SOUTHERNIMPLANTS®

Innovative Treatment Solutions

ZYGOMATIC Implants
Product Catalogue

Southern Implants® is a leading provider of unique and innovative dental implant products with a focus on top-end professional users who want more choices. Southern's expertise in research, development and manufacturing of dental implants allows us to provide Innovative Treatment Solutions that will reduce treatment times and improve patient outcomes.

Striving for excellence and meeting customer needs has led to our wide product range characterised by Unique and Innovative products which include:

- Multiple interfaces, to suit customer preference.
- INVERTA® implant, featuring a Body-Shift™ design, engineered for primary stability and suitable for immediate loading.
- Co-Axis®, Subcrestal Angle Correction® implants, available in angulations of 12°, 24° and 36° and various internal and external connections.
- MAX implant, specifically designed for immediate molar tooth replacement.
- The ZYGAN®, ZYGEX and ZYGIN implants for severely resorbed maxilla and craniofacial reconstruction.

Our product portfolio is in synchronised evolution with protocol improvements and technological advances.

My sincere thanks to all specialists, dentists and technicians who put their trust in our company.

Graham Blackbeard
Managing Director, Southern Implants

CONTENTS

ZYGIN Implant Family - ZYGIN / ZYGIN-W / ZYGON 6
Implant Range, Site Preparation and Surgical Components 6
Indirect Prosthetic Flowchart 7

ZYGOMATIC Implant family - ZYG-55 / ZYGAN® / ZYGEX / ONC-55 8
Implant Range, Site Preparation and Surgical Components 8
Indirect Prosthetic Flowchart 9

Zygomatic Drilling Protocols 11
Drill Information 12
Zygomatic Guided Surgery Drills 14

Zygomatic Protocol Synopsis 15
ZAGA approach classifications and suggested implants 16

Instrument Trays 18
Zygomatic Instrument Tray 18
Prosthetic Instrument Tray 20
Long Handle Screwdrivers 21

General Information 22
Implant Dimensions and Information 22
Torque Table For Southern Screws 24
Instruments for implants packaged with a fixture mount 25
Zygomatic drills and direction indicator laser markings 26
Explanation of Symbols 27

For more information scan the below

or visit
SOUTHERNIMPLANTS.COM

NOTE:

- images are for illustration purposes only and do not necessarily accurately represent the product.
- all dimensions in this catalogue are in mm, unless otherwise specified.
- not all products are cleared for sale in all countries.

ZYGIN FAMILY

ZYGIN

ZYGIN-W

ZYGON

ZYGOMATIC FAMILY

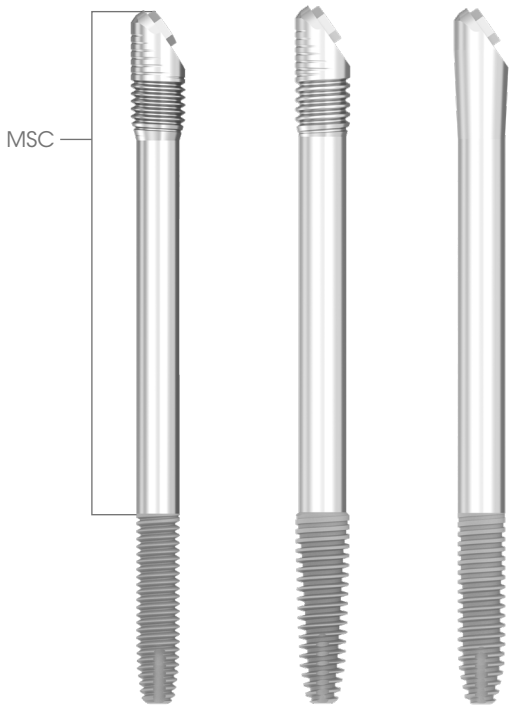
ZYG-55

ZYGAN®

ZYGEX

ONC-55

ZYGIN Implant Family - ZYGIN / ZYGIN-W / ZYGON



ZYGIN-xx **ZYGIN-W-xx** **ZYGON-xx**

NOTE: packaged with a narrow fixture mount that is only designed with a hex (no square). For implant placement, utilise insertion tools I-ZYG-INS-2 or I-CON-X.

(where xx is implant length)

Implants are premounted and available in lengths of:

NOTE: implant dimensions and information-page 22

ITEM CODE	IMPLANT LENGTH CODES (in mm)
ZYGINxx	30 / 32.5 / 35 / 37.5 / 40 / 42.5 / 45 / 47.5 / 50 / 52.5 / 55 / 57.5 / 60
ZYGIN-Wxx	30 / 32.5 / 35 / 37.5 / 40 / 42.5 / 45 / 47.5 / 50 / 52.5 / 55 / 57.5 / 60
ZYGONxx	30 / 32.5 / 35 / 37.5 / 40 / 42.5 / 45 / 47.5 / 50 / 52.5 / 55 / 57.5 / 60

Surgical Components

(where x is length)

Cover Screw

CS-ZYG

Healing Abutments

N/A

INDIRECT

Compact Conical Abutment

MC-ZYG

1.5/2/3/4/5.5
Torque:
20 Ncm

MC-ZYG17D-x

3/4
Torque:
20 Ncm

Healing Caps

HMCx

4/6

HMCT7-x

4/6

Impression Copings

CMC1
(pick-up)

CMC2
(transfer)

CMC-ZG-2
(transfer)

SFT-MC-48
(scanning flag)

Titanium

Laboratory Analogues

LSMC1

LAD-MC

(digital analogue)

Prosthetic Components

GMC1

Gold

TMC1 / 5

Titanium
TMCSL
(long version)

SIB-TMC1

1 mm collar

PA-MC-48
(passive abutment)

PKR-MC-48

PEEK*
*Screw torque:
10 -15 Ncm

ASC-TMC1
(angulated screw channel abutment)

(packed with screws)

Retaining Screws

1 Series Screws

Torque:
10-15 Ncm

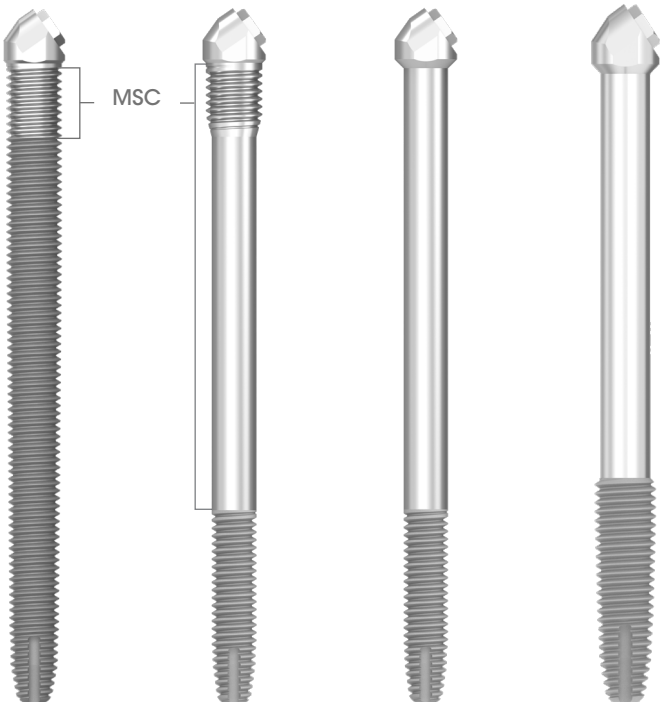
TSH1-ASC

Torque:
10-15 Ncm

NOTE:

- for optimal coronal hard and soft tissue health, it is strongly recommended that all Southern Zygomatic implants are restored with compact conical abutments (indirect route).
- the direct route is only recommended if there are restorative considerations that preclude the use of compact conical abutments.

ZYGOMATIC Implant family - ZYG-55 / ZYGAN® / ZYGEX / ONC-55



ZYG-55-xx **ZYGAN-xx** **ZYGEX-xx** **ONC-55-xx**

NOTE: all ZYG and ZYGAN® implants are packaged with a Bone Mill fixture mount. For more information refer to CAT-1219.

(where xx is implant length)

Implants are premounted and available in lengths of:

NOTE: implant dimensions and information-page 22.

ITEM CODE	IMPLANT LENGTH CODES (in mm)
ZYG-55xx	35N / 37.5N / 40N / 42.5N / 45N / 47.5N / 50N / 52.5N / 55N / 60N
ZYGAN-xx	30 / 32.5 / 35 / 37.5 / 40 / 42.5 / 45 / 47.5 / 50 / 52.5 / 55 / 57.5 / 60
ZYGEX-xx	30 / 32.5 / 35 / 37.5 / 40 / 42.5 / 45 / 47.5 / 50 / 52.5 / 55 / 57.5 / 60
ONC-55-xx	27.5 / 32.5 / 37.5 / 42.5 / 47.5

Surgical Components

Cover Screw

SCU2

Healing Abutments

TBx

Ø4.5

2/3/4/5/6/8 lengths

WBx

Ø5.5

2/3/4/6/8 lengths

INDIRECT

Compact Conical Abutment

AMCZx

1.5/2/3/4/5.5
Torque:
20 Ncm

MC-EX4017D-x

3/4
Torque:
20 Ncm

Healing Caps

HMCx

4/6

HMCT7-x

4/6

Impression Copings

CMC1
(pick-up)

CMC2
(transfer)

CMC-ZG-2
(transfer)

SFT-MC-48
(scanning flag)

Titanium

Laboratory Analogues

LSMC1

LAD-MC

(digital analogue)

Prosthetic Components

GMC1

Gold

TMC1 / 5

Titanium
TMCSL
(long version)

SIB-TMC1

1 mm collar

PA-MC-48
(passive abutment)

PKR-MC-48

PEEK*
*Screw torque:
10 -15 Ncm

ASC-TMC1
(angulated screw channel abutment)

(packed with screws)

Retaining Screws

1 Series Screws

Torque:
10-15 Ncm

TSH1-ASC

Torque:
10-15 Ncm

NOTE:

- for optimal coronal hard and soft tissue health, it is strongly recommended that all Southern Zygomatic implants are restored with compact conical abutments (indirect route).
- the direct route is only recommended if there are restorative considerations that preclude the use of compact conical abutments.

DIRECT

Healing Abutments

TV4B
(two-part)

TB
(one-part)

2/3/4/5/6/8

WB
(one-part)

2/3/4/6/8

Impression Copings

CBV
(pick-up)

CB70
(transfer)

CBU-W
(pick-up)

CB75
(transfer)

SFT-EX-40
(scanning flag)

Titanium

Laboratory Analogues

LS12

LAD-IB

(digital analogue)

Prosthetic Components

GC-EX-40
(engaging)
GC-NX-40
(non-engaging)

Gold

TC-EX-40-C1
(engaging)
TC-NX-40-C1
(non-engaging)

Titanium

TC-EX-40-C5
(engaging)
TC-NX-40-C5
(non-engaging)

Titanium

PKR-EX-40
(engaging)
PKR-NX-40
(non-engaging)

PEEK*
*Screw torque:
20 Ncm um screw

SIB-EX-40-50C1.5
(engaging)
SIB-NX-40-50C1.5
(non-engaging)

Ø5.0 platform
1.5 mm collar

SIB-EX-40-50C3
(engaging)
SIB-NX-40-50C3
(non-engaging)

Ø5.0 platform
3 mm collar

SIB-EX-40-55C3
(engaging)
SIB-NX-40-55C3
(non-engaging)

Ø5.5 platform
3 mm collar

SIB-EX-40-55C5
(engaging)
SIB-NX-40-55C5
(non-engaging)

Ø5.5 platform
5 mm collar

TIB-EX-40
(engaging)
TIB-NX-40
(non-engaging)

TIB-EX-40-C1.5
(engaging)
TIB-NX-40-C1.5
(non-engaging)

TIB-EX-40-C3
(engaging)
TIB-NX-40-C3
(non-engaging)

CIA-EX-40
(engaging)
CIA-NX-40
(non-engaging)

*TIB abutments available in 3 cuff height variants:
0.6 mm, 1.5 mm and 3 mm

Passive abutment

SB16
(engaging)
SB-17-TT
(non-engaging)

(packed with
abutment, luting screw
and plastic sleeve)

Angulated Screw Channel Abutment

ASC-EX-40

(packed with screw)

Retaining Screws

2 Series
Screws

Torque:
32 - 40 Ncm

3 Series
Screws

Torque:
32 - 40 Ncm

ASC Abutment Screw

TSTZ5-ASC

Titanium

Torque: 32 - 40 Ncm

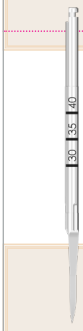
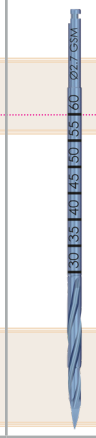
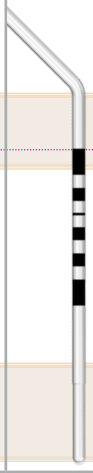
Zygomatic Drilling Protocols

The drilling protocol for Southern Implants' Zygomatic implants has been designed to provide precision and efficiency when preparing the osteotomy in the maxillary alveolar and Zygomatic bone. The system utilises a range of pilot drills, twist drills, counterbores and side-cutting burrs, each serving a specific function based on anatomical access, desired site preparation and bone quality.

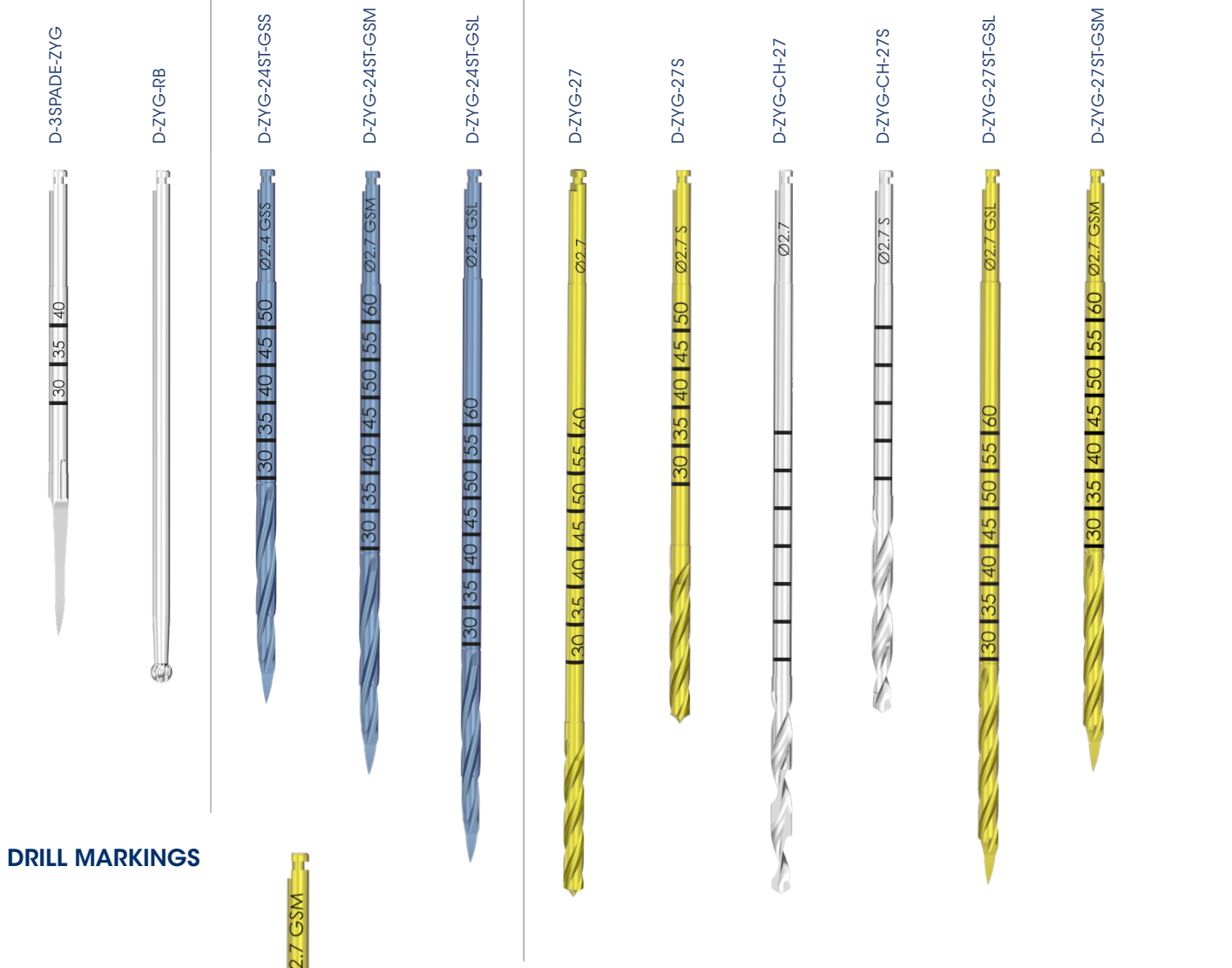
The drills are laser-marked in 5 mm increments, corresponding directly to the available implant lengths for accurate depth control. To verify the trajectory and depth of the osteotomy, a direction indicator should be used before implant placement. This step is essential to confirm that the chosen implant length and angulation align with the surgical plan.

Clinicians should determine their preferred osteotomy preparation protocol based on the bone density and the diameter of the implant being placed. Modifications to the standard drilling sequence may be made at the clinician's discretion to achieve ideal primary stability in varying bone conditions.

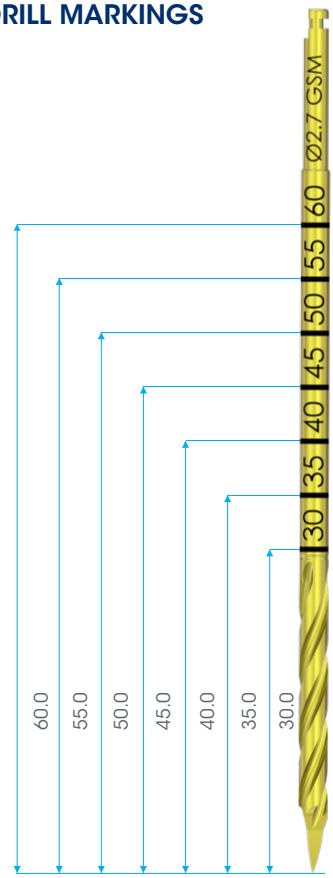
Below outlines the overall drilling protocol (note that the drills are available in different shaft lengths):

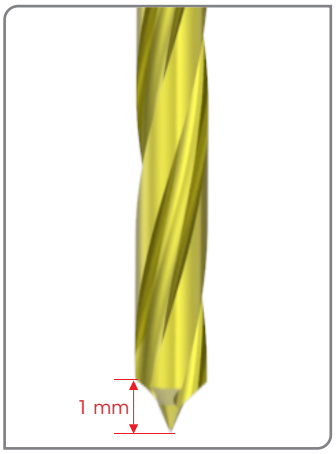
Pilot drill	Round burr	Ø2.4 Twist drill	Depth gauge & direction indicators	Counterbores	Side cutting drill	Ø2.7 Twist drill	Ø2.9 Twist drill	Ø3.5 Twist drill	Implant placement
	(Optional)		(Optional)	(Optional) To enlarge osteotomy entry point	(Optional) For channel creation		(Optional) For medium bone		
Initiate the osteotomy.	Modify the curvature or entrance point of the osteotomy site.	Begins the osteotomy along the planned trajectory. Should the GS (Guided Surgery) drill be used, the pilot drill can be omitted.	Verifies the depth and angulation of the osteotomy; confirms implant length.	Enlarges the Zygoma entry for implant apex insertion.	Useful in cases where anatomy requires slight redirection or for creating a channel.	Widening of the osteotomy.	Widening of the osteotomy.	Widening of the osteotomy and essential for preparation of the alveolar bone for the coronal portion of the implant.	Implant is inserted using either a handpiece or manual driver.
									
D-3SPADE-ZYG	D-ZYG-RB	D-ZYG-24ST-GSS D-ZYG-24ST-GSM D-ZYG-24ST-GSL	DEPTH GAUGE I-ZYG-DG-1 CH-I-DG INDICATORS I-ZYG-DI55 ZYG-TR-55-35 ZYG-TR-55-45 ZYG-TR-55-52.5	D-ZYG-CS-S D-ZYG-CS	CH-D-CM	D-ZYG-27S D-ZYG-27 D-ZYG-CH-27S D-ZYG-CH-27 D-ZYG-27ST-GSM D-ZYG-27ST-GSL	D-ZYG-29S D-ZYG-29 D-ZYG-CH-29S D-ZYG-CH-29	D-35T-M15 D-ZYG-35S D-ZYG-35	

Drill Information



DRILL MARKINGS





CAUTION: when drilling close to crucial anatomical landmarks, consider that the drill preparation site may be up to 1 mm deeper than the corresponding implant length

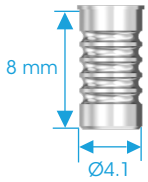
Ø2.9 mm	Ø3.5 mm	Counter-Sink (Ø3.4 mm)	Side Cutting

Zygomatic Guided Surgery Drills

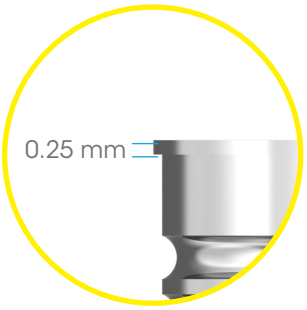
The Zygomatic implant range may be placed utilising the guided surgery drills (D-ZYG-24ST-GSS/M/L and D-ZYG-27STGSM/L),which initiate the osteotomy and create a Ø2.4 or Ø2.7 mm site at the same time.

Clinicians are able to either place the implant following the Ø2.4 mm or Ø2.7 mm drill (depending on the bone density) or can continue prepping the osteotomy site as per the recommended drilling protocol.

NOTE: the drill is intended for angulation guidance and has no physical stop for depth control. Depth control is still determined by the patient's anatomy and the judgement and experience of the surgeon.



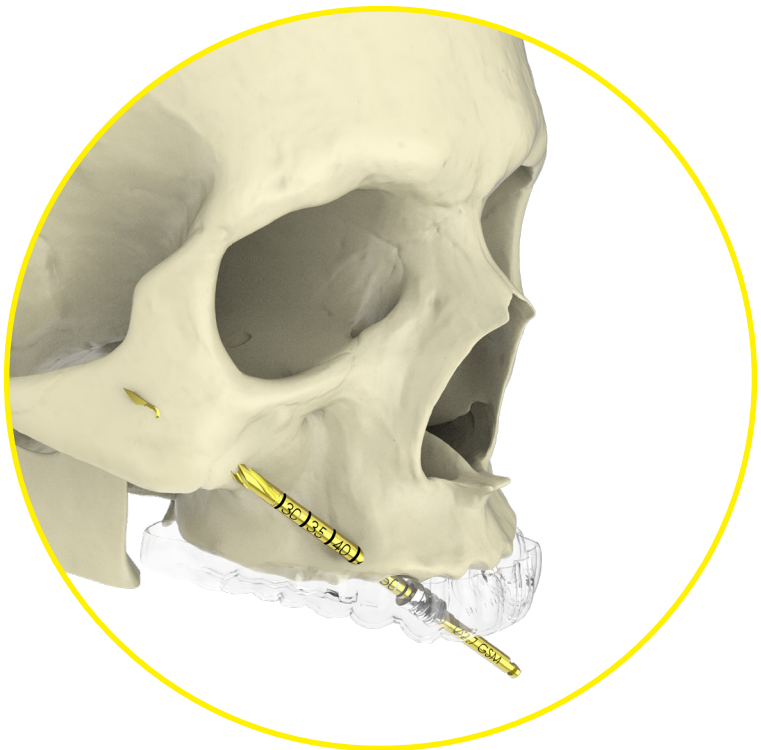
I-GSZ-4128-L8 Ø4.1 mm x 8 mm long
Guided Surgery Sleeve - Zygomatic



NOTE:

- the lip on the guide sleeve adds 0.25 mm,this does not need to be taken into consideration as most Southern Implants drills extend 1 mm longer
- **always plan for at least 2 mm from nerves / anatomical structures.**

Ø2.4 mm Zygomatic Spade Drills			Ø2.7 mm Zygomatic Spade Drills	
D-ZYG-24ST-GSS	D-ZYG-24ST-GSM	D-ZYG-24ST-GSL	D-ZYG-27ST-GSM	D-ZYG-27ST-GSL
				
(short)	(medium)	(long)	(medium)	(long)



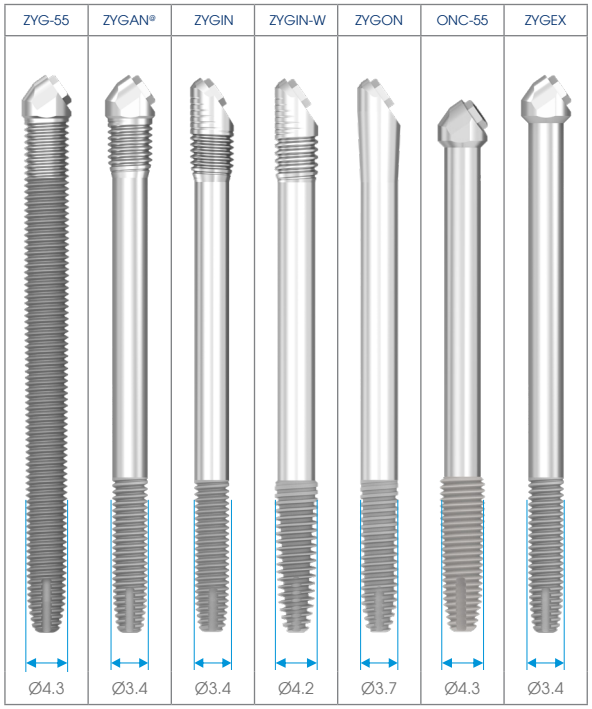
Zygomatic Protocol Synopsis

Southern Implants is aware of a number of different protocols currently used by various centres around the world. The classic technique for Zygomatic placement involved cutting a sinus window and placing the implant through the sinus. The sinus-slot technique and exteriorised technique have since been developed, with the implant placed through the sinus wall and outside the sinus wall respectively. It has been suggested that the choice of technique should consider the ridge crest concavity and sinus anatomy (Chrcanovic et al. 2013).

The ZAGA approach classifies the anatomy into different types to determine the appropriate technique for Zygomatic implant placement (Aparicio et al. 2014). The ZAGA (Zygomatic Anatomy-Guided Approach) classification system provides a clinically relevant framework to customise the surgical path of Zygomatic implants based on individual anatomical variation of the maxillary sinus and lateral wall. Understanding the ZAGA type helps the surgeon determine the ideal implant trajectory and emergence location to achieve optimal primary stability and prosthetic outcome while minimising sinus involvement.

While the chosen placement technique and implant selection is up to the practitioner's preference, this section illustrates the best Southern Implants Zygomatic implant for each technique using the ZAGA approach.

Anatomy	ZAGA classification	Implant path	Alternate placement technique	ZYG-55	ZYGAN®	ZYGIN	ZYGIN-W	ZYGON	ONC-55	ZYGEX
Anterior maxillary wall is very flat	ZAGA 0	Intra-sinus	Classic	✓	✓	✓	✓			
Anterior maxillary wall is slightly concave	ZAGA 1	Intra-extra path	Classic/ sinus-slot	✓	✓	✓	✓			
Anterior maxillary wall is concave	ZAGA 2	Extra-intra path	Sinus-slot/ exteriorised	✓	✓	✓	✓			
Anterior maxillary wall is very concave	ZAGA 3	Extra-sinus	Exteriorised		✓	✓	✓	✓	✓	✓
Maxilla and alveolar bone show extreme atrophy or maxilla has been resected	ZAGA 4	Extra-maxillary	Extra-alveolar					✓	✓	✓



The quad protocol entails placing two implants in one Zygoma. The ZYGAN®, ZYGIN, ZYGIN-W, ZYGON and ZYGEX are best suited to the quad protocol due to their narrower apex.

The Zygomatic implants features a Machined Surface Coronally (MSC) which captures the advantage of a machined coronal surface that covers the crestal portion of the implant. Indicated for patients with higher risk of coronal bone loss (smokers, history of periodontitis and cardiovascular disease).

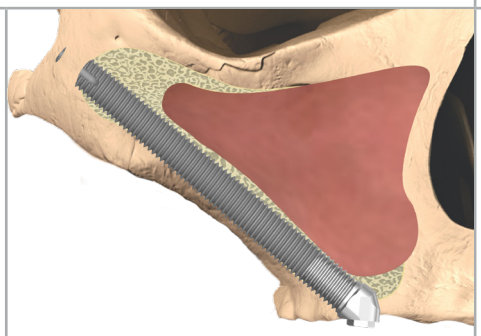
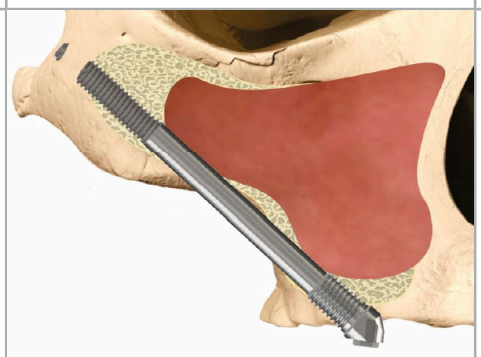
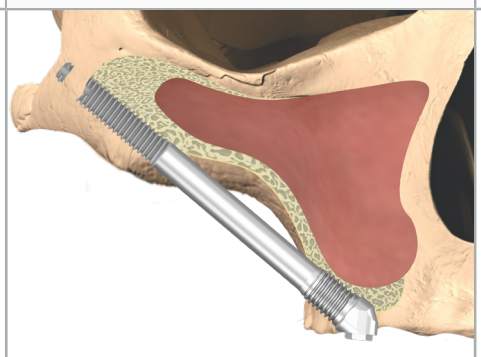
The ZYG-55 and ZYGAN® implants are equipped with a bone mill fixture mount which aims to provide a multipurpose function where it performs as both the fixture mount required for insertion as well as a bone mill to prepare the alveolar bone for abutment seating. For more information regarding the Bone Mill Fixture Mount, refer to CAT-1219.

The ZYGIN, ZYGIN-W and ZYGON implants are equipped with a narrower fixture mount and implant head which is indicated for patients which present with a severly atrophic maxilla. Should there be insufficient primary stability during insertion, the ZYGIN-W designed with a wider apical region is indicated for use.

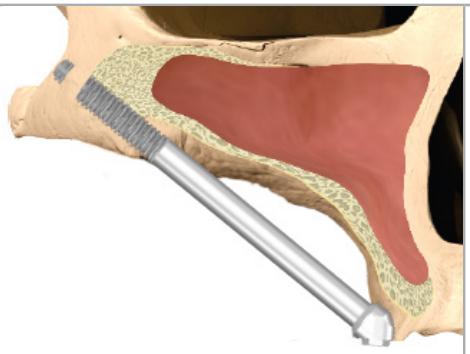
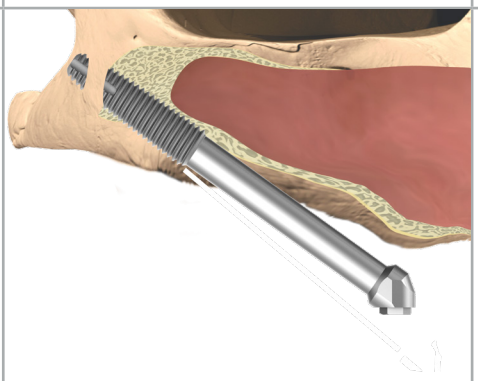
The ONC-55, ZYGEX and ZYGON implants are indicated for oncological resections and maxillectomy cases.

15

ZAGA approach classifications and suggested implants

ZAGA Classification			Indicated implant	Rational
ZAGA 0	The anterior maxillary wall is very flat. The implant head is located on the alveolar crest. The implant body has an intra-sinus path. The implant comes in contact with bone at the alveolar crest and Zygoma, and sometimes at the internal side of the sinus wall.		ZYG-55 ZYGAN® ZYGIN ZYGIN-W	Should the entire section of the implant be surrounded by bone or bone material due to a sinus lift, a fully threaded ZYG-55 implant may be used. Alternatively the smooth mid section design reduces the exposure of the sinus and soft tissues to roughened implant thread.
ZAGA 1	The anterior maxillary wall is slightly concave. The implant head is located on the alveolar crest. The drill has performed the osteotomy slightly through the wall. Most of the implant body has an intrasinus path. The implant comes in contact with bone at the alveolar crest, lateral sinus wall and Zygoma.		ZYG-55 ZYGAN® ZYGIN ZYGIN-W	Should there be sufficient bone coverage, the ZYG-55 implant can be used in these indications. Alternatively, it is recommended that an implant with a smooth mid-section should be used as it reduces the exposure of the sinus to a roughened threaded surface.
ZAGA 2	The anterior maxillary wall is concave. The implant head is located on the alveolar crest. The drill has performed the osteotomy through the wall and the implant can be seen through it and most of the body has an extra-sinus path. The implant comes in contact with bone at the alveolar crest, lateral sinus wall and Zygoma.		ZYGAN® ZYGIN ZYGIN-W	The smooth mid section design reduces the exposure of the sinus and soft tissues to roughened implant thread whilst the coronal thread engages the bone at the alveolar crest.

16

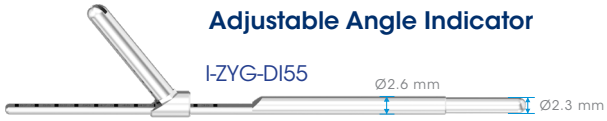
ZAGA 3	The anterior maxillary wall is very concave. The implant head is located on the alveolar crest. Most of the body has an extra-sinus path. The middle part of the implant body is not touching the most concave part of the wall. The apical region of the implant contacts the bone in the Zygoma, whilst the coronal region of the implant rests against the alveolar bone.		ZYGAN® ZYGIN ZYGIN-W ZYGON ONC-55 ZYGEX	In ZAGA-3 anatomies, where there is sufficient alveolar bone for intra-sinus or trans-sinus placement, the ZYGAN®, ZYGIN, and ZYGIN-W implants are optimal choices. These implants offer a threaded coronal portion that allows for engagement within available bone. However, in cases where the residual crest is extremely thin and there is concern that coronal threads may compromise soft tissue or lead to dehiscence, the ZYGON, ZYGEX or ONC-55 implants serve as ideal alternatives.
ZAGA 4	The maxilla and alveolar bone show extreme vertical and horizontal atrophy. The implant head is located buccally of the alveolar crest. There is no minimum osteotomy at this level. The drill has arrived at the apical Zygomatic entrance following a path outside the sinus wall. The implant contacts bone in the Zygoma and part of the lateral sinus wall.		ZYGON ONC-55 ZYGEX	ZYGON, ZYGEX and ONC-55 implants are specifically engineered for ZAGA-4 cases, where the maxilla is severely resorbed and extra-sinus placement is necessary. Their wide diameter provides engagement with the available bone. Additionally, the unthreaded coronal section minimises pressure on thin crestal bone and soft tissue, reducing the risk of dehiscence or exposure. **NOTE:** due to the unsupported coronal section of the implant, it is important that the prosthesis is designed to reduce and splint the overall bite force over the ridge.

Pilot Drill

D-3SPADE-ZYG
D-ZYG-RB

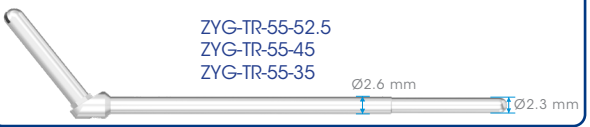
Adjustable Angle Indicator

I-ZYG-DI55



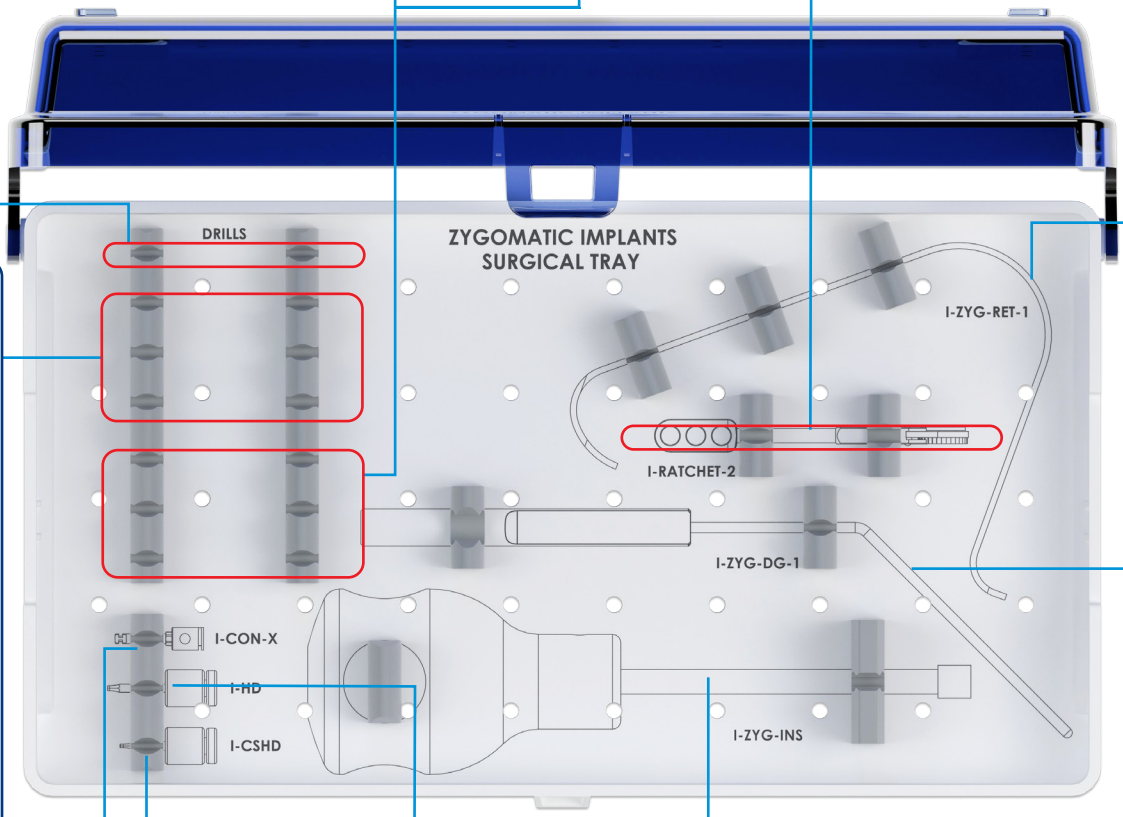
Try-in Implants /Angle indicators

ZYG-TR-55-52.5
ZYG-TR-55-45
ZYG-TR-55-35



Ratchet Wrench

I-RATCHET-2



Twist Drills

Ø2.4
D-ZYG-24ST-GSS
D-ZYG-24ST-GSM
D-ZYG-24ST-GSL

Ø2.7
D-ZYG-27
D-ZYG-27S
D-ZYG-CH-27
D-ZYG-CH-27S
D-ZYG-27ST-GSM
D-ZYG-27ST-GSL

Ø2.9
D-ZYG-29
D-ZYG-29S
D-ZYG-CH-29
D-ZYG-CH-29S

Ø3.5
D-ZYG-35
D-ZYG-35S
D-35T-M15

Counter-Sinks

D-ZYG-CS
D-ZYG-CS-S

Side Cutting

CH-D-CM

Insertion Tools

I-CON-X / XS
Fixture Mount (Hex) Driver with W&H

I-CONU-X / XS
Fixture Mount (Universal) Driver

0.9 Hex Cover Screw Drivers

I-CS-HD/L
Handheld

I-HHD-09
Handpiece

I-WI-09
Wrench

1.22 Hex Drivers

I-HD-S/M/L
Handheld

I-HHD-22-S/M/L
Handpiece

I-WI-22-S/M/L
Wrench

1.22/1.27 mm Universal HEX Drivers

I-HD-22U-S/M/L
Handheld

I-HHD-22U-S/ML
Handpiece

I-WI-22U-S/M/L
Wrench

1.22 Hex Drivers

I-HD-S/M/L
Handheld

I-HHD-22-S/M/L
Handpiece

I-WI-22-S/M/L
Wrench

NOTE:

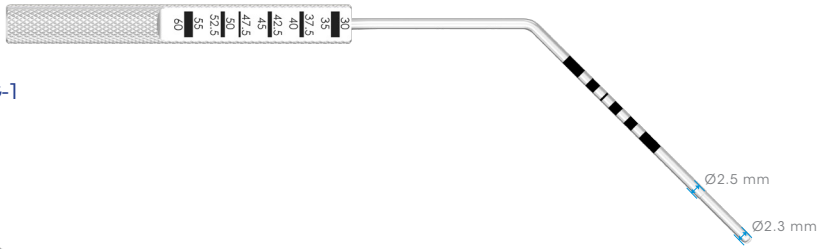
- the instrument kit has an intuitive layout to guide the surgeon through the drill sequence.
- most instruments are available in short / medium / long.
- all instruments and tooling used during the procedure must be maintained in good condition, cleaned and sterilised prior to use. Please consult the Instructions for Use: Southern Implants instrument tray and reusable instruments (CAT-8003 and CAT-8070) for guidance concerning the maintenance of instruments and surgical trays. Please consult the corresponding drill Instructions for Use regarding care and maintenance of drills.

Retractor

I-ZYG-RET-1

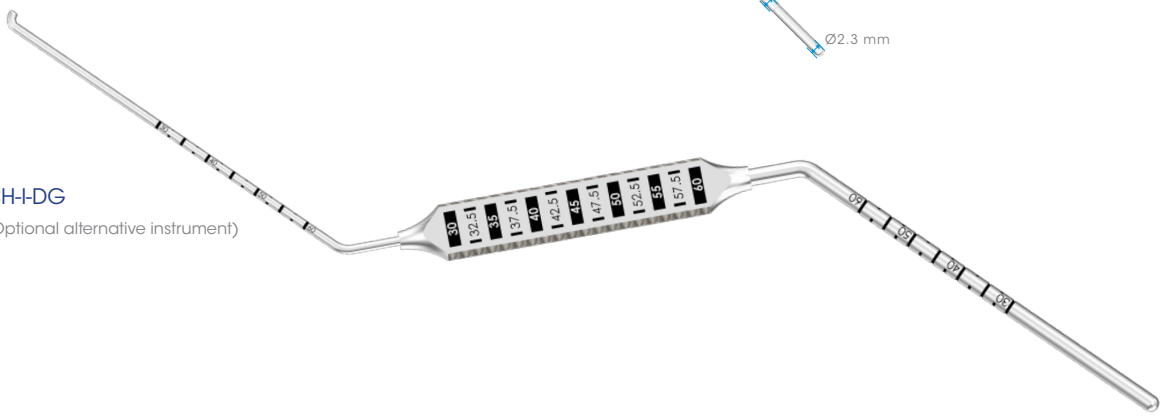
Depth Gauges

I-ZYG-DG-1



CH-I-DG

(Optional alternative instrument)



Insertion Tools

I-ZYG-INS-1

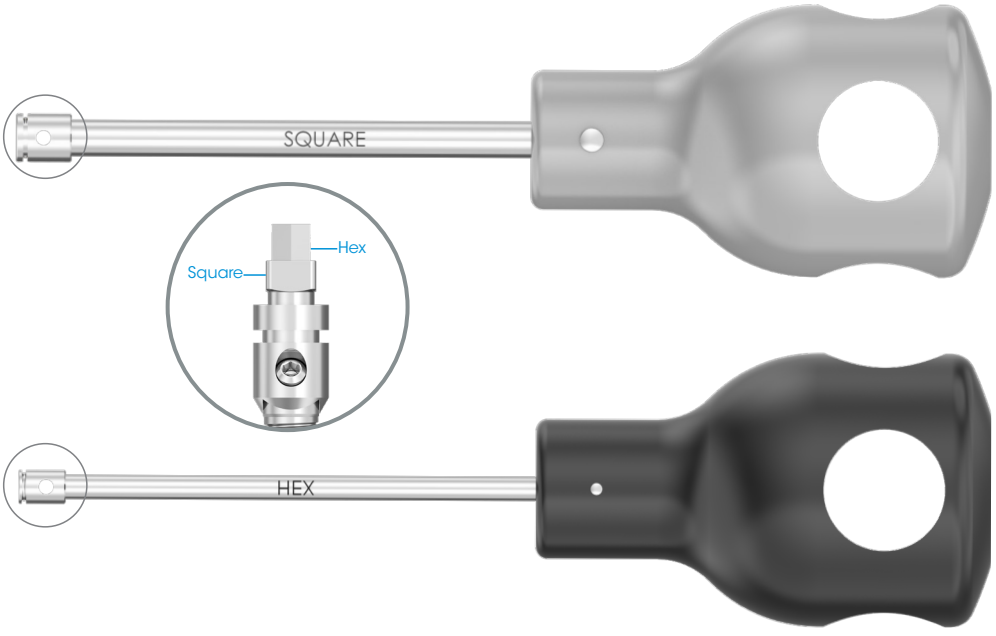
To fit square on fixture mount

*only compatible with the Zygomatic family

or

I-ZYG-INS-2

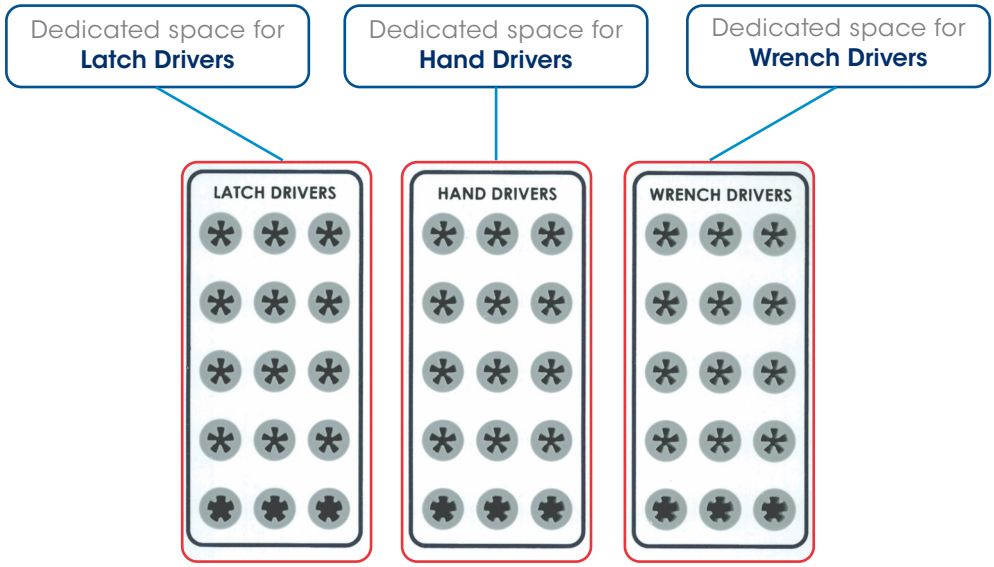
To fit square on fixture mount



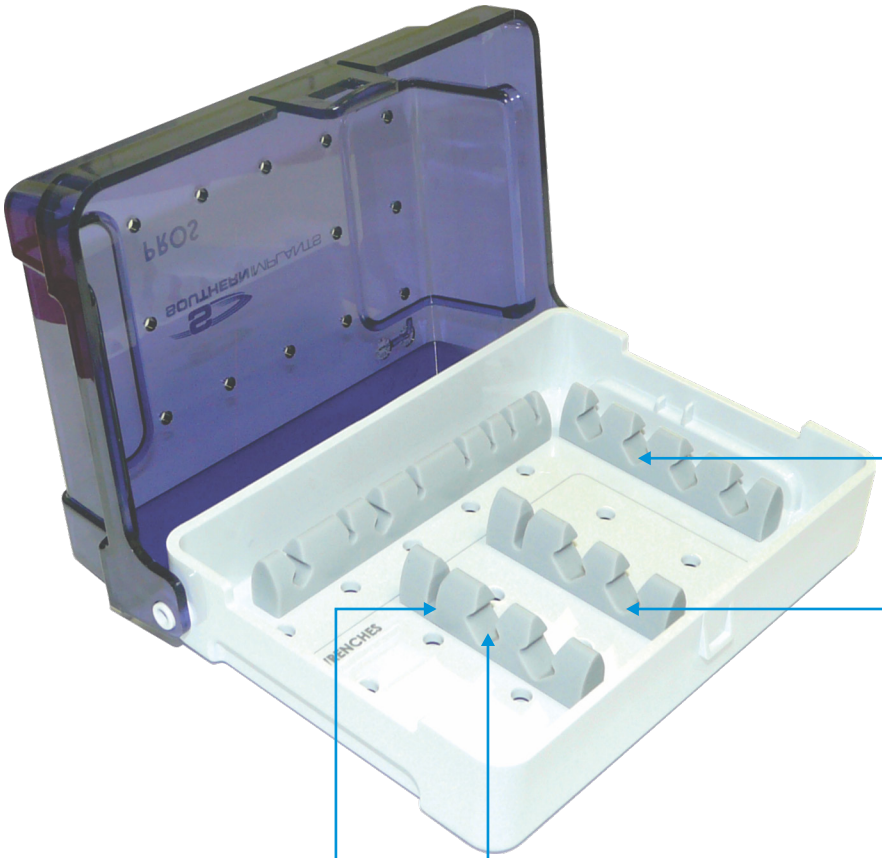
NOTE:

- I-ZYG-INS-1 drives on the square of the fixture mount (silver handle for easy identification).
- I-ZYG-INS-2 drives on the hex of the fixture mount. The narrow hex tip allows for more visibility of the implant head (black handle for easy identification).

TOP TRAY



BOTTOM TRAY



Wrench Converters

I-WI-CST
For Handpiece inserts (latch-type) featuring the W&H hex.

I-WI-SL
For Handpiece inserts (latch-type) without the W&H hex.

I-WI-SS
For SQUARE connection of fixture mounts and instruments.

I-WI-SH
For HEX connection of fixture mounts.

Flat Spanner

I-SP-X (system specific)

Ratchet Wrench

I-TWS

Torque Attachments

I-TWS-B45
I-TWS-B100

NOTE:
- this instrument tray is to be customised by the user to be suitable for use with the preferred implant system and its surgical or prosthetic items.
- most instruments are available in various lengths.

Long Handle Screwdrivers

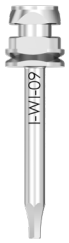
0.9mm Hex	Cover Screw Driver

I-CS-LH

I-CS-HD/L

I-HHD-09

I-WI-09



Hexed

0.9

USE WITH: External Hex range.

1.22mm Hex

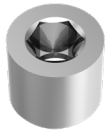
I-HD-LH

I-HD-S/M/L

I-HHD-22S/M/L

I-WI-22S/M/L

Hexed



1.22

USE WITH: External Hex & DC (Deep Conical) ranges.

Compact Conical Abutment drivers

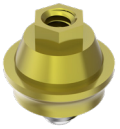
I-AD-LH

I-AD

I-HAD

I-WI-A

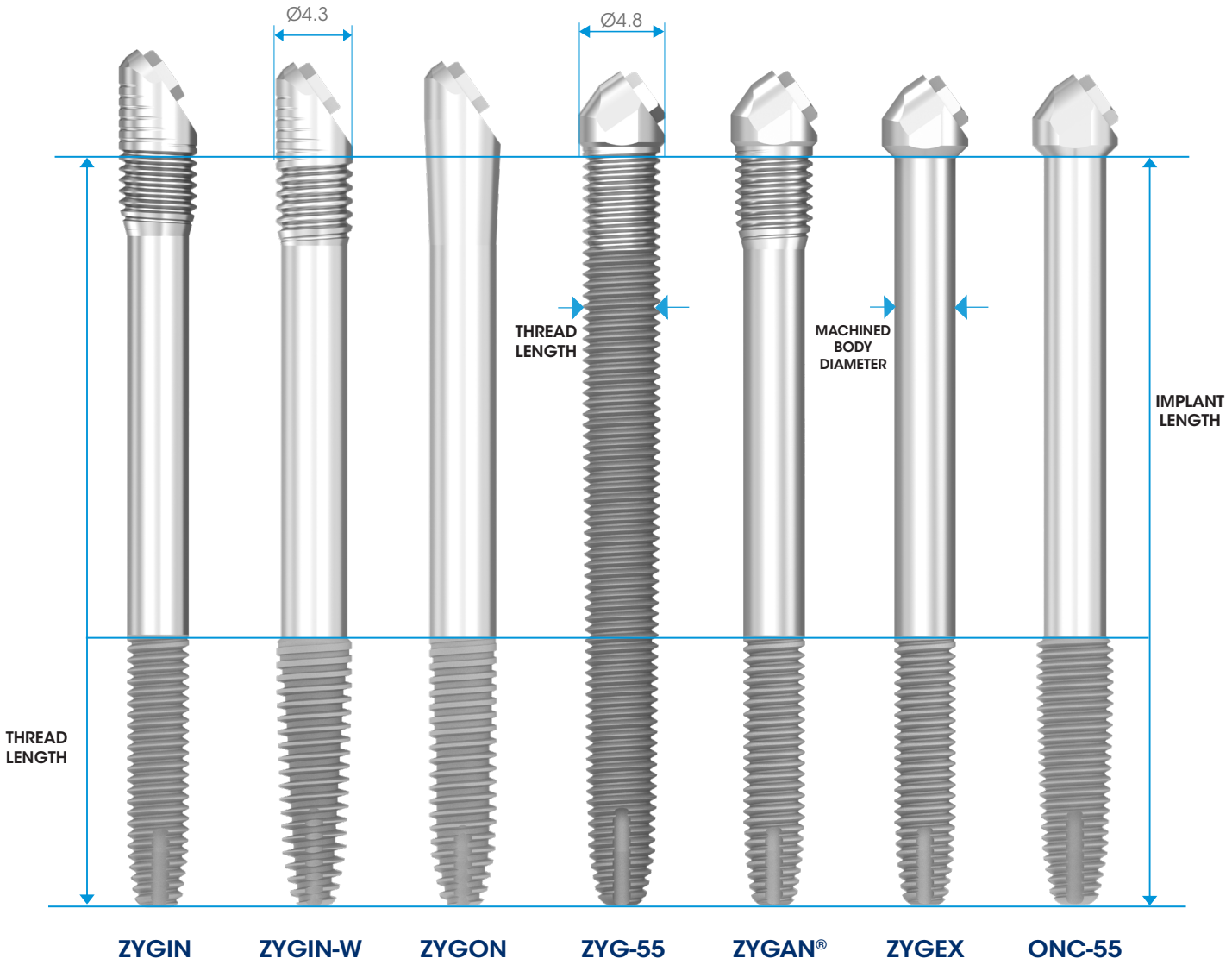
Compact conical



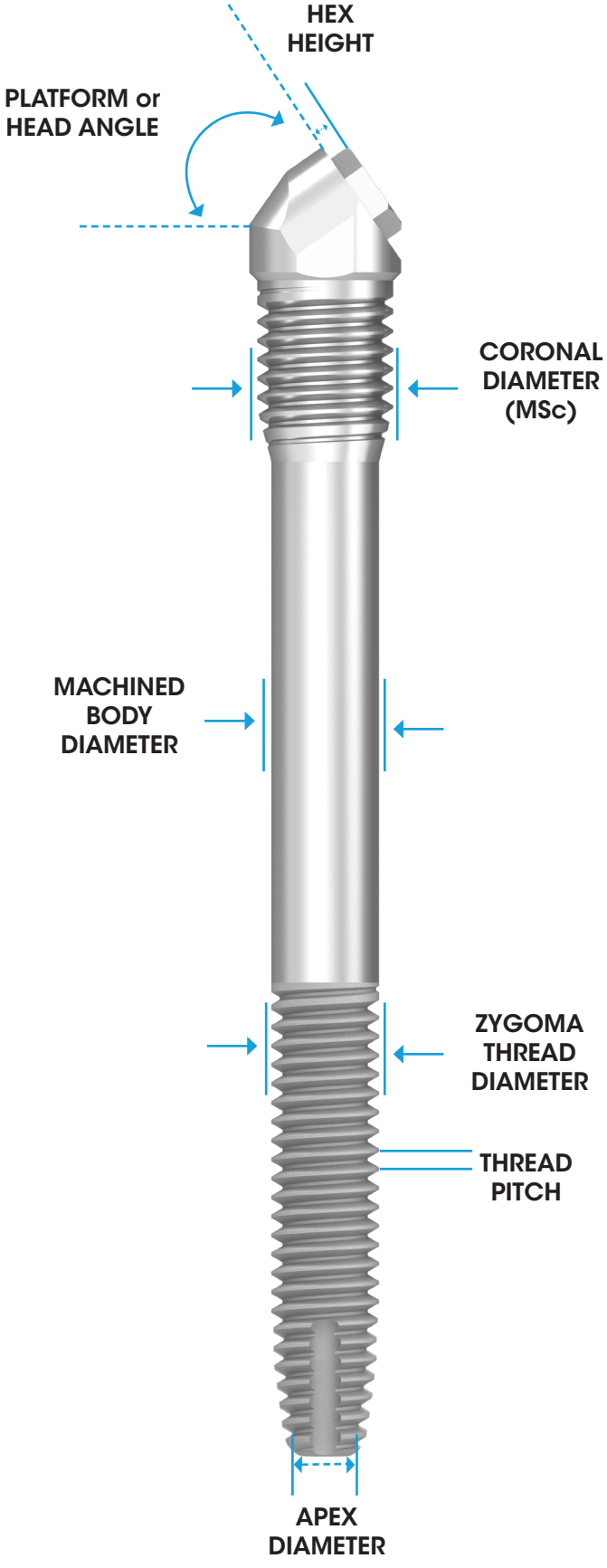
USE WITH: Compact conical abutment.

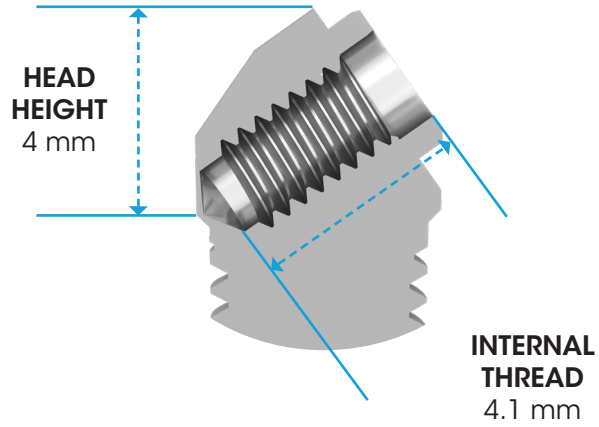
Implant Dimensions and Information

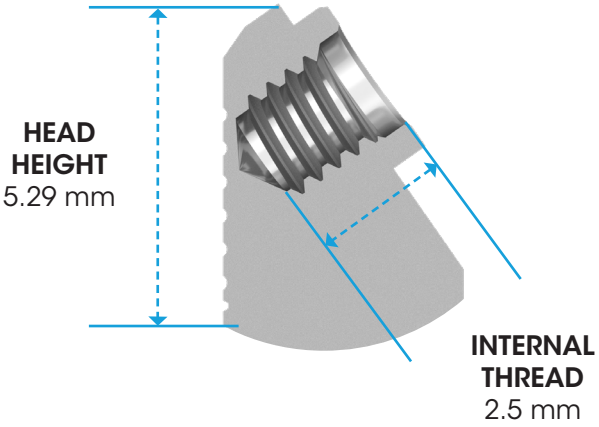
RANGE	THREADED CORONAL DIAMETER	MACHINED BODY DIAMETER	PROSTHETIC DIAMETER	ZYGOMA THREAD DIAMETER	HEX WIDTH	HEX HEIGHT	THREAD LENGTH	THREAD PITCH	APEX DIAMETER	PLATFORM or HEAD ANGLE	IMPLANT LENGTHS													
											27.5	30	32.5	35	37.5	40	42.5	45	47.5	50	52.5	55	57.5	60
ZYGAN®	4.3	3.4	4.0	3.4	2.70	0.7	15	0.6	2.8	55°		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
ZYGIN-W	4.3	3.7	4.0	4.2	2.70	0.7	15	0.75	2.8	55°		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
ZYGON	N/A	3.7	4.0	3.7	2.70	0.7	15	0.75	2.8	55°		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
ZYG-55	4.3	N/A	4.0	4.3	2.70	0.7	Full	0.6	3.0	55°				✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
ZYGIN	4.3	3.4	4.0	3.4	2.70	0.7	15	0.6	2.8	55°		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
ZYGEX	N/A	3.4	4.0	3.4	2.70	0.7	15	0.6	2.8	55°		✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓
ONC-55	N/A	3.5	4.0	4.3	2.70	0.7	15	0.6	3.0	55°	✓		✓		✓		✓		✓					

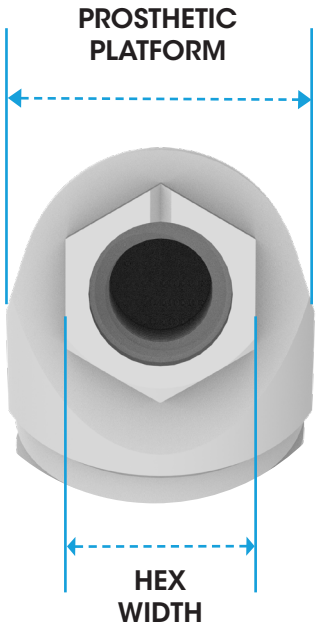


NOTE:
- all dimensions in this catalogue are in mm, unless otherwise specified.
- not all products are cleared for sale in all countries.


HEX
HEIGHT
PLATFORM or
HEAD ANGLE
CORONAL
DIAMETER
(MSc)
MACHINED
BODY
DIAMETER
ZYGOMA
THREAD
DIAMETER
THREAD
PITCH
APEX
DIAMETER


HEAD
HEIGHT
4 mm
INTERNAL
THREAD
4.1 mm


HEAD
HEIGHT
5.29 mm
INTERNAL
THREAD
2.5 mm


PROSTHETIC
PLATFORM
HEX
WIDTH

Torque Table For Southern Screws

1 Series screws (M1.4)

1.22 Hex

TSH1

BSH1 *
(finger tighten)

Slotted

TSU1 *

BSS1 *
(finger tighten)

Unigrip

TSU1

TORQUE:
10 - 15 Ncm
Head diameter:
2.25 mm
Screw TORQUE with PEEK prosthetics:
10 - 15 Ncm

2 Series screws (M2)

1.22 Hex

TSHZ2

BSH2 *
(finger tighten)

Slotted

TSSZ2

BSS2 *
(finger tighten)

Unigrip

TSUZ2

TORQUE:
32 - 40 Ncm
Head diameter:
2.70 mm

3 Series screws (M2)

TSHZ3

BSH3 *
(finger tighten)

TSSZ3

BSS3 *
(finger tighten)

TSUZ3

TORQUE:
32 - 40 Ncm
Head diameter:
2.40 mm

NOTE: screw TORQUE with PEEK prosthetics: < Ø4.0 mm implant interfaces: 15 Ncm
≥ Ø4.0 mm implant interfaces: 20 Ncm

ASC 1 Series screw

TST1-ASC

TORQUE:
10 - 15Ncm
Head diameter:
2.20 mm

Screw product codes

Southern screws are manufactured from different materials.
This is indicated with the first letter of the product code:
T = Titanium
G = Gold
B = Brass

Digital Laboratory Analogue screw

1.22 Hex

LAD-S

TORQUE:
Finger tighten
Head diameter:
2.40 mm

NOTE:
- due to design revisions and changes, screw tips may be flat or rounded.
- always ensure that the correct screw is used for the relevant implant and component.

* blackened and for laboratory use only.

- universal drivers are compatible with both 1.22 and 1.27 Hex screws:
  - I-HD-22U-S/M/L
  - I-HHD-22U-S/M/L
  - I-WI-22U-S-/M/L

Screw supplied with all Digital Analogues.

Screw Head Connections

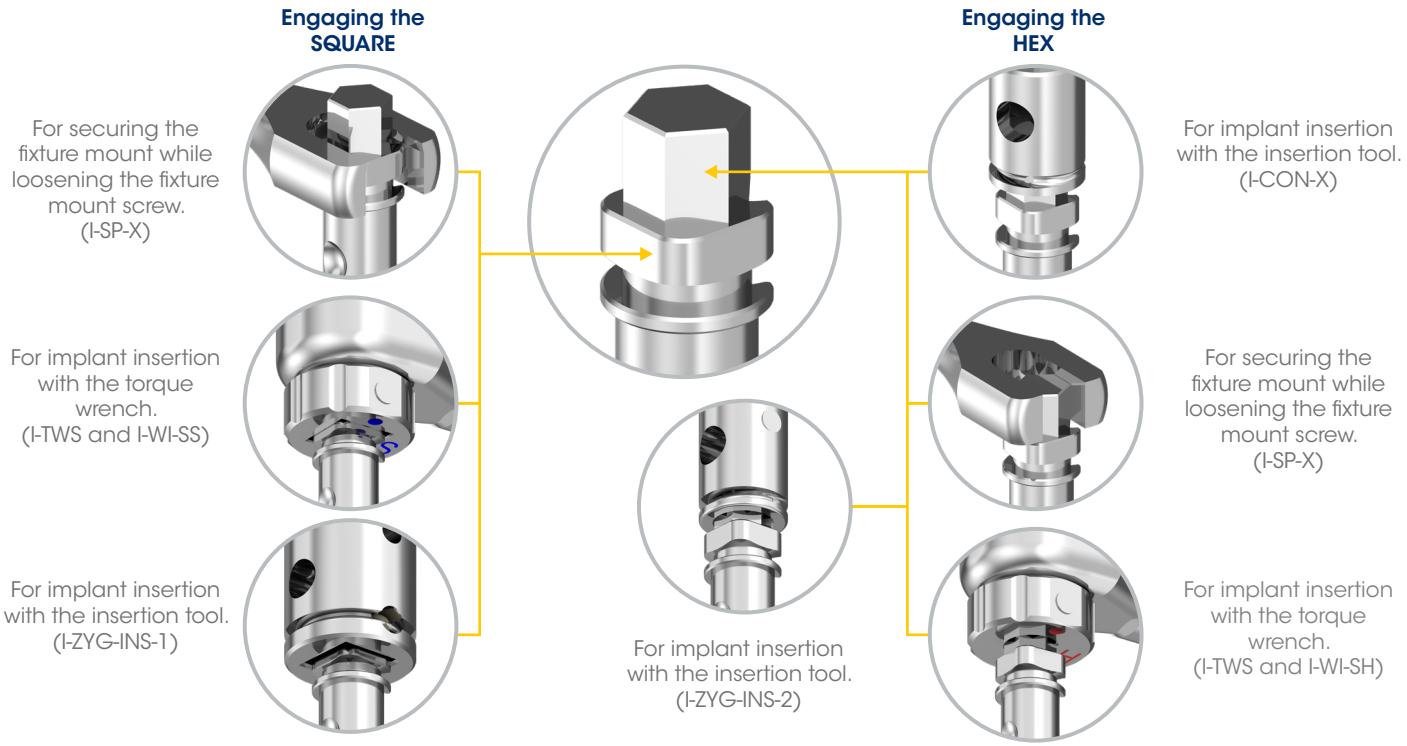
Hex

Slotted

Unigrip

ASC

Instruments for implants packaged with a fixture mount



NOTE:

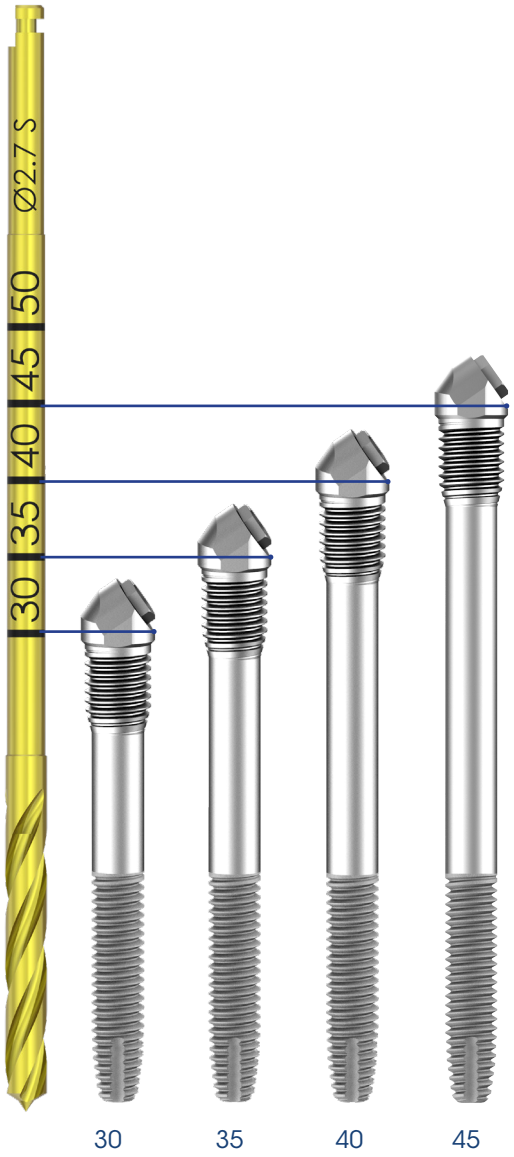
- for images of instruments illustrated here, refer to instrument tray pages (28 - 30).

Zygomatic drills and direction indicator laser markings

In order to determine the ideal zygomatic implant to fit the osteotomy, the clinician can choose the appropriate length by using the direction indicator (I-ZYG-DI55) or by the laser markings on the drill to measure and correlate the length. The illustration below shows the correlating measurement of laser markings to the implant length.

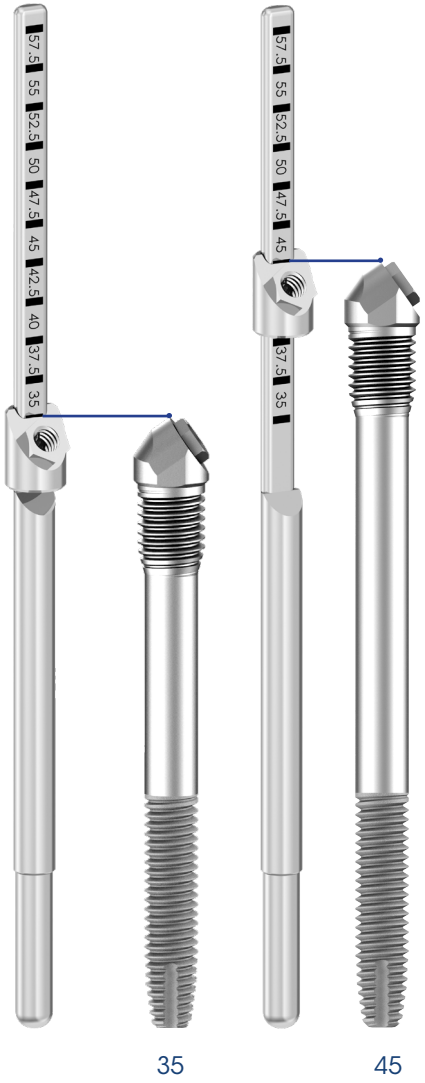
Drill laser markings

The laser markings on the zygomatic drills line up with the lower side of the implant platform as illustrated in the image below.



Direction indicator laser markings

The laser markings on the zygomatic direction indicators line up with the top point of the external hex on the implant platform. This can be easily read by sliding the head on the direction indicator to the appropriate position as shown in the image below.

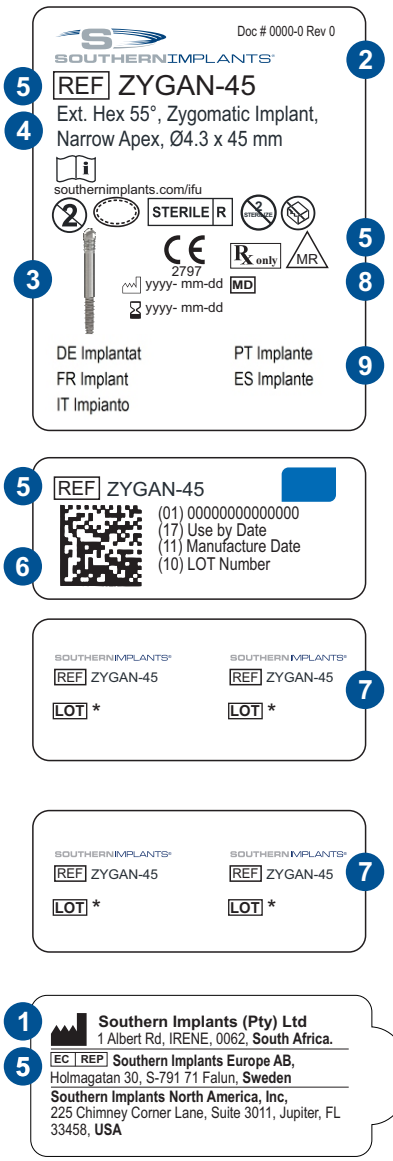


Explanation of Symbols

The following symbols are used on packaging labels and they indicate the following:

1. Manufacturer
2. Colour code indicating platform diameter
3. Implant image
4. Implant details and size
5. STERILE R — Sterilisation using irradiation
   - EC REP — European Representative
   - REF — Catalogue number
   - LOT — Batch Code
   - Do not Resterilise
   - Consult instruction for use
   - Do not reuse
   - CE mark and notified body number
   - Use by Date
   - Date of manufacture
   - Do not use if package is damaged
   - MD — Identifies the product as a medical device
   - MR — MR Conditional / Magnetic Resonance Conditional
   - Single sterile barrier system
   - Double sterile barrier
6. 2D Bar coding
   Contains the GTIN, Use by date and LOT number
7. Patient sticker for documentation purposes
   (to be used by health care provider on patient file)
8. Rx — Prescription device

   CAUTION: FEDERAL LAW RESTRICTS THE DEVICE TO SALE BY OR ON THE ORDER OF A LICENCED HEALTH CARE PROVIDER.
9. Product description
   (translated as per international standards)



For more information on Instructions for Use of our products, please scan the below,

or visit our website
southernimplants.com/ifu

Platform Interface

Ø4.0 mm

For more information scan below

to contact your Southern Implants Representative
or visit southernimplants.com

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