- Arch to operate, antagonist and centric
- Material:
  If teeth are stable: silicone (polyether or similar polysiloxanes)
  If teeth are not stable: alginate (after removal or splinting)
- Maximum extension, non-functionalised (anatomical)

Reproduce the exact situation of the mouth at the time of surgery

- Arch to operate, antagonist and centric
- Maximum extension, without holes

Reproduce the exact situation of the mouth at the time of surgery

A. TRADITIONAL IMPRESSION

B. DIGITAL IMPRESSION

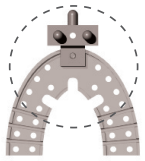
CASTING MODELS

- Extra-hard plaster model casting (no imperfections or bubbles)

EVOBITE CONSTRUCTION

3D PRINT MODELS

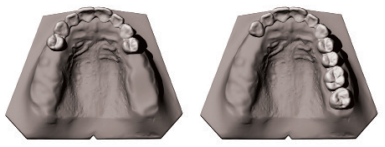
- High definition 3D print of the STL file



correct assembly for acquisition diameter greater than 8 cm

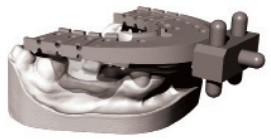
correct assembly for acquisition diameter less than 8 cm

- Fix the 3DMarkers to the bite according to the diagram above and glue them with a drop of cyanoacrylate
- Measure the bite on the model and if necessary shorten and fit it to the dimensions of the arch. It is advisable for the bite to reach the molars (not over)

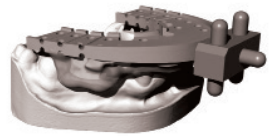


- Secure the Evobite with transparent and not radiopaque resin (orthodontic type) on the model, particularly compensating the space in line with the edentulous areas
- Keep the front 3DMarker more central and as near to the incisor edge as possible.

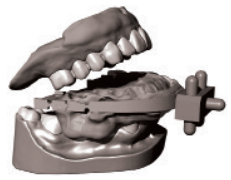
A. EVOBITE MOUNTING WITH RESIN ON THE MODEL

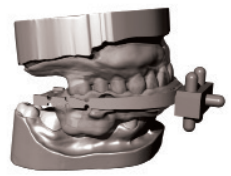


B. EVOBITE MOUNTING WITH SILICONE ON THE MODEL



MOUNTING INSIDE THE MOUTH WITH ANTAGONIST

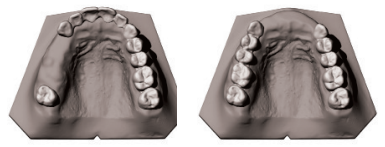




When hardened, position the bite on the patient and reline towards the antagonist with the same silicone supplied with the Evobite kit, taking care that you keep the bite steady (note: it is not a centric recording but a simple stabilisation key)

OPTICAL SCANNING IN LABORATORY AND VIRTUAL WAX-UP

EVOBITE DELIVERY TO THE PATIENT FOR THE CT/CBCT EXAM



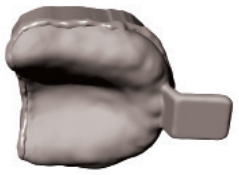
- Apply a layer of universal adhesive between the silicone and the bite and apply the silicone on the side of the bite that interlocks with the model
- Compensate with the silicone on the model corresponding to the edentulous area
- Fix the bite on the model taking care that you keep the 3DMarker more centred and as near to the incisor edge as possible

NOTE: THE COMPONENTS TO CONSTRUCT THE EVOBITE ARE DISPOSABLE

TRADITIONAL IMPRESSION

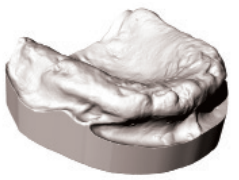
- Arch to operate, antagonist and centric (raised)
- Material: silicone or alginate
- Maximum extension, non-functionalised (anatomical)

Reproduce the exact situation of the mouth at the time of surgery



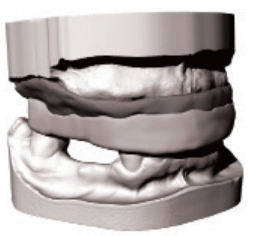
CASTING MODELS

- Extra-hard plaster model casting (no imperfections
- or bubbles)



VERTICAL DIMENSION AND OCCLUSAL RELATIONSHIP DETECTION AESTHETIC TEST

The procedure is comparable to that used for the construction of a total prosthesis



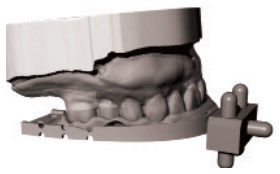
PRECISION DUPLICATION WITH TRASPARENT RESIN

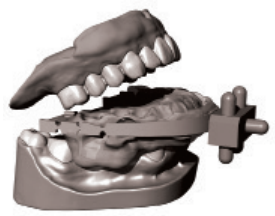
The duplicate of the aesthetic test must be precise and with transparent and NOT radiopaque material (orthodontic resin type), after having restored the vestibular flange

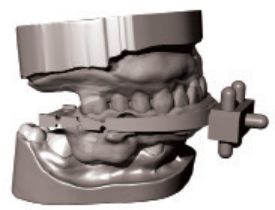
COMPATIBLE PROTOCOL
Although it is NOT recommended, if the patient has adequate removable prosthesis (from the aesthetic and functional aspect), proceed with its duplication after having relined it.

EVOBITE MOUNTING WITH SILICON ON THE MODEL WITH THE PROSTHESIS DUPLICATE MOUNTED

COMPATIBLE PROTOCOL
The RealGUIDE procedure is compatible with DUAL SCAN protocol (double scan) that consists of the insertion of radiopaque points in the prosthesis duplicate and double CBCT scan (patient with radiological template and radiological template only) to automatically overlap the scan of the prosthesis with the anatomy of the patient directly into the 3Diagnosys software. However, it is advisable to follow the standard procedure and use the Evobite even in cases of total edentulism







MOUNTING INSIDE THE MOUTH WITH ANTAGONIST

For the radiological guide to be stabilised, position the bite in the patient's mouth and reline towards the antagonist with the same silicone supplied with the Evobite kit, taking care that you keep the bite steady

ALTERNATIVE PROTOCOL
Mounting the Evobite to the antagonist can also be performed in the articulator ONLY IF a RAISED centric was used during the initial phase. The same should be done in the case of guided surgery on two arches during the same operation

OPTICAL SCANNING IN LABORATORY

RADIOLOGICAL GUIDE DELIVERY TO THE PATIENT FOR THE CT/CBCT EXAM

NOTE: THE COMPONENTS TO CONSTRUCT THE EVOBITE ARE DISPOSABLE