

# Technique Guide

Simple Steps for Minimally Invasive Ridge Preservation



**easy-graft® CLASSIC**  
alloplastic bone grafting system

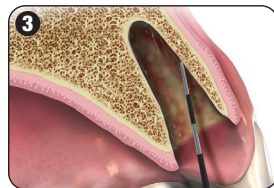
## Prep.



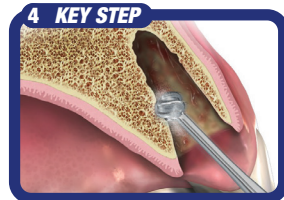
**1**  
**Atraumatic Extraction**



**2 KEY STEP**  
**Socket Preparation**  
Thoroughly clean alveolar walls.  
Cause bleeding.

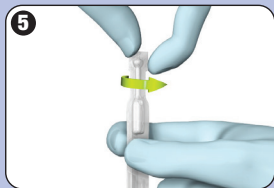


**3**  
**Socket Evaluation**

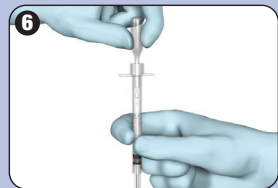


**4 KEY STEP**  
**Create Additional Retention**  
In mesial and distal walls.

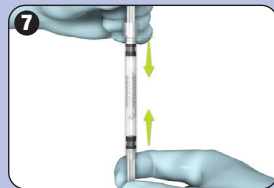
## Dispense.



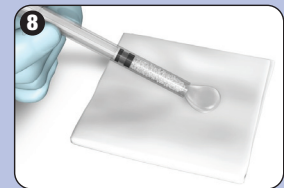
**5**  
**Prepare BioLinker®**



**6**  
**Introduce BioLinker**



**7**  
**Wet Granules with BioLinker**

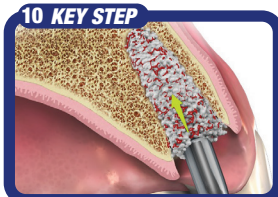


**8**  
**Expel Excess BioLinker**

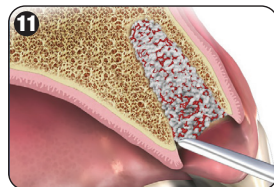
## Shape.



**9**  
**Inject Material into the Site**



**10 KEY STEP**  
**Compress Material Firmly**



**11**  
**Shape and Contour**  
GUIDOR® *easy-graft*® hardens in contact  
with body fluids in approximately one minute.



Watch the step by step clinical video at  
<http://us.guidor.com/easy-graft>

# Frequently Asked Questions

Most dimensional changes of the socket ridge occur in the first 3 - 6 months after a tooth extraction.<sup>1</sup> Minimally invasive ridge preservation procedures using a bone grafting substitute are an effective technique for preserving ridge dimensions.

## Why is preparation of the socket a key step?

It is important to remove all granulation tissue and GUIDOR® *easy-graft*® requires bleeding from the host bone in order to activate the material's unique hardening properties. As such, the walls of the socket should be freshened (e.g. with a sharp curette or round bur) without jeopardizing the integrity and viability of the socket walls or the interradicular bone (if present).

## Is it okay to leave small amounts of granulation tissue in the defect?

No. All granulation tissue should be removed to ensure proper healing.

## How much buccal wall is needed for minimally invasive ridge preservation technique to work?

Do not use the minimally invasive ridge preservation technique if more than one-third of the buccal wall is lost. Surgical bone augmentation/guided bone regeneration is required.

## Is additional retention necessary?

Creating retention in the lower half of the socket without jeopardizing the integrity of the alveolar wall is recommended and helps hold the bone graft in place.

## How do I ensure the granules are wet in Step 7?

To ensure the liquid activator wets all of the granules, move the plunger and the plug back and forth slowly 1-3 times.

## How hard should I compress GUIDOR *easy-graft* in Step 10?

The material should be firmly compressed into the extraction site. The granules are pressure-resistant and designed to resist breakage.

## Should I overfill the defect?

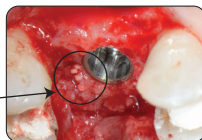
No. The material should reach the height of the alveolar bone as GUIDOR *easy-graft* will expand from small amounts of water absorption. Additionally, when leveling the surface, ensure that no granules stand out.

## Do I need a membrane?

Membranes should be used to retain the bone grafting material to horizontal defects. Additionally, membranes are recommended for critical indications, such as buccal defects during implant placement and a missing buccal wall.

## What will I see during re-entry?

Upon re-entry, granules may be seen in the soft tissue because of their distinct white color.



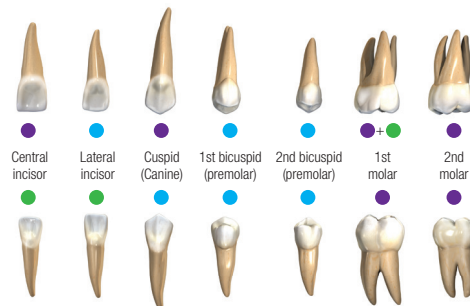
(Courtesy of  
Dr. Minas Leventis,  
DDS, MSc, PhD)

## How much GUIDOR *easy-graft* is needed to fill a socket?

The following estimates are based on GUIDOR *easy-graft* placement in dentiform sockets. Material needs in clinical use may vary.

GUIDOR <i>easy-graft</i> Size	Part #	Color Code
Large	C11-008	Purple
Medium	C11-078	Blue
Small	C11-018	Green

## Maxillary



## Mandibular

## Contraindications

GUIDOR *easy-graft* should not be used in pregnant or nursing women.

## Possible Adverse Effects

Possible adverse reactions associated with the use of the device include: eye, respiratory and skin irritation.

Refer to Instructions for Use in packaging or at <http://us.guidor.com/IFU>

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1. Tan WL, Wong TLI, Wong MCM, Lang NP. A systematic review of post-extraction alveolar hard and soft tissue dimensional changes in humans. *Clin. Oral. Impl. Res.* 23(Suppl. 5), 2012, 1-21

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