

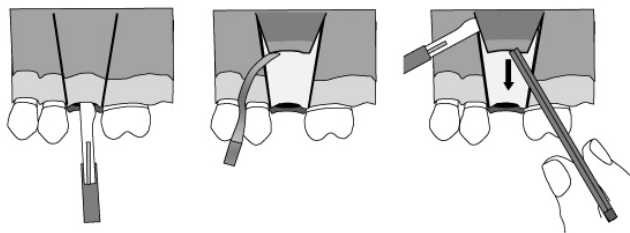
ORAL SURGERY: FILLING OF SINUS-ORAL POST-EXTRACTIVE COMMUNICATION

Specific indications and instructions for Guided Regeneration Material System

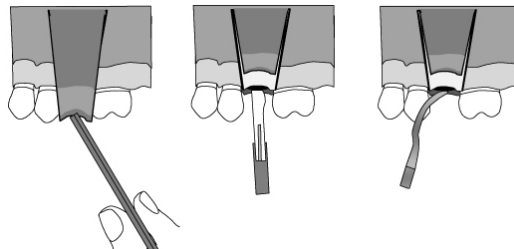
COLLAGENE AT® IDROSSILAPATITE AT® IDROSSILAPATITE MICROMETRICA AT®

The application of two Collagene AT® membranes, one on the sinus side, the other in occlusal side of the socket, and the filling of the socket with Idrossilapatite AT® allows to close the sinus-oral communication.

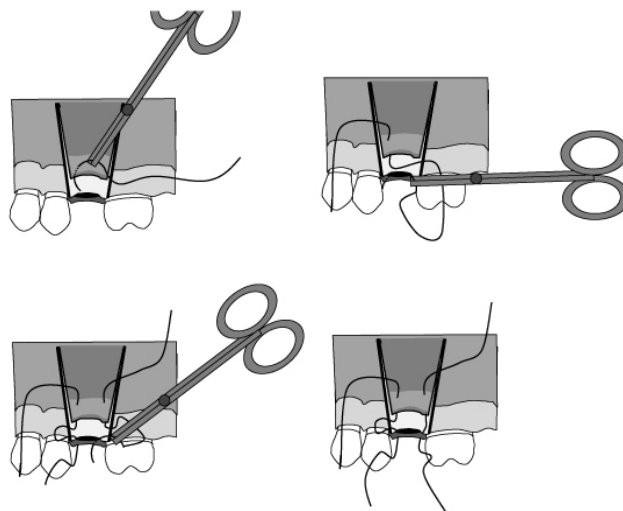
1. After tooth extraction and diagnosis of sinus-oral communication, make a surgical incision with scalpel all around the socket.



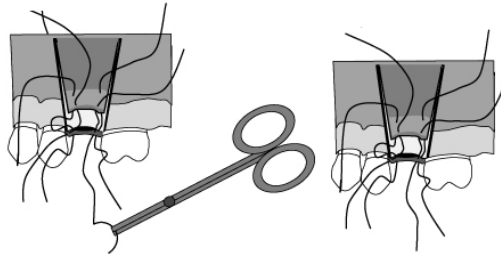
2. Reflect buccally a full thickness mucoperiosteal flap exposing bone margin with two vertical incisions, with 20-30 degrees angle, to get a valid mobilisation.



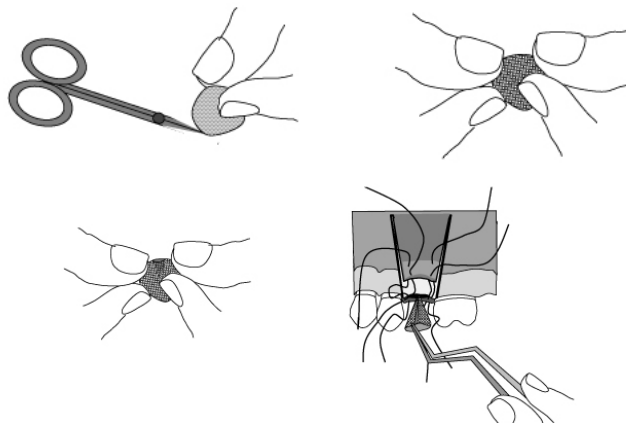
3. Pass the sutures without tying.



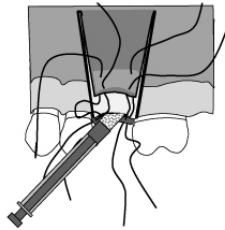
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4. Cut a quadrangular Collagene AT® membrane and apply it in the socket depth corresponding to the communication; the membrane must be very wide to cover the deep bone margin for many millimeters.

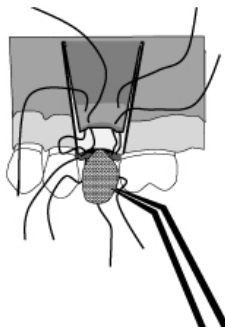


5. Fill the socket completely with Idrossilapatite AT®.



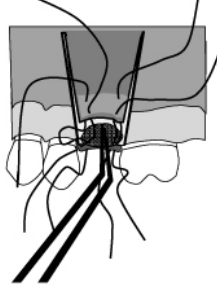
Warning: press with a gauze with moderate pressure, to avoid the hydroxylapatite displacing into the maxillary sinus.

6. Cut another quadrangular Collagene AT® membrane wide enough to cover occlusal socket bone margins for about two millimeters.



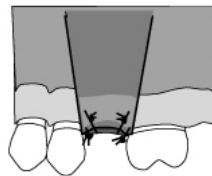
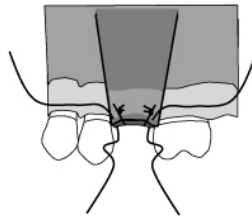
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7. Apply the Collagene AT® membrane with dental tweezers and adapt with blunt instruments on the occlusal socket margins.



8. Press with dry gauzes.

9. Tie and complete the sutures.



10. Apply a surgical dressing.

11. Prescribe a pharmacological treatment and advise to avoid chewing in the operated zone till sutures removal.

After one week remove surgical dressing and sutures.

Warning: if wound dehiscence occurs, apply a surgical dressing again, till the healing tissue covers all the socket.

