

A man with a dust-like body, appearing to be made of or covered in fine particles, standing against a dark background. The particles are concentrated around his head and neck, creating a halo effect. The rest of his body is also covered in a lighter dust, giving him a sculptural, ethereal appearance.

# Surgical Guidelines

**ETHOSS® IS RECOMMENDED TO BE USED WITH THE FOLLOWING  
PUBLISHED TREATMENT PROTOCOL:**

**"PROTOCOL FOR BONE AUGMENTATION WITH SIMULTANEOUS  
EARLY IMPLANT PLACEMENT: A RETROSPECTIVE MULTI-CENTRE  
CLINICAL STUDY."**

International Journal of Dentistry, 2015, Article ID 589135.

**THIS PROTOCOL IS FREELY AVAILABLE ON THE ETHOSS WEBSITE.  
EMAIL [INFO@ETHOSS.DENTAL](mailto:info@ethoss.dental) IF YOU WOULD LIKE A HARD COPY.**

#### **PRE-SURGERY:**

1. Tooth extraction should be performed atraumatically to preserve host bone.
2. Leave the site to heal for 3 weeks. This gives soft tissues sufficient time to heal.

#### **SITE PREPARATION:**

1. A papillae preserving flap should be raised so that all of the proposed defect/implant site can be seen.
2. Remove all granulation tissue from the site. This ensures the ethoss® is in direct contact with healthy host bone. ethoss® Degranulation Burs are recommended.
3. Place the implant, ensuring primary stability. Alternatively, if it is preferred, the site can be grafted and the implant placed at a later date (12 weeks is usually suitable).
4. Allow any excess bleeding to subside before grafting.
5. Thorough degranulation is a prerequisite for successful grafting.

#### **PREPARING ETHOSS®:**

1. Draw back the plunger to the 1cc mark for 0.5cc packs, or 2cc mark for 1cc packs.
2. Holding the syringe horizontally, gently tap it to loosen any compacted ethoss®.
3. Hold the syringe vertically and remove the end cap.
4. Fill with sterile saline, replace the cap and tap or shake the syringe for 10 seconds until the powder is wet through.
5. Remove the end cap, place a sterile gauze over the end of the syringe and express the excess fluid. Firm pressure is needed.
6. Your ethoss® is now ready to use.

#### **APPLYING ETHOSS®:**

The material will start to harden after 1 minute – so it must be placed into the site quickly.

1. Ensure any excess bleeding in the site has subsided before grafting.
2. Place the ethoss® with the syringe and shape as required .
3. Do not use suction once the site has been grafted – this may disturb the material.
4. Do not overfill the site with graft material – this may cause bone to grow over the implant.
5. Apply a sterile gauze to the graft for at least 3 minutes. This will cause the built-in membrane to begin to harden, removing the need for a separate collagen membrane.
6. Once ethoss® becomes firm and you feel resistance from the graft begin suturing. ethoss® does not need to “set” like bone cement before you can suture closed.
7. Full and passive soft tissue closure is required. First sutures should be at the papillae (see picture) to ensure passive closure which does not disturb the graft.

N.B. Careful, tension free suturing is a prerequisite for successful grafting. It is preferable to use a monofilament suture to reduce the potential wicking effect of bacteria.

#### **POST-SURGERY:**

1. ethoss® has no special post-surgical requirements that would not be followed with any other graft material. We recommend the use of Bluem implant care products post-surgery.
2. The implant can usually be placed or restored after 12 week healing phase.

**SOUND CLINICAL JUDGEMENT SHOULD BE USED AT ALL TIMES.**