I.D.I Dental Implant





510K Cleared



An Advanced Immediate Dental Implant Company

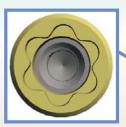
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IDI Dental Implant Unique Patented Design

Endomaxim Internal Connection Design

Increases stability of abutment and screw which largely reduces the chance of the screw loosening.



Tapered Design / Cervial Slope (for Healed Socket) of A.I.D.I. Implant System

Facilitates placement resulting in a "wedge effect" that largely increases the initial stability of the implant.

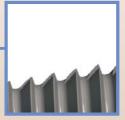


Ferroembrace[®]

Provides double finishing margin design can improve aesthetics in case of implant exposure.

Drill Implant Design

Asymmetric cutting edges maximize bone preservation during placement. Redesigned implant threads allow self drilling.



Sinolift Implant Design®

The only dental implant on the market with the feature to simultaneously lift the maxillary sinus during placement. Preserves and condenses the alveolar bone during insertion to improve implant retention.



MADE IN USA

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Apexlock®

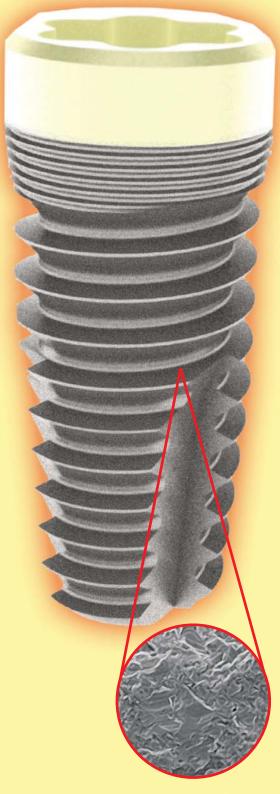
Deep tunnel in the apical portion allows osseointegration onto the inner surface of the implant to increase retention.

Surface Treatment

The surface of I.D.I. dental implants have a highly biocompatible roughness that proved to be excellent for osseointegration. Our implants are blasted with a resorbable SBM and then blasting medical residue is removed from the implant (ASTM F86-4 standard). The surface of our implants is treated by one of the most experienced companies in the world. Recognizing the superior features, many other implant companies are moving towards this surface because it has a very predictable roughness and does not require heating the parts at very high temperature (such as plasma spraying or HA coating).

We are convinced that I.D.I. dental implants will give you much better results than you are achieving with other implants, but with all the additional benefits that A.I.D.I. has to offer and at the lowest price in the U.S. for internal hexed implants.

I.D.I. dental implant system has demonstrated a high success rate (close to 99%). Our reputation as clinicians depends on the quality of the products that we use and we have been very successful not only maintaining our practice but growing at a

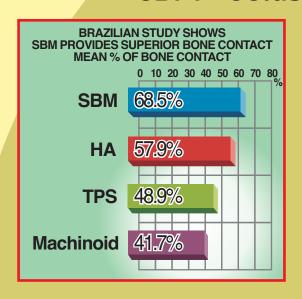


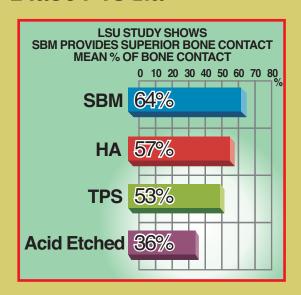
(If you are interested in finding out how to increase your implant practice, send an email to support@aidibiomedical.com).

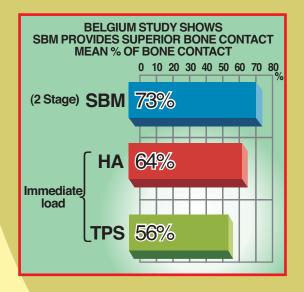
IDI's Dental Implant SBM® Surface

a decade of clinical success

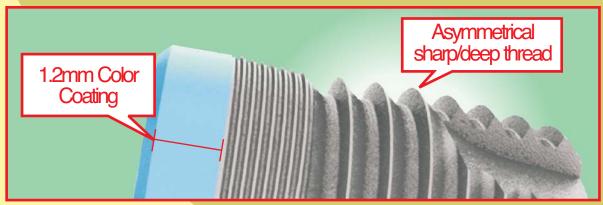
SBM[®] Soluble Blast Media













Founder of IDI Implant System

William Y.S. Hung, D.D.S., J.D., Prosthodontist

Dr. William Hung graduated from the advanced prosthodontics program at the University of Southern California School of Dentistry. He is a founder of IDI Dental Implant System. Dr. Hung is specialized in the fields of prosthodontics and implant dentistry.

Dr. Hung has successfully performed thousands of implant placements and restorations. Many patients who have only minimal jaw bone available to anchor implants, or those who have been told that implant placement was not possible, have been successfully treated by Dr. Hung by using IDI Dental Implant System.

Dedicated to excellence in the field, Dr. Hung is currently a member of the American Dental Association, the California Dental Association, the American Academy of Implant Dentistry, and the International Congress of Oral Implantologists.

Immediate Implant Dentistry Immediate Implant Placement Immediate Impression Immediate Loading

Written by William Y.S. Hung, D.D.S., J.D., Prosthodontist

Since Dr. Branemark introduced dental implants to North America in 1982, millions of patients have benefited from the advantages of implant-supported fixed restoration. Implant Dentistry not only provides comfort, ease, effective and immediate restoration of occlusal function, but they have also improved the esthetic appearance of our patients' smiles.

Our experiences in using IDI Dental Implant over the many years have shown that both patients and doctors cannot detect differences between dental implant restorations and natural teeth. .

Immediate Implant Placement

Prosthodontists and periodontists can avoid frequent surgical procedures and reduce the waiting period (shortening treatment time by 4 to 6 months) by placing IDI Dental implants immediately after extracting unrestorable teeth. This procedure not only can reduce the psychological distress from losing a tooth, but this technique can also restore esthetics and occlusal function immediately. Success rates of 99% for immediate implant placement have been found.

Immediate Impression

In many cases, immediately after IDI Dental Implant placement, the advantage of IDI dental Implant fixture mount abutment and the ball screw allowed dentist to take final impression if initial stability exceeds 45Ncm. Dentist can fabricate provisional restoration immediately. Therefore, a provisional restoration can be used for functional or non-functional loading if appropriate primary stability and adequate occlusal loading can be achieved.

Immediate Loading

If the volume of remaining jaw bone is enough to house a wide or long implant and appropriate primary stability and adequate occlusal loading can be achieved, the patient may receive an implant restoration (temporary or permanent) and may enjoy the benefits of eating and chewing on the same day (immediate functional loading). However, if there is only a limited amount of jawbone remaining, we still suggest a 4-6 month waiting period before a restoration is placed. In aesthetic zone, dentist may provide a provisional restoration without loading (Immediate non-functional loading).

Osteotome Sinus Lift

Osteotome sinus lift was originally introduced by Dr. Summer in 1994 and 1995. He published four articles regarding the sinus lift method. His techniques effectively increased the success rate of implant placement, which particularly benefits patients who have lost their teeth and large amounts of jaw bone due to periodontal disease. By applying new designed/ patented IDI osteotome, we can preserve and condense limited amounts of remaining bone. Implants can be placed at the same time (within 10-20 minutes following completion of the procedure). In addition, this osteotome can effectively lift the maxillary sinus for those who suffer from sinus pneumatization. The Osteotome technique has helped many of patients to avoid complicated bone grafts and open sinus surgeries (Caldwel-Luc Approach) that may require much more extensive surgical procedures and healing time before implants can be placed. In the past few years, we have experienced many exciting results; patients who received these services have had very high success rate.

Conclusion

In the past many years IDI research and engineering team has successfully developed the most advanced dental implant system-IDI Dental Implant System. Clinical studies have shown close to 99% success rate. Mechanical studies meet ISO 14801 standards. Comparison studies show that IDI is a much stronger and more durable than most other major brand dental Implants on the market.

ant) Price

3.7mmD IMPLANT > 3.5mmD PLATFORM



PLATFORM 4.7mmD IMPLANT > 4.3mmD PLATFORM 5.4mmD IMPLANT > 5.0mmD PLATFORM SWITCHING 6.4mmD IMPLANT > 6.0mmD PLATFORM 3.5mmD 5.0mmD 6.0mmD 4.3mmD **Platform Platform Platform Platform** 3.7mmD **4.7mmD** 5.4mmD 6.4mmD

ABUTMENT PRICE ADVANTAGES

IDI Angled Esthetic Abutment - \$125 vs \$220 - Angled Esthetic

Esthetic Abutment

IDI UCLA Plastic - \$60 vs \$211 -Gold

Adapted Abutment Abutment

IMPLANT PRICE ADVANTAGES YOU

EUROPEAN Implant, CS, Replica Transfer Abutment

SAVE \$325

IDI Implant, CS, Replica Transfer Abutment \$325

\$650 (see photo above*)

WALL THICKNESS ADVANTAGES

3.5mmdD Platform vs 3.7mmD Implant 44% Increase

4.3mmdD Platform vs 4.7mmD Implant 66% Increase

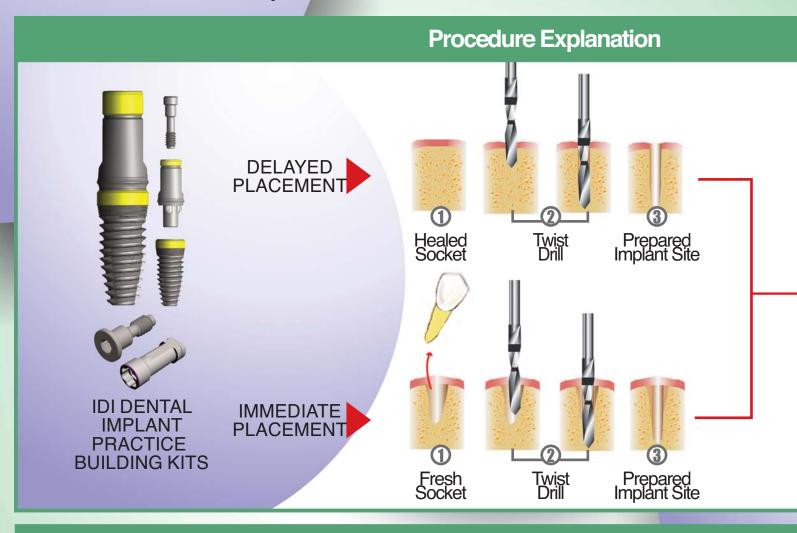
LENGTH ADVANTAGES

IDI Includes 8.8mm, 10.5mm, 13.5mm & 16mm Lengths

PACKING ADVANTAGES

Color-Coded Fixture Mount designed for use as Closed Tray Transfer and Abutment, Cover Screw also included

Advantages of Immediate Advantages of Immediate



Indication

Using fixture mount abutment and ball screw to take final impression immediately after implant placed if initial stability exceeds 45Ncm.

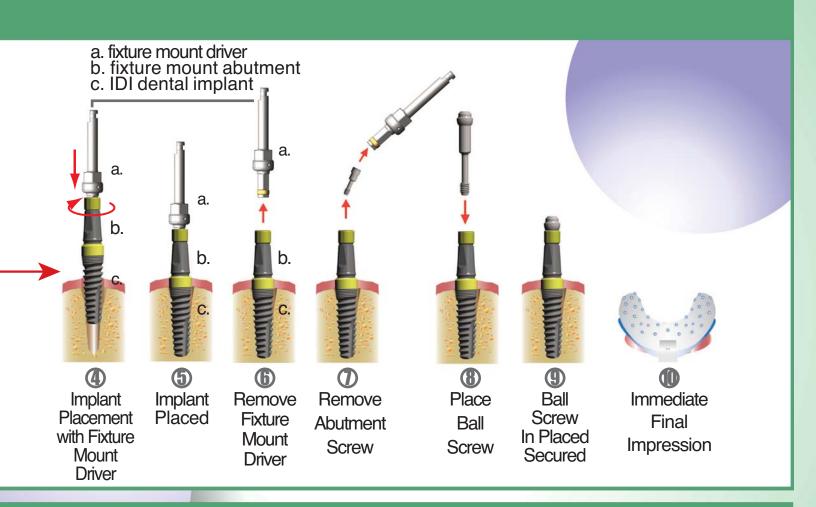
Advantages

- 1. Less office visits No waiting period.
- 2. Simple procedures No impression copping required.

Final impression



ABUTMENT & BALL SCREW



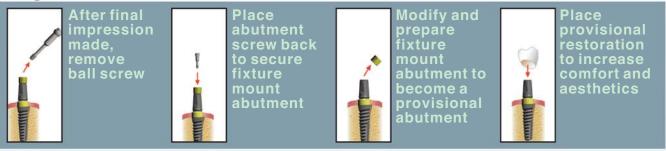
- 3. Less chair time Less procedures
- 4. Convenient & comfort No additional anesthetics required.
- 5. Cost reduction Do not need to buy impression copping (because the IDI fixture mount abutment can be used as impression copping.)
- 6. The fixture mount abutment can be modified and used as provisioned abutment cost reduction.

Immediate Provisionalization



IDI Fixture Mount Abutment can be cut/modified to become a provisional abutment, where a temporary crown can be placed immediately.

Single Unit

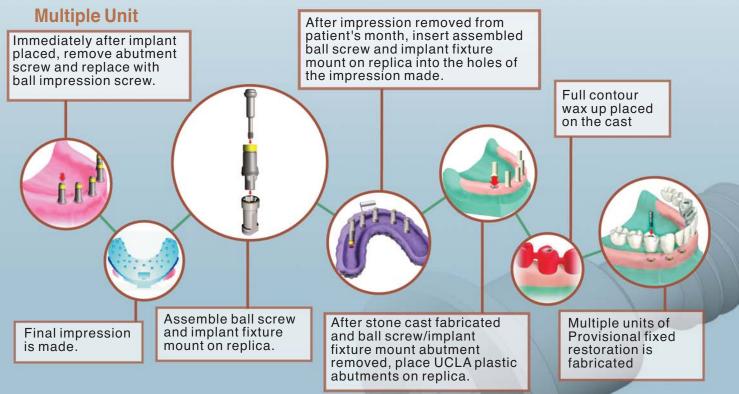


(note* Alternatively, a new designed plastic impression copping can be used to take final impression. see catalog.)

Warning: However, the device is intended for immediate loading <u>ONLY</u> when good primary stability has been achieved and with appropriate occlusal loading

In some cases, especially in aesthetic zone, immediate non-functional loading may be applicable, which means there is no centric and eccentric occlusal contact on temporary restorations.

However, Paulo Malo did suggest all-on-4 technique for immediate full arch



ADVANTAGES OF IDI



1.Price Advantage

IDI UCLA Plastic Abutment \$60 v.s. REPLACE Gold Adapted Abutment \$211

2. Reduced Cost of Precious Metal up to US\$250/per unit

IDI UCLA Plastic Abutment castable w/non-precious/precious/semi-precious metal.

Lab cost of non-precious metal \$0 v.s. Precious metal \$250 per unit.

3. Rigid & Accuracy

UCLA Plastic Abutment is made of high quality machined PMMA. In clinical studies, thousand of pieces have been tried successfully. It shows UCLA Plastic Abutment is absolutely accurate and rigid.

4.Bonding w/PMMA and composite resin

Can be used as a long-term provisional abutments up to one year.

5.Color coded -

Pink(3.5mm), Yellow(4.3mm), Blue(5.0mm), Green(6.0mm) (Please see catalog)

- **6.Engaging & Non-Engaging.** (Please see catalog)
- 7. Abutment screw included.
- 8.Can be used for Single unit / Multiple unit / Custom Abutment / Screw and cement retained.



Compare Advantage of IDI Implant Design

Endomaxim Internal Connection Design

Increases stability of abutment and screw which largely reduces the chance of the screw loosening.



Ferroembrace[®]

Provides double finishing margin design can improve aesthetics in case of implant exposure.

Tapered Design / Cervial Slope (for Healed Socket) of A.I.D.I.

Implant System

Facilitates placement resulting in a "wedge effect" that largely increases the initial stability of the implant.



Drill Implant Design

Asymmetric cutting edges maximize bone preservation during placement. Redesigned implant threads allow self drilling.



The only dental implant on the market with the feature to simultaneously lift the maxillary sinus during placement. Preserves and condenses the alveolar bone during insertion to improve implant retention.







Apexlock®

Deep tunnel in the apical portion allows osseointegration onto the inner surface of the implant to increase retention.

	Endomaxim Internal Connection	Tapered Design of A.I.D.I. Implant System		Ferroembrace	Drill Implant Design	Apexlock
Korean	None None	Yes/No	None	None	None	None
European	None	Yes	None	None	None	None
Swiss	None	No	None	None	None	None
Others	None	Yes/No	None	None	None	None

Indication for Use



IDI implant System are endosseous implants intended to be surgically placed in the bone of the upper of lower jaw arches to provide support for prosthetic devices, such as an artificial tooth, in order to restore patient esthetics and chewing function.

Straight abutments indicated for both screw retained and cemented restorations are included. The implants are indicated for single or multiple unit restorations and can be used in splinted and non-splinted application.

The device is intended for immediate loading when good primary stability has been achieved and with appropriate occlusal loading.







ISO 14801 TIEST REPORT

TESTING OF AIDI DENTAL IMPLANTS WITH 15° ABUTMENTS

Introduction

Static and fatigue tests were performed on the Upland 15° angled abutments, 3.5mm short implants, and provided screws. The testing consisted of holding the implant/abutment combination at a 25° angle so the 15° angled abutment was under-corrected by 10 degrees.

Parts Tested

Description		Reference No.	Lot No.
3.5 mm 3.5 mm Titanium Implant	5	-	-
15 Titanium Abutment	5	-	-
Abutment Screw	5	-	-

Test Methods

ISO 14801

Static 25°Compression Tests

The same test fixture was utilized for both static load and fatigue tests. An Instron Universal Testing Machine, Model TTD with a 200 lb. capacity load range and 1.27 mm/min. (0.05 in./min). crosshead speed was used for the static tests. The maximum loads prior to failure are listed in Table I. Static tests were conducted in 72 air. The load versus deflection curves for this test is shown in Figure 1 and the static failure mode in Figure 2.

25°Compression Fatigue Tests

Fatigue testing particulars:

- O Minimum fatigue load is 10% of maximum fatigue load
- O Test speed 15 cycles/second
- O Tests conducted at room temperature in air
- O Krouse Testing Machine Co. axial fatigue machine designed for low loads.

As discussed with AIDI Dental Implants, the intent of this test series was to determine theoverall integrity of the implant system and provide evidence of the maximum load at which three 5,000,000 cycle runouts could be achieved.

The testing revealed an unexpectedly high fatigue load capability for this implant system. It is anticipated that this system could yield a three point 5,000,000 cycle runout near 95 lb. Figure 1 shows the fatigue failure mode.

ISO 14801 TIEST REPORT

TABLE I 25° Static Compression Tests - 15° Angled Upland Titanium Abutment and Implant

Sample I.D.	Max Load (lb.)	Max Load (N)		
UD-1	109	485		

The sample failed by bending of the midsection of the abutment.

TABLE II 25° Compression Fatigue Test - 15° Angled Upland Titanium Abutment and Implant

Testing Conditions

Testing Temperature: 68 - 75° F

Environment: Lab. Air

Sample I.D.	Maximum Load (lb.)	Minimum Load (lb.)	Cycles to Failure	Failure Mode
UD-2	60	6.0	5,000,000	1
UD-3	60	6.0	5,000,000	1
UD-4	60	6.0	5,000,000	1
UD-5	102.5	10.25	1,800	2

- (1) No failure Test discontinued at 5,000,000 cycles.
- (2) Bending of the midsection of the abutment.

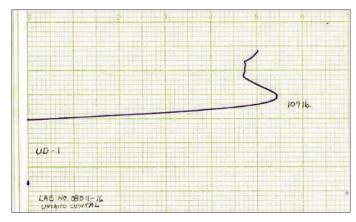


Figure 1 - Static Load Versus Deflection Curve

Our Mission

A.I.D.I. Biomedical LLC is dedicated to providing top quality products with minimum cost to all of our customers.

We believe that by using the latest technology we will provide dentists/ surgeons and patients the best quality and most advanced dental implants and related products. We also believe in developing long-term relationships with our customers by providing them with professional, yet personal service and technical support (including training and education).

ISO and FDA Registered Facility

The manufacturing facility is ISO-9001:2000 and FDA registered. This facility is also ISO-9000 and class III medical device facility.

Cutting Edge Machines

highly specialized precision equipment is necessary. We operate advanced CNC automatic Swiss Screw Machines with multiple-axis and multiple turning compatibilities. Production is supported by a growing capacity of our precision machining CNC lathes, mills, drill presses, finishing and secondary tools.

Quality Control

Inspect for quality at each step of manufacturing and shipping to meet ISO and ASTM standard.



On-time Delivery

We put your parts in your hands when you need them.

For all questions related to Training and Education,
please e-mail us: support@aidibiomedical.com or call us at (951)678-9626
Location to Serve you: 34859 Frederick St. #105, Wildomar, CA 92595



Advantages include:

- 1. Torque up to 85 Newton to increase initial stability.
- Cost reduction and multi-functional, the very first torque wrench can be used for both surgery and restoration. All you need is just one wrench to fulfill different need.
- 3. Increase success rate for immediate implant placement and immediate loading.
- 4. Maximum compatibility Fit all the drivers and surgical drills on the market.

Adaptors:

Restorative Adaptor:

(torque range: 15Ncm - 35Ncm)
* Do not exceed 35Ncm.

Surgical Adaptor:

(torque range: 35Ncm - 85Ncm)

- torque for narrow diameter dental implant, maximum 65Ncm
- ◆ torque for regular diameter dental implant, maximum 80Ncm
- torque for wide diameter dental implant, maximum 85Ncm
 - * Do not exceed 85Ncm.



Suggested Immediate Loading Protocol for AIDI Dental Implants

Suggested Immediate Loading Protocol for AIDI Dental Implants

----Dr. William Y.S. Hung 4/17/2010

- 1. Warning: This protocol only applies to 90% of cases, because every case has to be evaluated according to occlusion, missing teeth and medical condition. You are encouraged to contact AIDI for evaluation before you load AIDI Dental Implants.
- 2. You may take immediate impression after you place AIDI Dental Implants if the initial stability exceeds 45 Ncm.
- 3. Generally, AIDI only suggests immediate non-functional load for both anterior & post restorations with proper canine guidance & good posterior support.
 - d. Regarding single unit anterior restoration, initial stability must exceed 80 Ncm.
 - e. Regarding single unit moral restoration (2 implants required), initial stability must exceed 80 Ncm.
 - f. Regarding 3 units, initial stability exceeds 70 Ncm of all implants for anterior teeth restoration and/or if initial stability exceeds 80 Ncm of all implants for posterior teeth.
 - g. Regarding 4 units of anterior teeth restoration, initial stability exceeds 70 Ncm of 3 implants and the remaining one dental implants exceeds 50 Ncm.
 - h. Regarding 4 units of post teeth restoration, initial stability exceeds 80 Ncm of 3 implants and initial stability of the remaining one dental implants exceeds 50 Ncm.
 - i. Regarding cross arch splinting for mandibular arch, initial stability of 4 dental implants exceed 70 Ncm, the remaining implants exceed 50 Ncm.
 - j. Regarding cross arch splinting for maxillar arch, initial stability of 5~6 dental implants exceed 70 Ncm, the remaining implants exceed 50 Ncm.
- 4. The above protocol only applies to AIDI dental implant system.
- 5. Occlusal splint is advised for each individual patient who receives immediate restoration.

Terms and Conditions of Sale

International Orders

For orders outside of North America, please use fax order form and sent to 1(951) 471-6147 or visit www.aidibiomedical.com.

North America Orders To Place An Order

Orders may be placed by telephone, fax, e-mail, through the order form on Aidibiomedical.com or with an Aidi Biomedical, LLC Representative. For your convenience we have included an order form in this catalog, which may be photocopied and used for future orders.

Billing

MasterCard, American Express and Visa credit cards are accepted. All invoices are payable net 30 days. Past due balances will be subjected to a 1.5% finance charge per month, an amount equal to 18% per annum.

Shipping

Unless otherwise specified, orders are shipped via UPS, Fedex or US mail, freight collect or prepaid with the shipping cost added to the invoice. All packages are carefully inspected prior to shipment. If your package is damaged, do not accept it and immediately call the Aidi Biomedical Customer Service Center. If there are any shortages or questions, please notify the Aidi Biomedical Customer Service Center within 10 days of receipt.

Return Policy

Please contact the Aidi Biomedical Customer Service for a Material Return Authorization. Number and shipping instructions prior to returning any product. Product returned must be unopened and undamaged and must be received within 30 days of the invoice date for replacement or credit. All returned products are subject to our standard 15% handling and restocking charges. No product will be accepted for return after 30 days from the invoice date.

Sterility

Implants and their associated abutments are sterile. They are packaged in Tyvek® pouches. The packaging should be inspected prior to opening. If there is any indication that the package is damaged or the package seal is broken, the implant should not be used without further sterilization.

General Warranty

Aidi Biomedical, LLC makes no warranty, expressed or implied, except that for a period of one year its product shall be free from defects in material and/or workmanship, and shall be of merchantable quality.







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