10	SBLA - Narrow	NL-GSSD-2.35-6	NL-GSD-3.0-10				TUBE4-35-5L
NL-SNAP-3-11.5	SBLA - Narrow	NL-GSSD-2.35-6	NL-GSD-3.0-10	NL-GSD-3.0-11.5			TUBE4-35-5L
NL-SNAP-3-13	SBLA - Narrow	NL-GSSD-2.35-6	NL-GSD-3.0-10	NL-GSD-3.0-13			TUBE4-35-5L
NL-SNAP-3-16	SBLA - Narrow	NL-GSSD-2.35-6	NL-GSD-3.0-10	NL-GSD-3.0-13	NL-GSD-3.0-16		TUBE4-35-5L
NL-SNAP-3.3-10	SBLA - Narrow	NL-GSSD-2.35-6	NL-GSD-3.0-10	NL-GSD-3.3-10			TUBE4-35-5L
NL-SNAP-3.3-11.5	SBLA - Narrow	NL-GSSD-2.35-6	NL-GSD-3.0-10	NL-GSD-3.3-11.5			TUBE4-35-5L
NL-SNAP-3.3-13	SBLA - Narrow	NL-GSSD-2.35-6	NL-GSD-3.0-10	NL-GSD-3.3-13			TUBE4-35-5L
NL-SNAP-3.3-16	SBLA - Narrow	NL-GSSD-2.35-6	NL-GSD-3.0-10	NL-GSD-3.3-13	NL-GSD-3.0-16		TUBE4-35-5L
Standard Line							
SNAP-3.75-8	SBLA - Standard	GSSD-2.35-6	GSD-3.75-8				TUBE516
SNAP-3.75-10	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-10			TUBE516
SNAP-3.75-11.5	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5			TUBE516
SNAP-3.75-13	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5	GSD-3.75-13		TUBE516
SNAP-3.75-16	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5	GSD-3.75-13	GSD-3.75-16	TUBE516
SNAP-4.2-8	SBLA - Standard	GSSD-2.35-6	GSD-3.75-8	GSD-4.2-8			TUBE516
SNAP-4.2-10	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-10	GSD-4.2-10		TUBE516
SNAP-4.2-11.5	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5	GSD-4.2-11.5		TUBE516
SNAP-4.2-13	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5	GSD-4.2-13		TUBE516
SNAP-4.2-16	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5	GSD-4.2-13	GSD-4.2-16	TUBE516
SNAP-5-6	SBLA - Standard	GSSD-2.35-6	GSD-3.75-6	GSD-4.2-6	GSD-5.0-6		TUBE516
SNAP-5-8	SBLA - Standard	GSSD-2.35-6	GSD-3.75-8	GSD-4.2-8	GSD-5.0-8		TUBE516
SNAP-5-10	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-10	GSD-4.2-10	GSD-5.0-10	TUBE516
SNAP-5-11.5	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5	GSD-4.2-11.5	GSD-5.0-11.5	TUBE516
SNAP-5-13	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5	GSD-4.2-13	GSD-5.0-13	TUBE516
SNAP-5-16	SBLA - Standard	GSSD-2.35-6	GSSD-2.75-9	GSD-3.75-11.5	GSD-4.2-13	GSD-5.0-16	TUBE516



Libraries

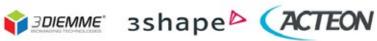


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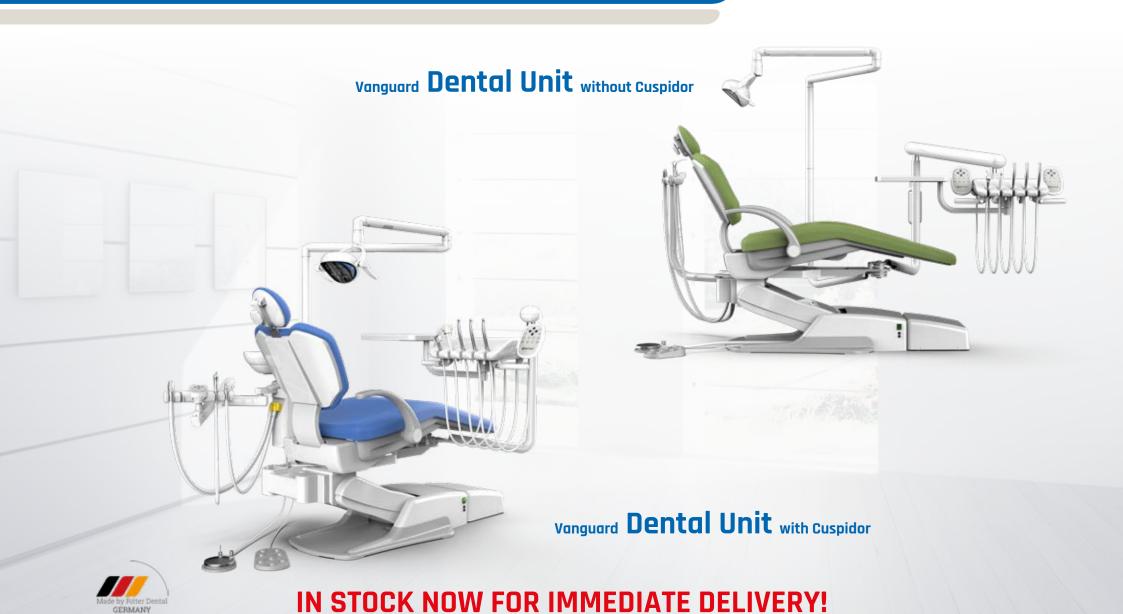




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Notes

Notes



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