

OSSIX™ Bone Ossifying Collagen Sponge Tips & Guidelines for Usage in Socket Preservation

OSSIX™ Bone is a cross-linked, mineralized collagen spongy matrix.

Recommended for use in the following cases (for new users in this order):

1. Socket preservation – No membrane needed
2. Sinus elevation (crestal approach) – No membrane needed
3. Lateral/vertical augmentation (in cases with sufficient supporting bone)
4. Missing buccal bone/Implant dehiscence defects
5. Ossification scaffold in GBR

Indications 3-5 will require a membrane for stabilization.

Start with simple cases and learn the new material's behavior and qualities.

This document is focused on guidelines for use in socket extraction sites.

Guidelines to consider when using OSSIX™ Bone

1. Extraction & Site Preparation

- Carefully extract the tooth.
- Remove all granulation tissue.

2. OSSIX Bone Placement

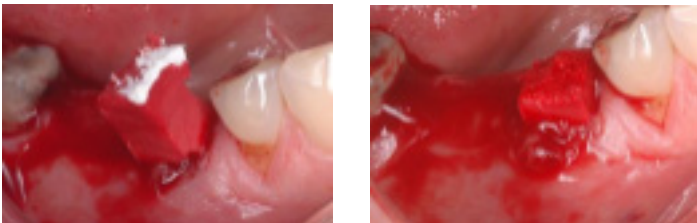
- **Open** the sterile package.
- **Trim** by holding OSSIX Bone with sterile forceps and trimming with sterile scissors.
- **Hydrate OSSIX Bone with patient's blood:**

Hold at the socket orifice until fully soaked with blood.

OSSIX Bone should always be used while hydrated and should not be manipulated when dry.

Do not hydrate OSSIX Bone with saline solution. Applying pressure when dry could cause OSSIX Bone to break/crumble (in this case, push all pieces into socket – results will not be compromised).

- **Push gently into the socket** until fully submerged.



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- **Position** OSSIX Bone so it is level with the original bone crest.
- **Suture** over with minimal tension.
- **No membrane is needed.**

3. Post-op instructions

- As is common following regenerative procedures, antibiotic coverage is advised: Recommended 1.5 grams per day Amoxicillin or equivalent for those allergic to penicillin.
- Patient should rinse with salt water for one week (1 teaspoon salt in a small glass of lukewarm water), avoid hard or hot food (similar to standard post-extraction instructions).
- Following suture removal, patient should rinse with chlorhexidine for one minute twice a day or according to the chlorhexidine manufacturer's instructions.

4. Reopening Site for Implant Placement:

- Recommended timing: 15-19 weeks for small sockets, and at least 22 weeks for large sockets.
- Perform radiograph/CBCT. OSSIX Bone will be visible in radiograph and will be lightly radiopaque (and not like dense bone). Refer to Case 1 below.
- Device will be partially ossified (chalky white appearance).
- Remnants should not be removed – will continue to ossify over time.
- During drilling, OSSIX Bone will be less resistant to drilling than mature bone or conventional bone grafting materials.

Important:

When an implant is placed in a healed OSSIX Bone site or immediately (post-extraction) placed in OSSIX Bone, make sure that your implant was properly stabilized in original bone (>5mm) for standard osseointegration time.