Aesculap Top Sellers

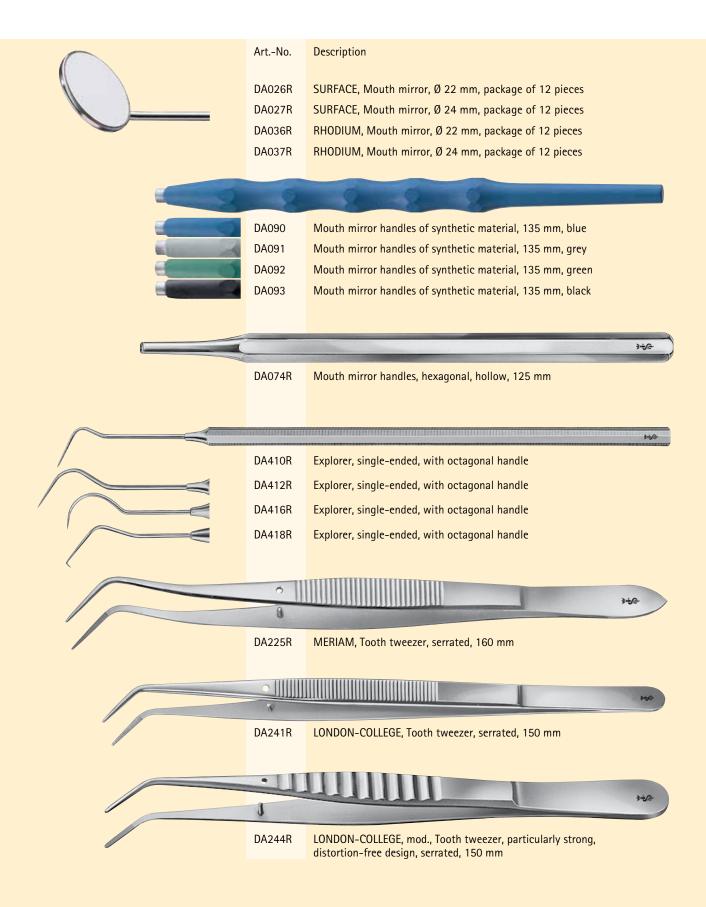
Competence in Dentistry



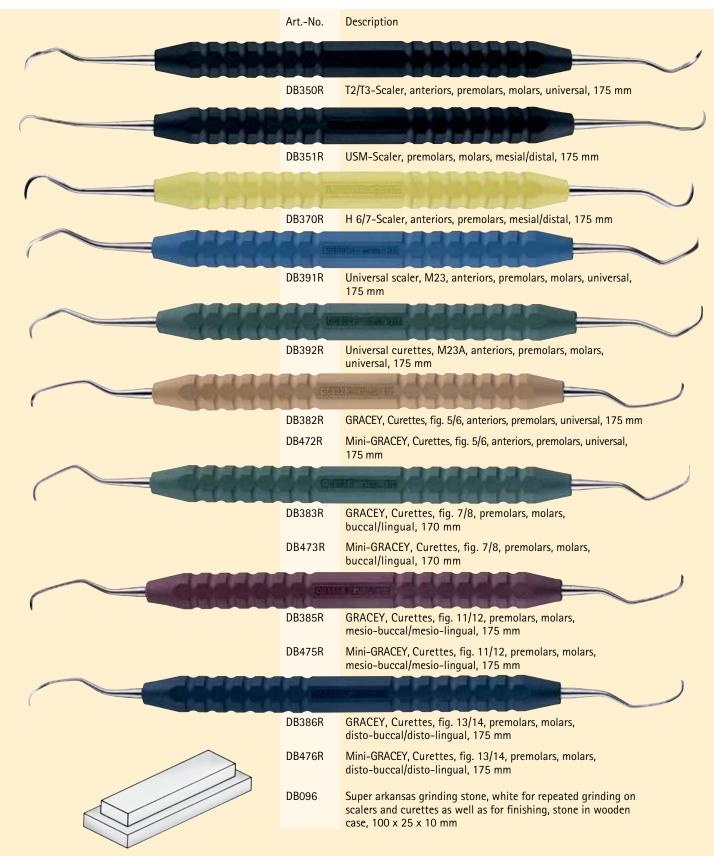
Aesculap Dental



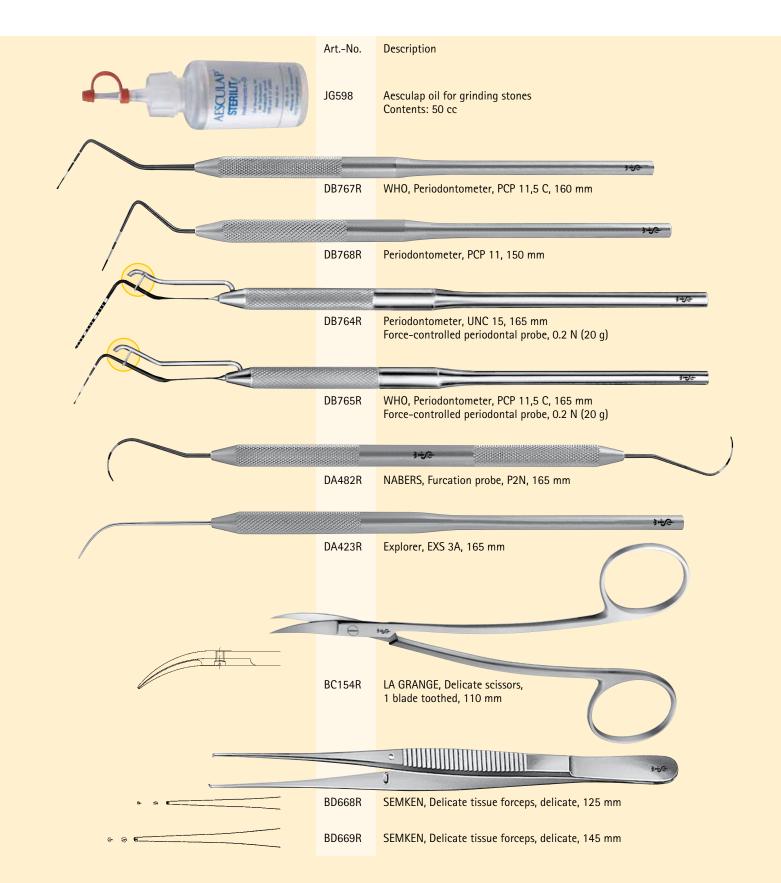
Diagnostic Instruments



Periodontic Instruments



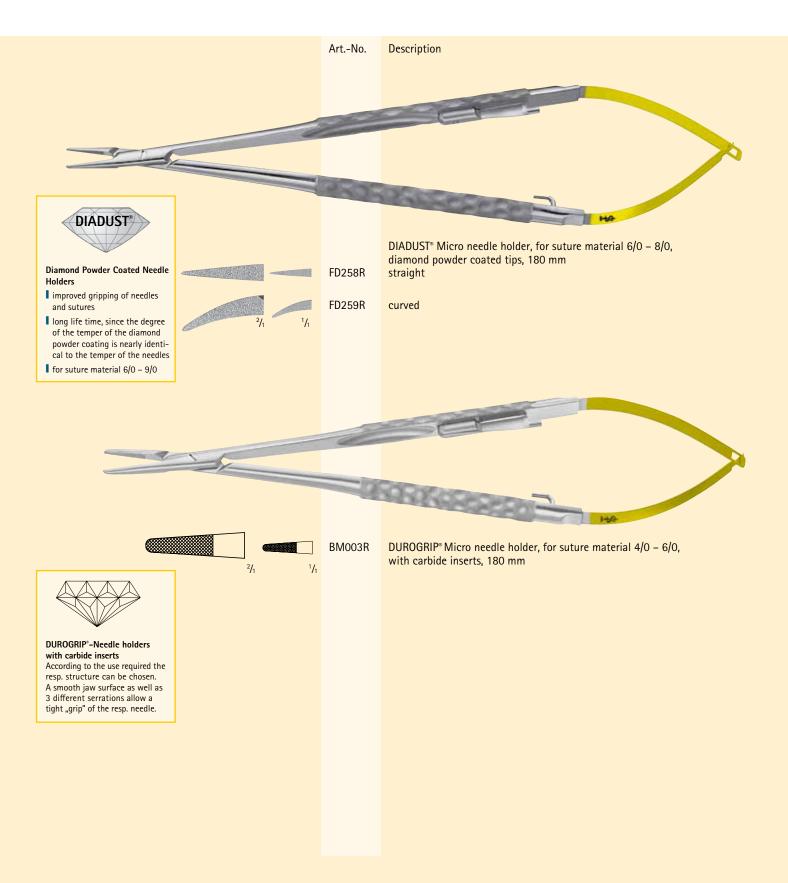
Periodontic Instruments

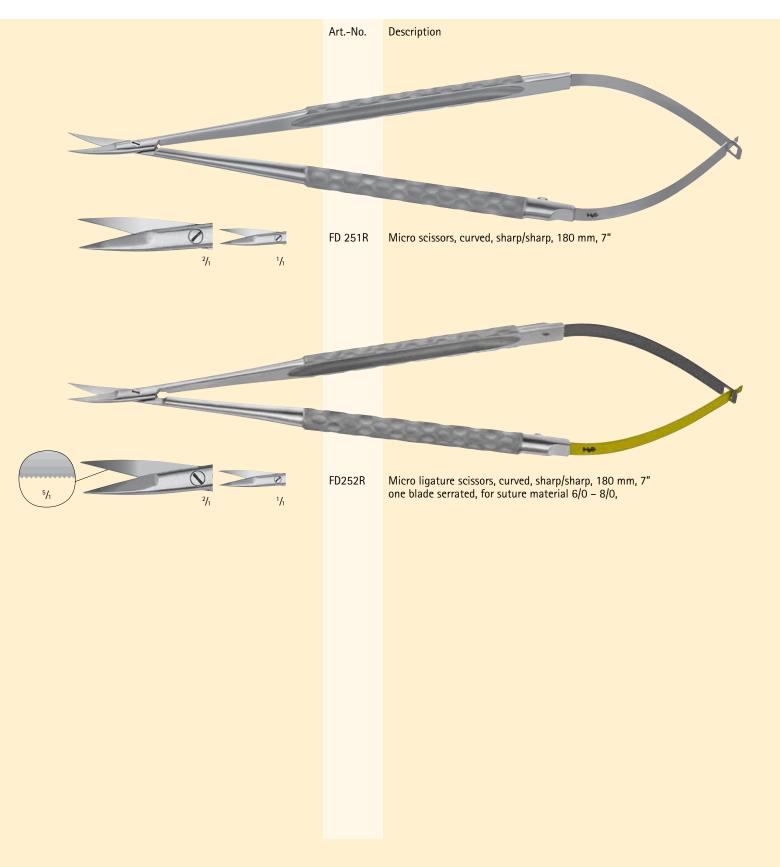


Micro Surgery

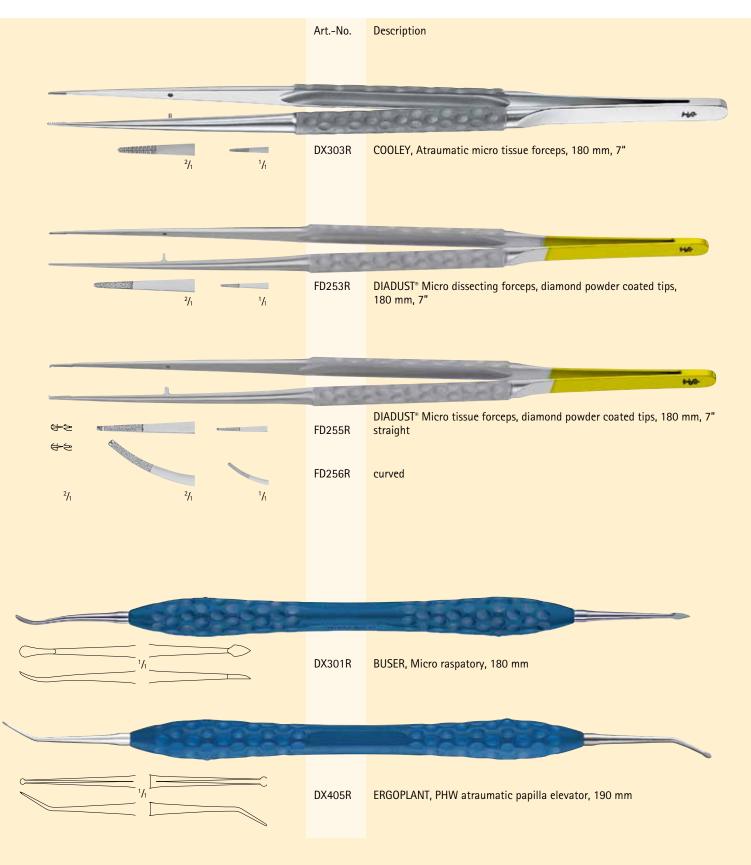


Micro Surgery

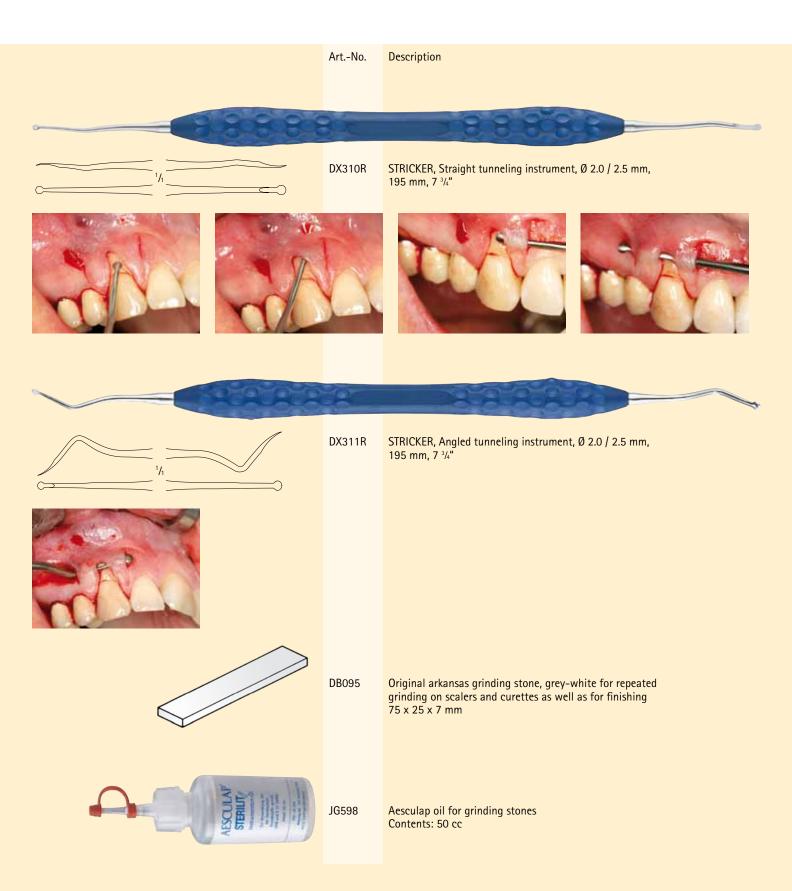




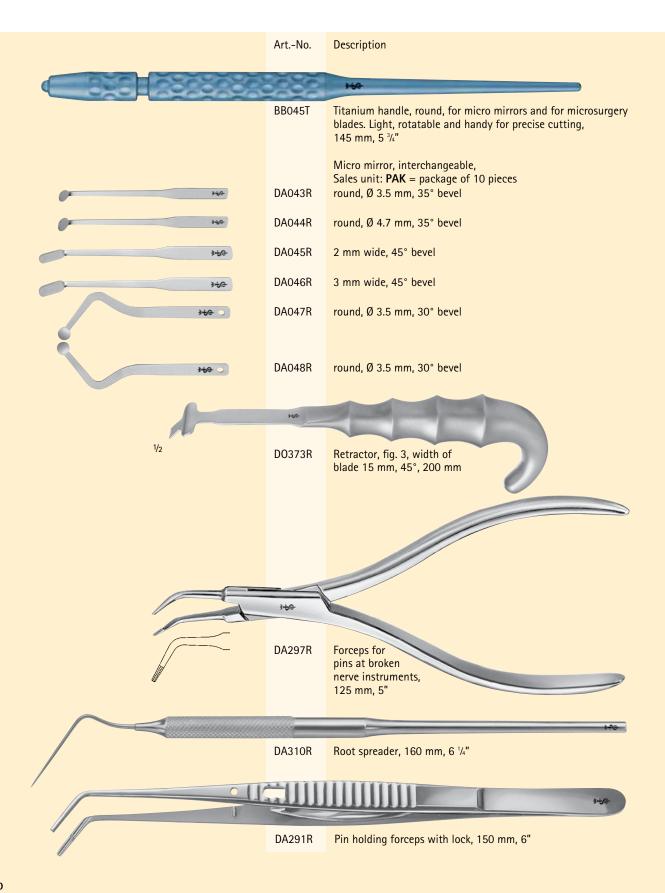
Micro Surgery



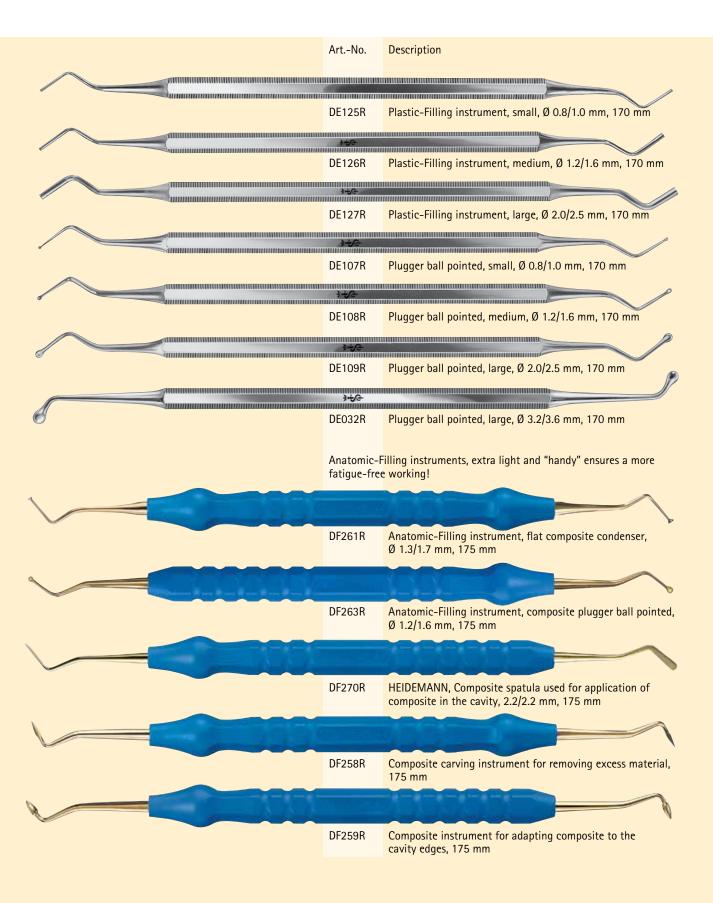
Instruments for tunnel technique for periodontal recessions



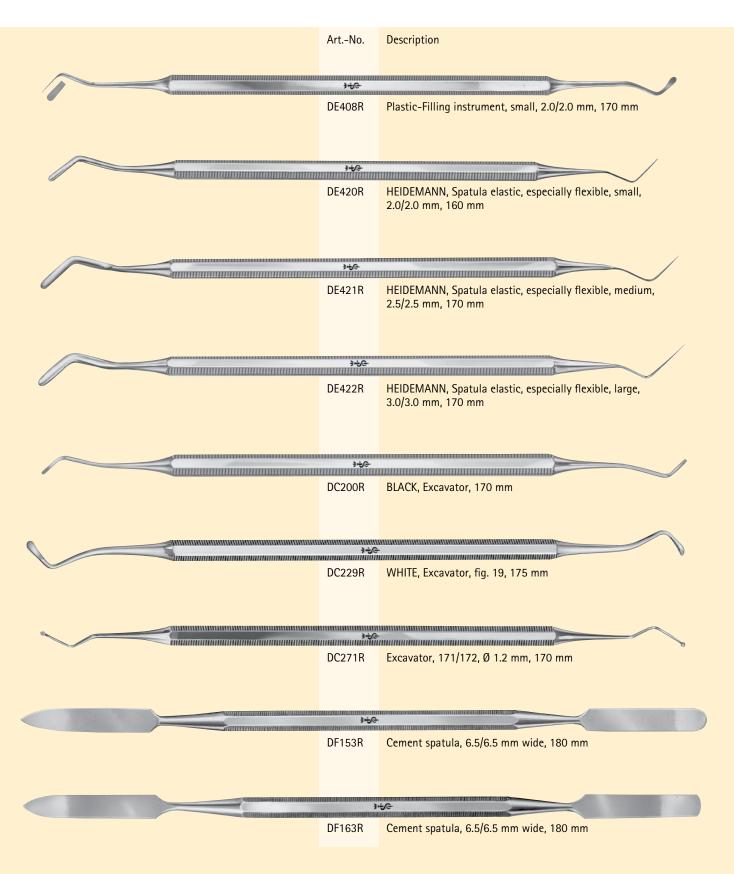
Endodontics

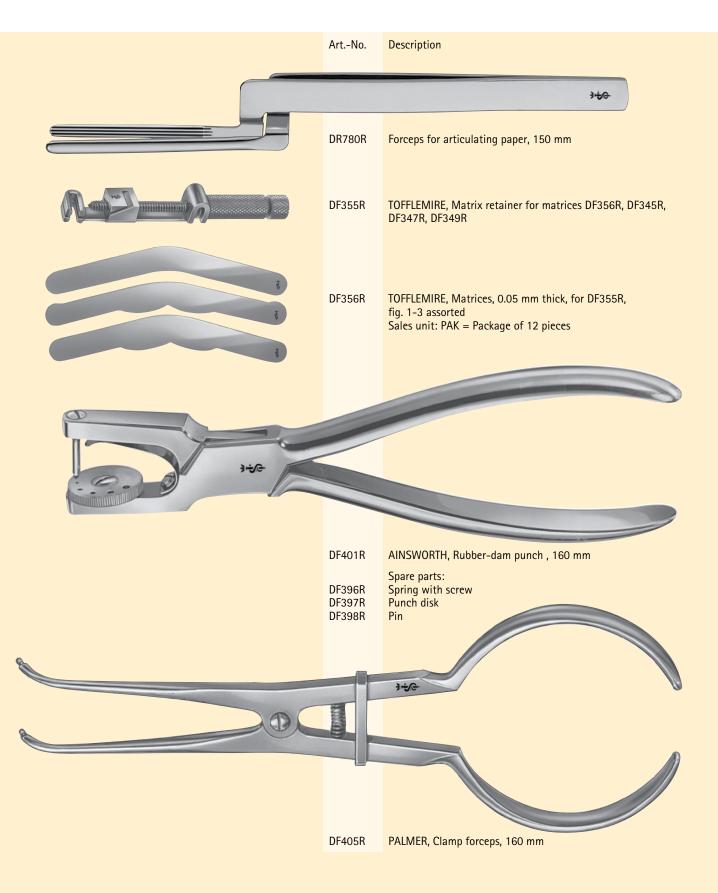


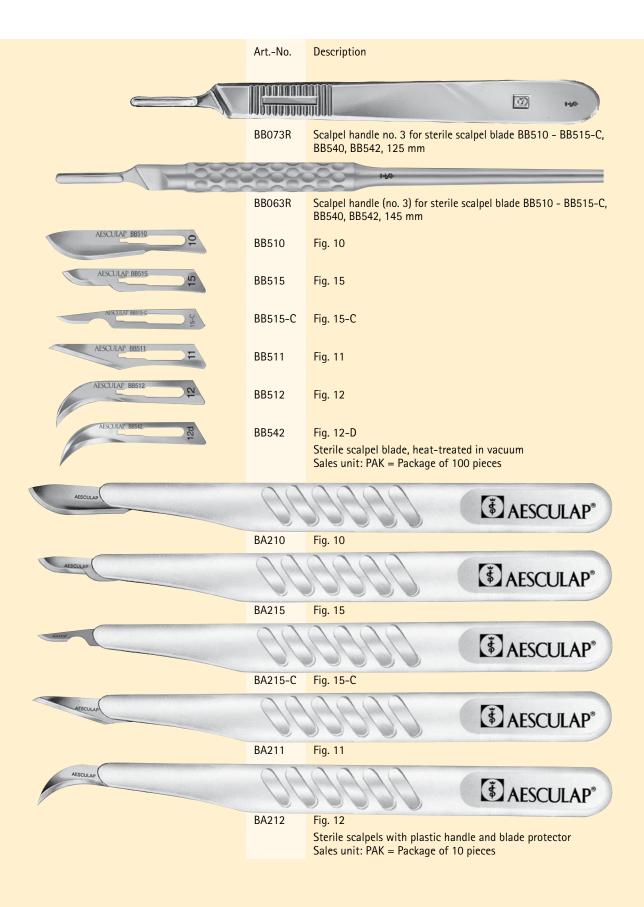
Preservation Instruments



Preservation Instruments







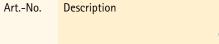


Advantages:

- · Easy and enhanced processing by using corrosion- and acid resistant instrument steel instead of chrome material
- Easy cartridge insert and ejection by folding back the bush
- Enables controlled aspiration

Aesculap Cartridge Syringe "Aspira-plus II" made of stainless instrument-steel (no chrome), with aspiration device.

After having inserted the ampulla and the cannula, the syringe is immediately ready for injection. By a slight twist of the piston rod to the right the double corkscrew tip will grasp the foam rubber of the ampulla. This enables a controlled aspiration.

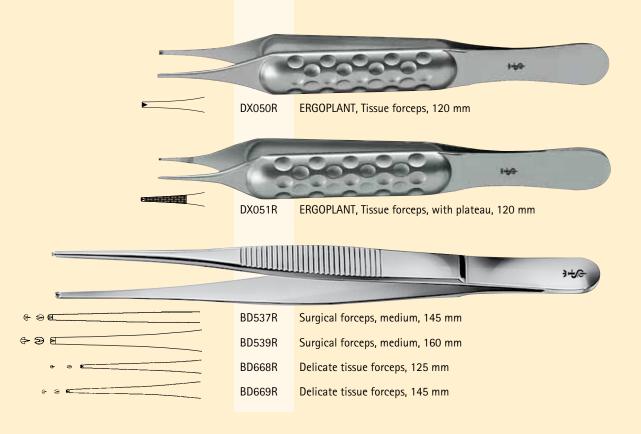


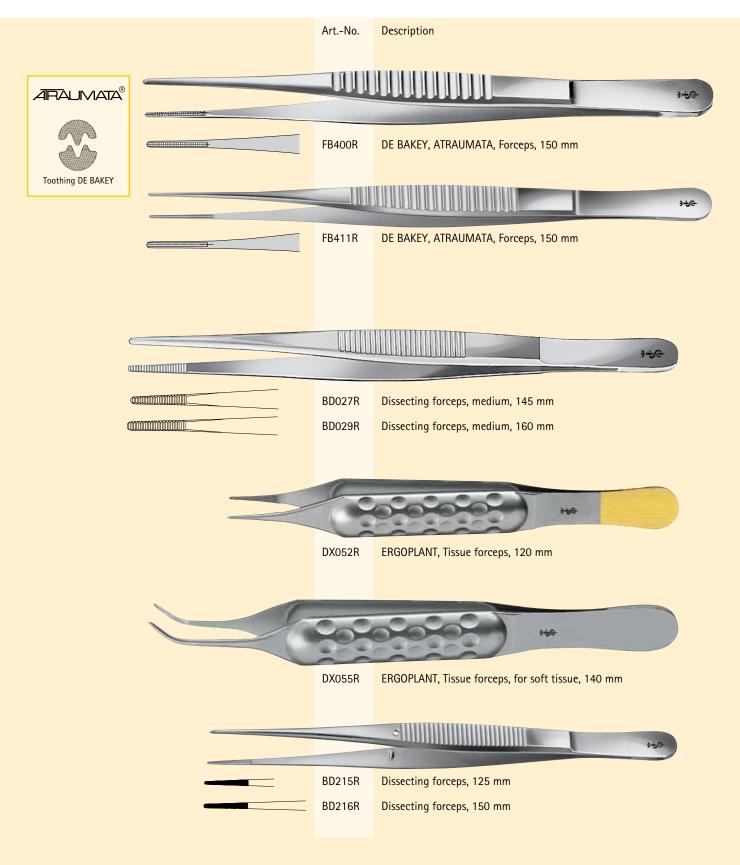


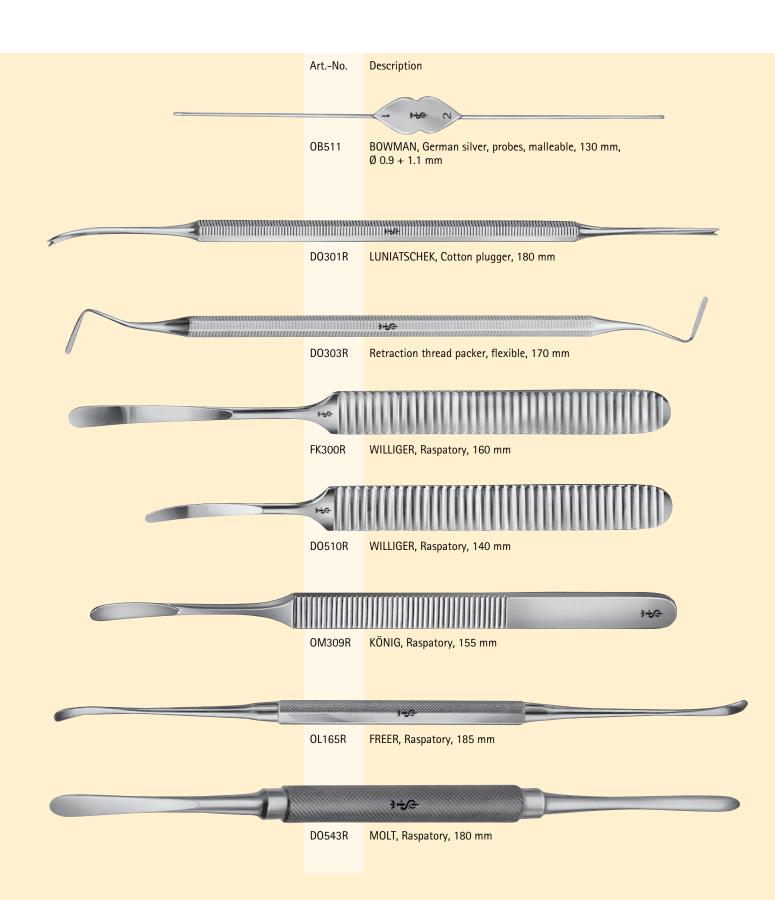
SL018R 1.8 ml, Syringe with long needle attachment (SL002R, Ø 6 mm) SL022R 2.2 ml, Syringe with long needle attachment (SL002R, Ø 6 mm) SL028R 1.8 ml, Syringe with short needle attachment (SL033R, Ø 5.5 mm) SL032R 2.2 ml, Syringe with short needle attachment (SL033R, Ø 5.5 mm)

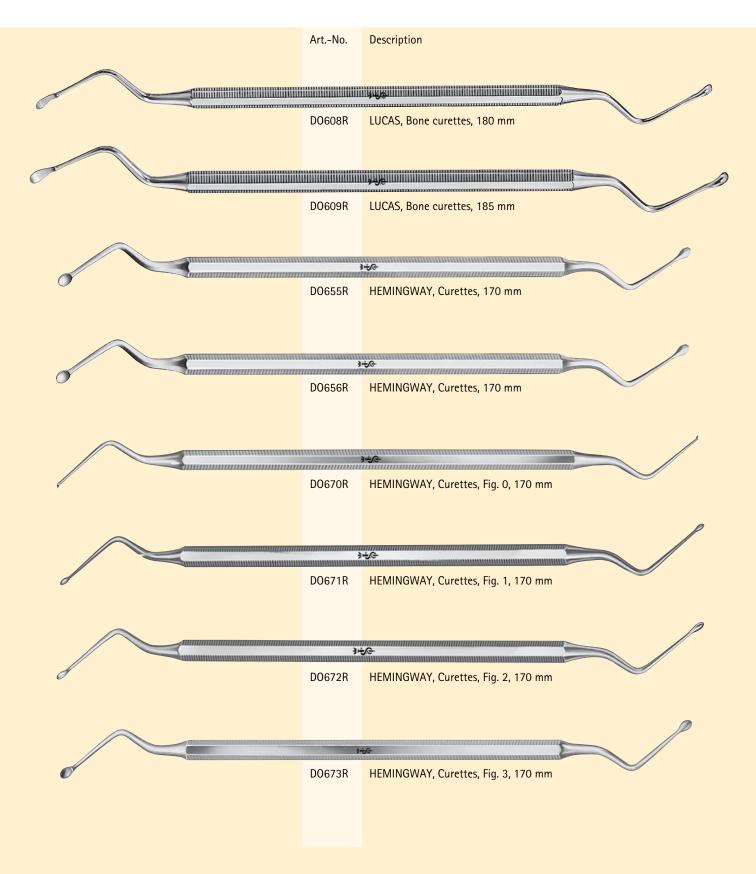


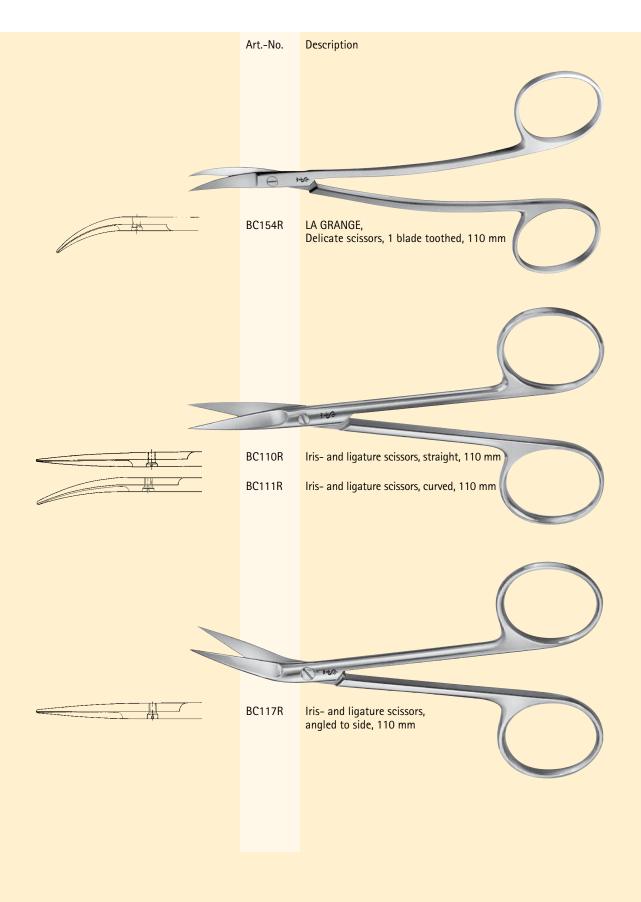
SL118R 1.8 ml, Syringe with crutch handle, with long needle attachment (SL002R, Ø 6 mm)

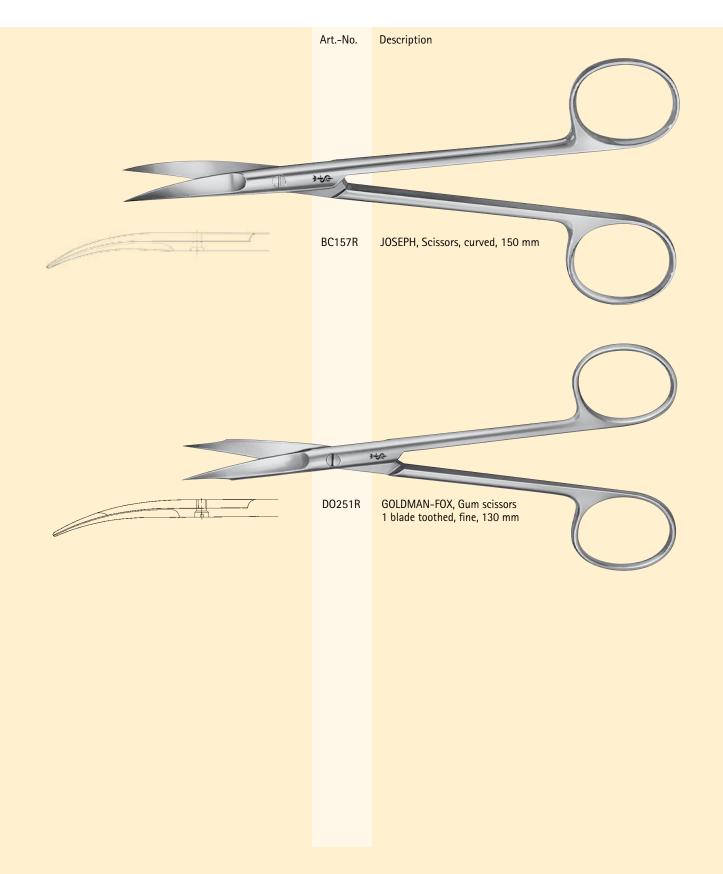


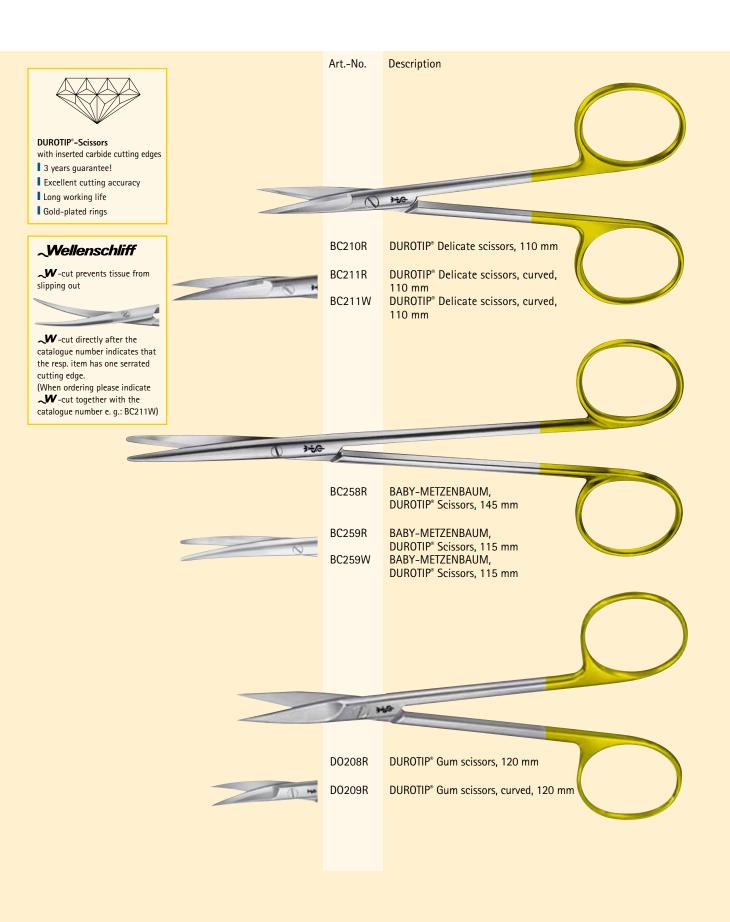


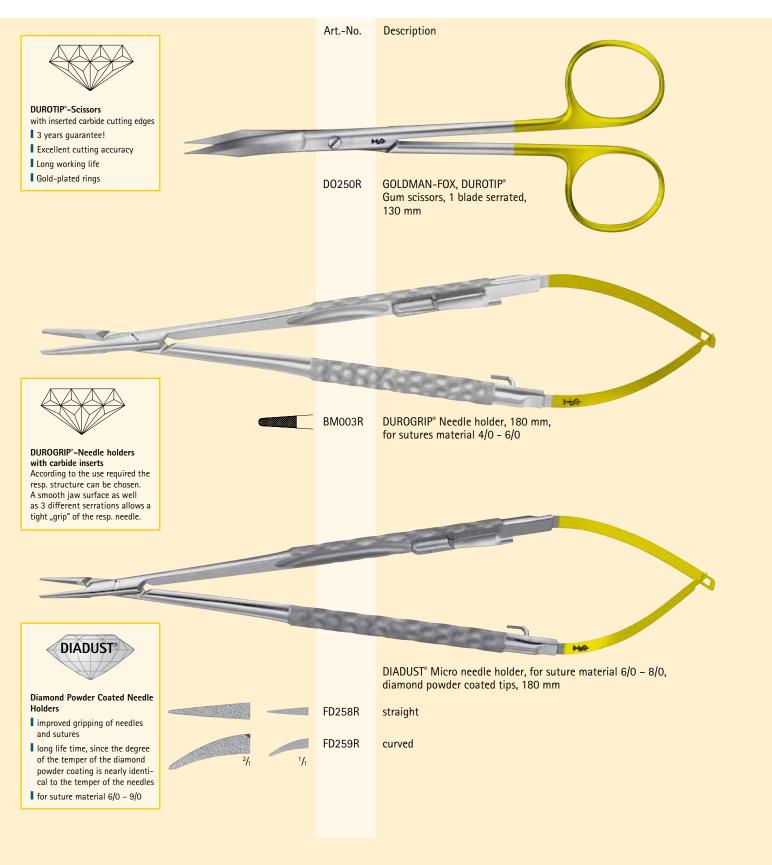


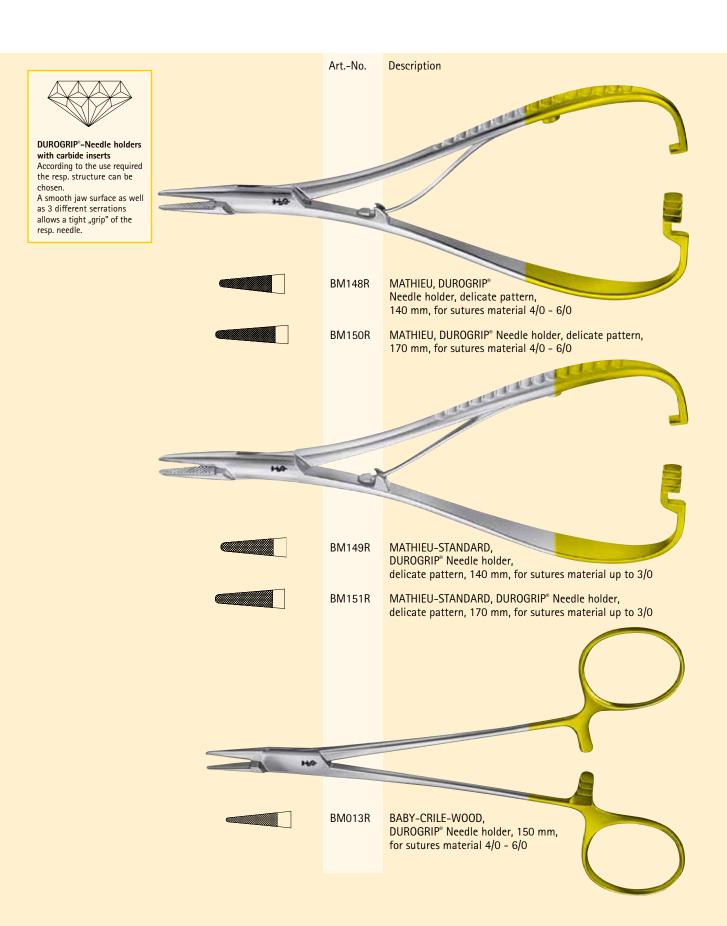


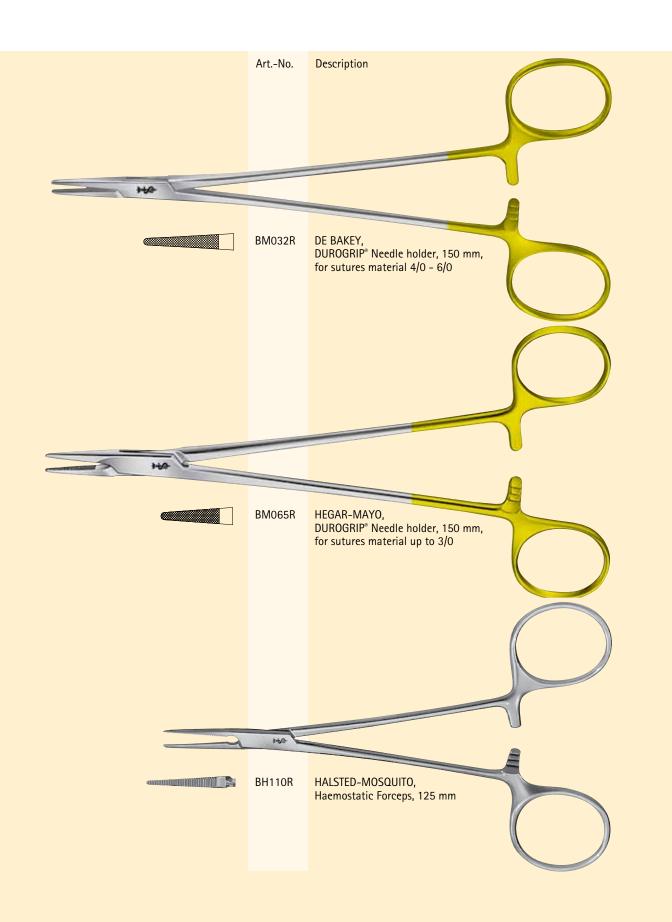


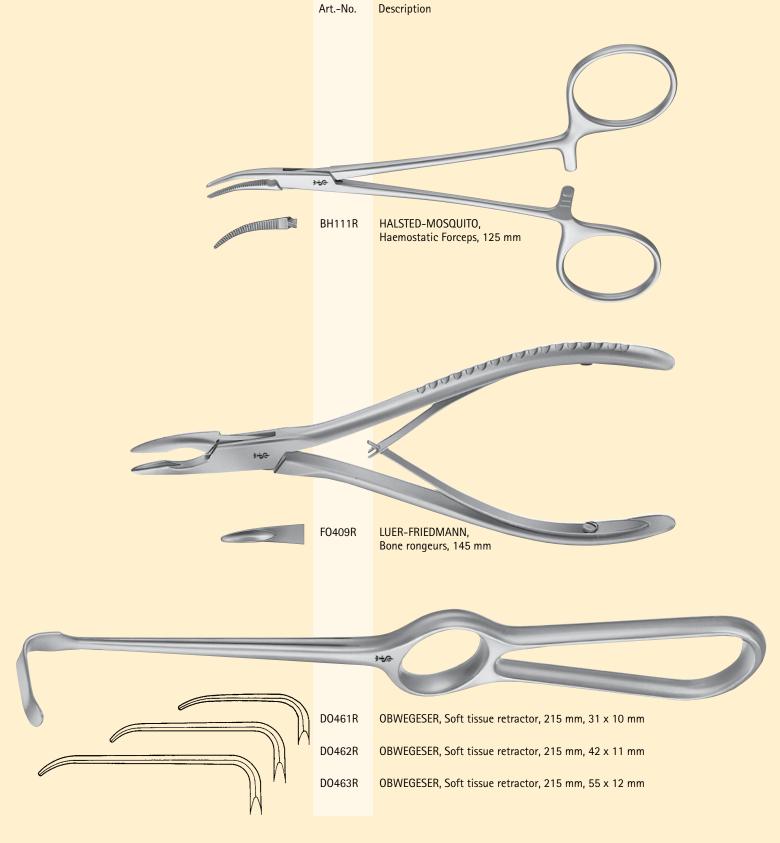






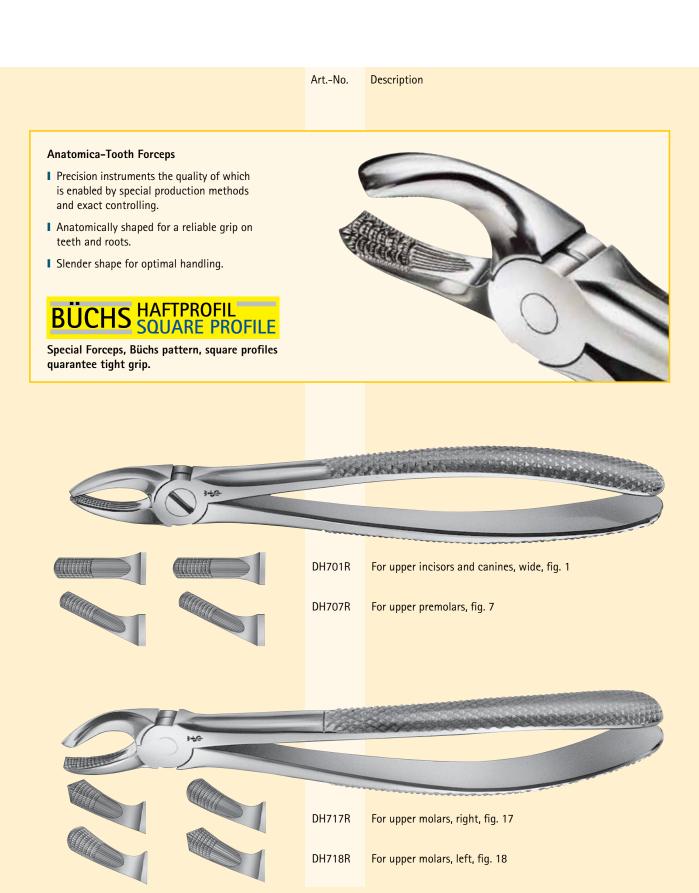




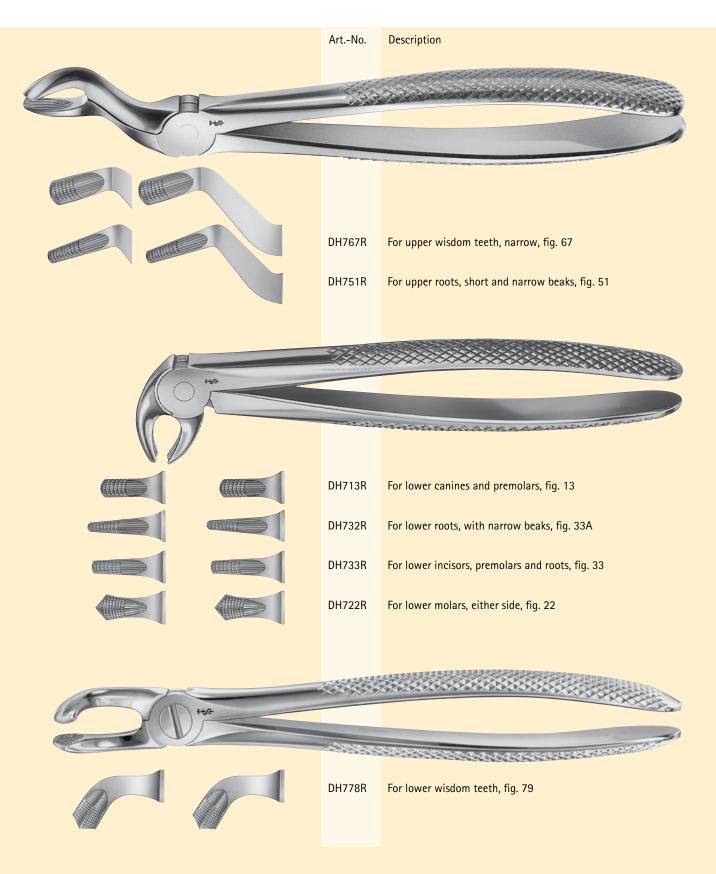


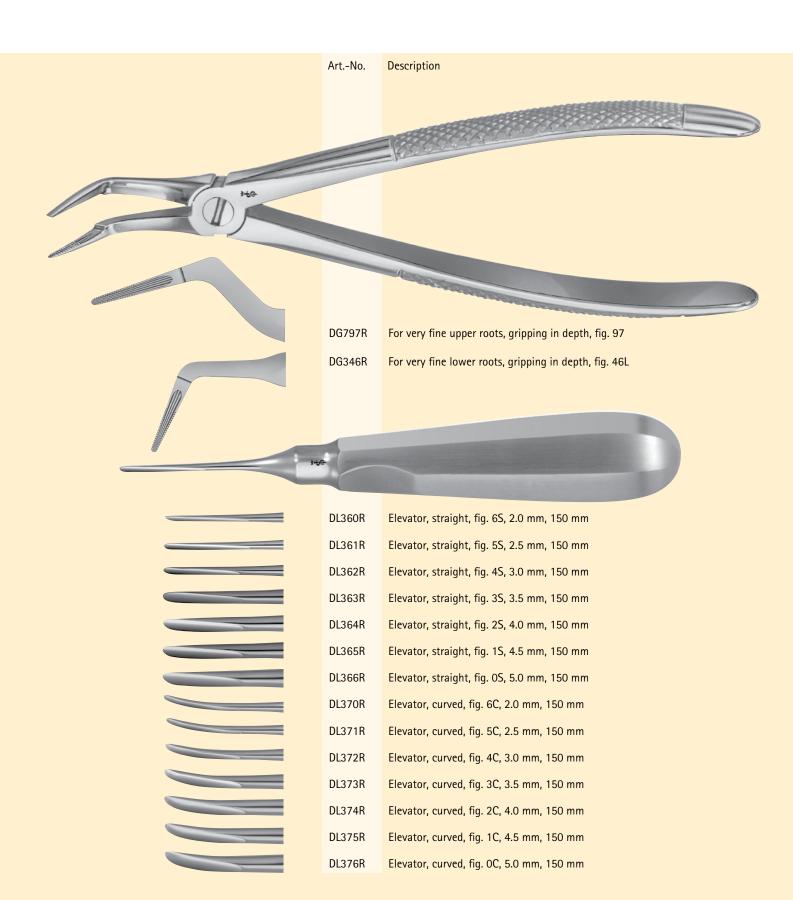


Tooth Extraction

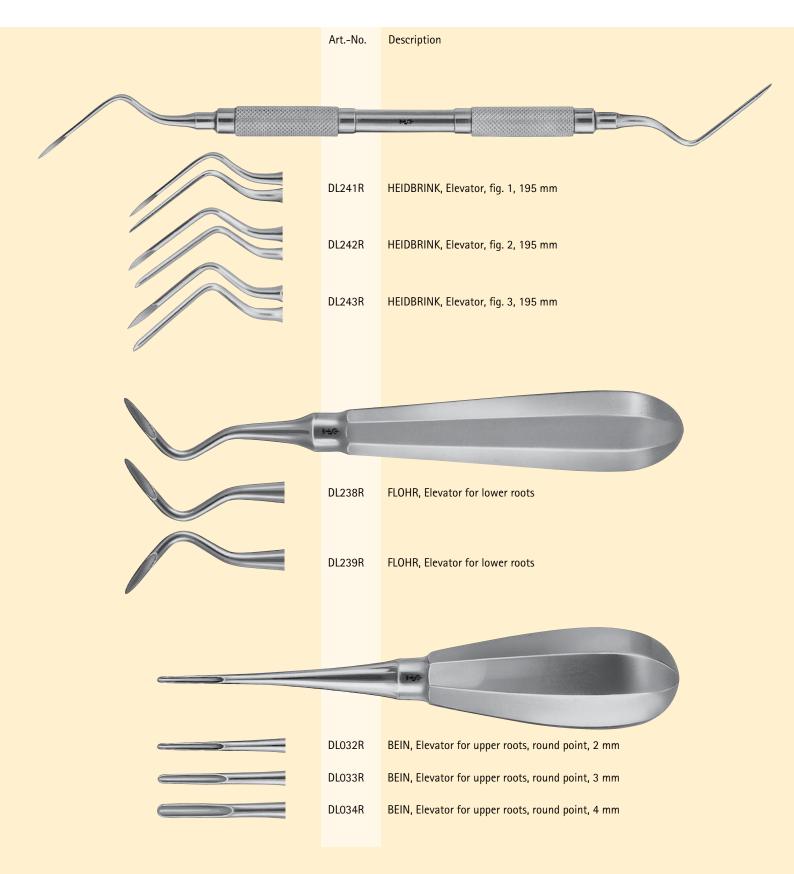


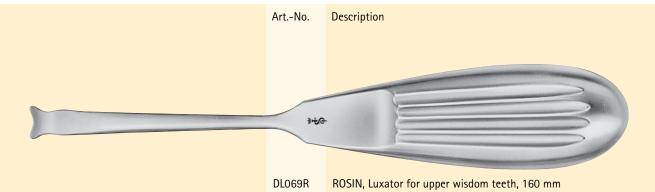
Tooth Extraction





Tooth Extraction







The first step is to separate the buccal and palatinal gingiva.



By rotating the handle (perpendicular to its long axis) the luxation force is directed distally to elevate the tooth out of the alveolus.



The luxator is inserted between the wisdom tooth and the second molar pushing it firmly to the level of the gingival tissue.





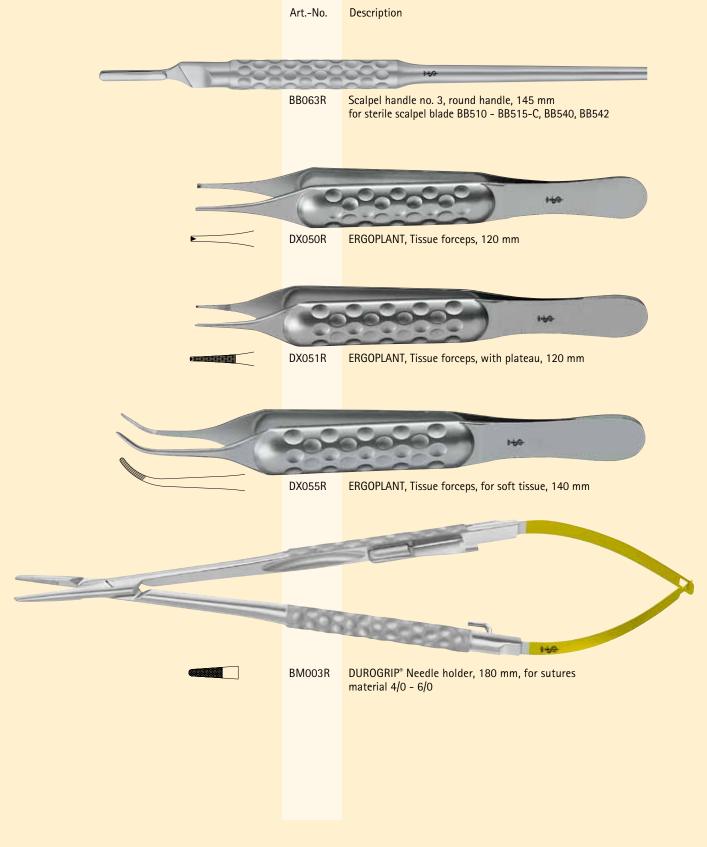
Important note:

The luxation of the wisdom tooth is not achieved by using the second molar as the leverage point for the instrument. The instrument should be used with a rotational force in distal direction to luxate the tooth in a buccal movement.

Discription

- I good overview due to elegant access
- I quick and efficient working
- good and controlled guidance of the instrument due to ergonomically designed handle and support recesses on the working end
- I soft tissue is not crushed
- I the alveolar bone is not damaged
- I reduced risk of root fractures

Implantology

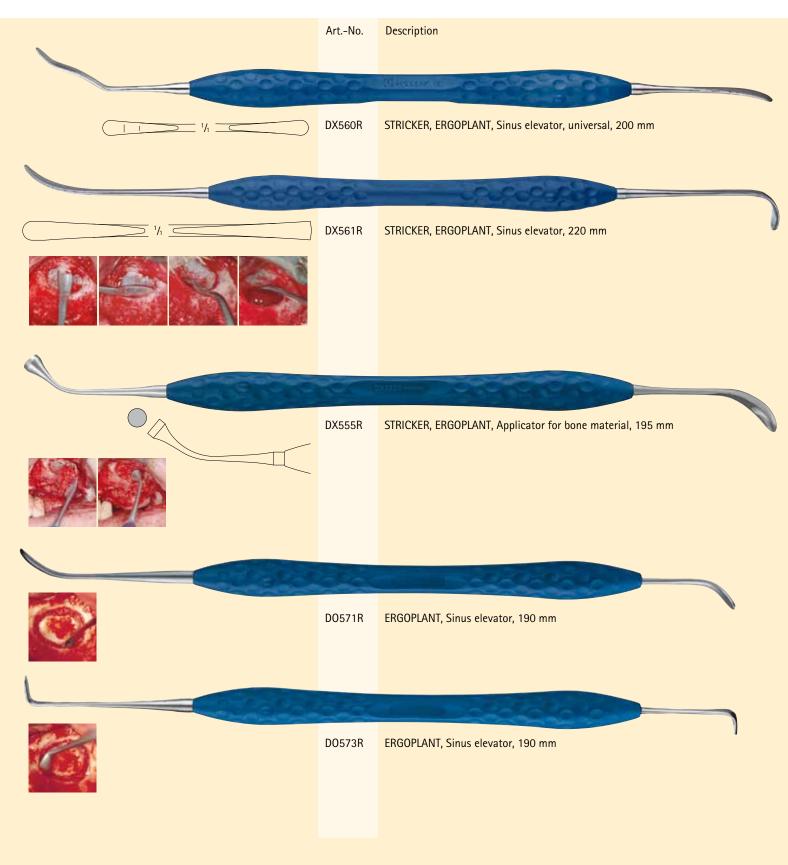


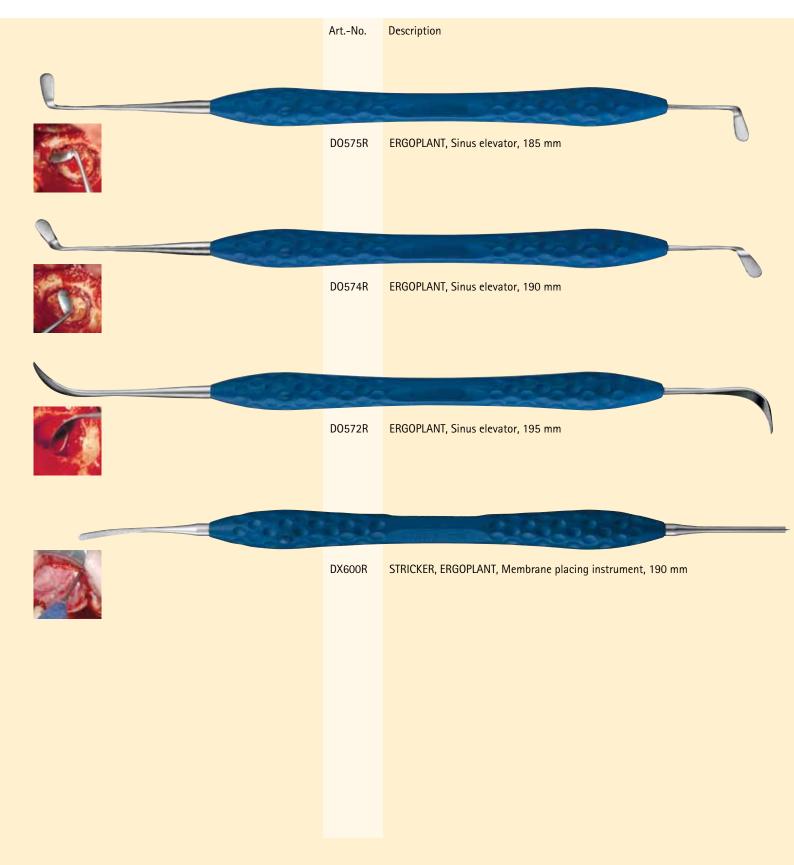
Bone condensing / Sinus Lift internal

	ArtNo.	Description ERGOPLANT, Bone condenser set, consisting of each 1 DX530R - DX539R, JG387R tray (273 x 176 x 30 mm)
210		
	DX530R DX531R DX532R DX533R DX534R	ERGOPLANT, Bone condenser, straight, 160 mm, Ø 1.5 - 2.2 mm Ø 2.2 - 2.8 mm Ø 2.8 - 3.5 mm Ø 3.5 - 4.2 mm Ø 4.2 - 4.8 mm
तल		
	DX535R DX536R DX537R DX538R DX539R	ERGOPLANT, Bone condenser, bayonet, 180 mm, Ø 1.5 - 2.2 mm Ø 2.2 - 2.8 mm Ø 2.8 - 3.5 mm Ø 3.5 - 4.2 mm Ø 4.2 - 4.8 mm
	DX710	ERGOPLANT, Sinutome set, consisting of each 1 DX570R - DX579R, JG381R tray (273 x 176 x 30 mm)
-9		KHANNESUA COMPANIA
	DX570R DX571R DX572R DX573R DX574R	ERGOPLANT, Sinutome, straight, 160 mm, Ø 2.2 mm Ø 2.8 mm Ø 3.5 mm Ø 4.2 mm Ø 4.8 mm
6	1	
	DX575R DX576R DX577R DX578R DX579R	ERGOPLANT, Sinutome, bayonet, 180 mm, Ø 2.2 mm Ø 2.8 mm Ø 3.5 mm Ø 4.2 mm Ø 4.8 mm

Implantology

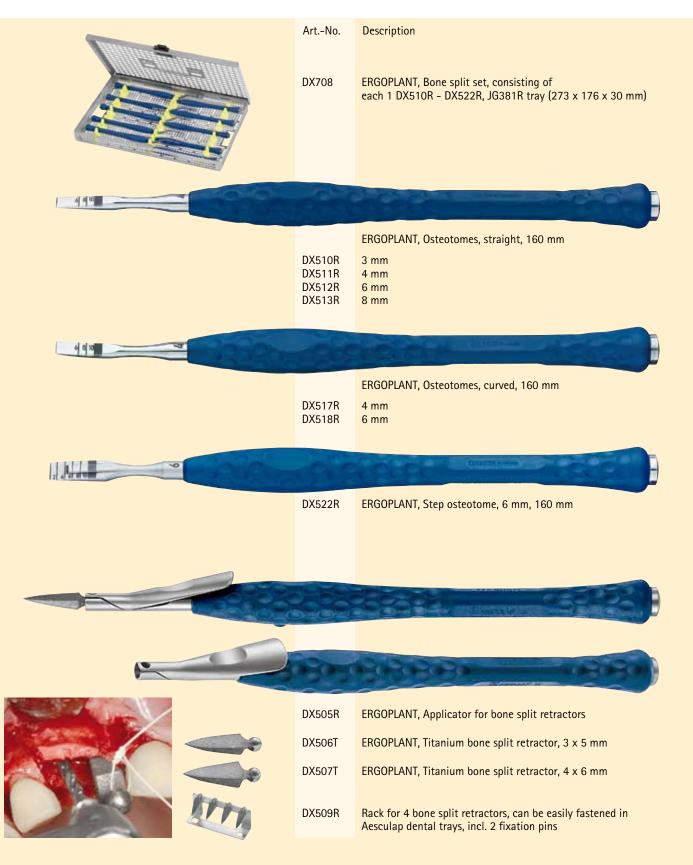
Sinus Lift





Implantology

Bone Split



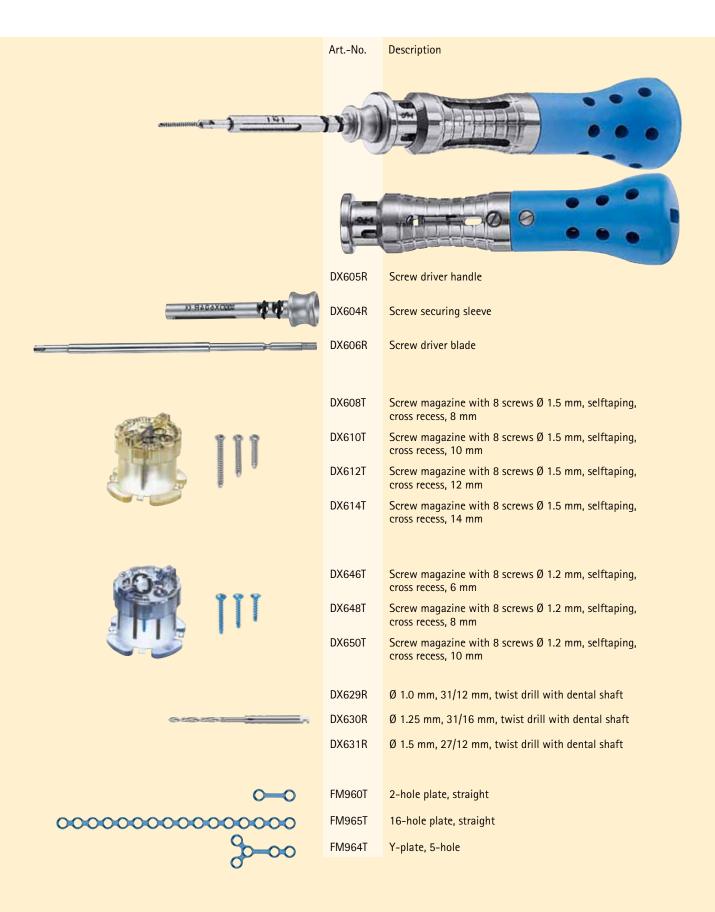
	ArtNo.	Description
	DX400R	ERGOPLANT, Periotome, 170 mm
- Consideration	DX200R	ERGOPLANT, Raspatory, 200 mm
	DX201R	ERGOPLANT, Raspatory, 190 mm
	DX203R	ERGOPLANT, Raspatory for soft tissue, sharp/blunt, 195 mm
	DX555R	ERGOPLANT, Applicator for bone material, 195 mm
	DX600R	ERGOPLANT, Membran placing instrument, 190 mm
	DX405R	ERGOPLANT, Atraumatic papilla elevator, 190 mm
	DX254R	ERGOPLANT, Bone raspatory, 190 mm

Implantology

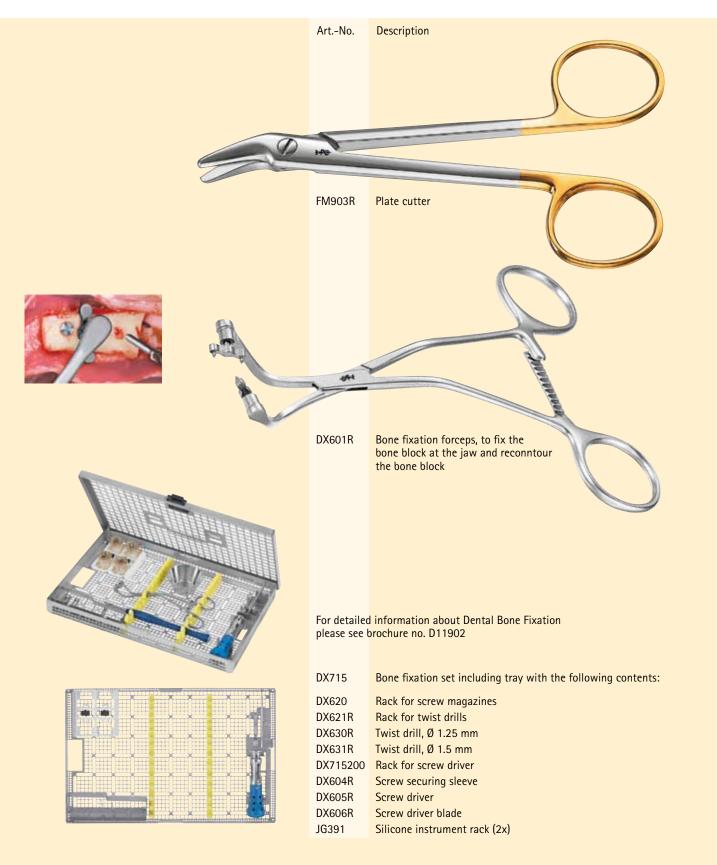
Bone Mill

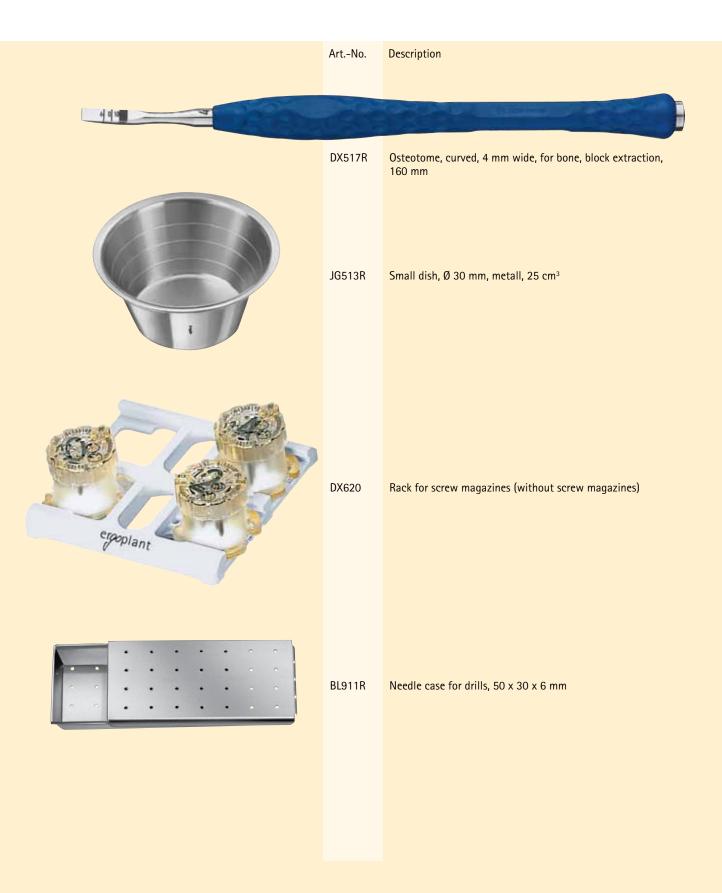
To the second se	ArtNo.	Description
	DX800 DX801R DX802R DX810R DX811R JF284R TE888	Aesculap micro bone mill kit, consisting of: 1 ERGOPLANT, Micro bone-mill (incl. DX803R cutting disk, coarse) 1 ERGOPLANT, Cutting disk, fine 1 ERGOPLANT, Bone mill-cleaner, fine 1 ERGOPLANT, Bone mill-cleaner, coarse 1 Tray (274 x 172 x 60 mm) with storage aid for micro bone-mill, suitable for dental container JN095 1 Packing stencil (only available for DX800)
0000	DX801R	ERGOPLANT, Micro bone-mill, incl. with coarse cutting
***	DAOUTH	disk DX803R ERGOPLANT, Micro bone-mill I small and handy I interchangeable cutting disks Cutting disks available for finer or coarser bone particles Leasy to clean due to special cleaning instruments Leasy mounting and demounting I high/great bone yield requires less bone harvesting
	DX802R DX803R	ERGOPLANT, Cutting disk for DX801R, fine ERGOPLANT, Cutting disk for DX801R, coarse
	2	4-8-8-8-8-8-8
	DX810R DX811R	ERGOPLANT Bone-mill-cleaner, fine, for DX802R, 195 mm ERGOPLANT, Bone-mill-cleaner, coarse, for DX803R, 195 mm

Bone Fixation



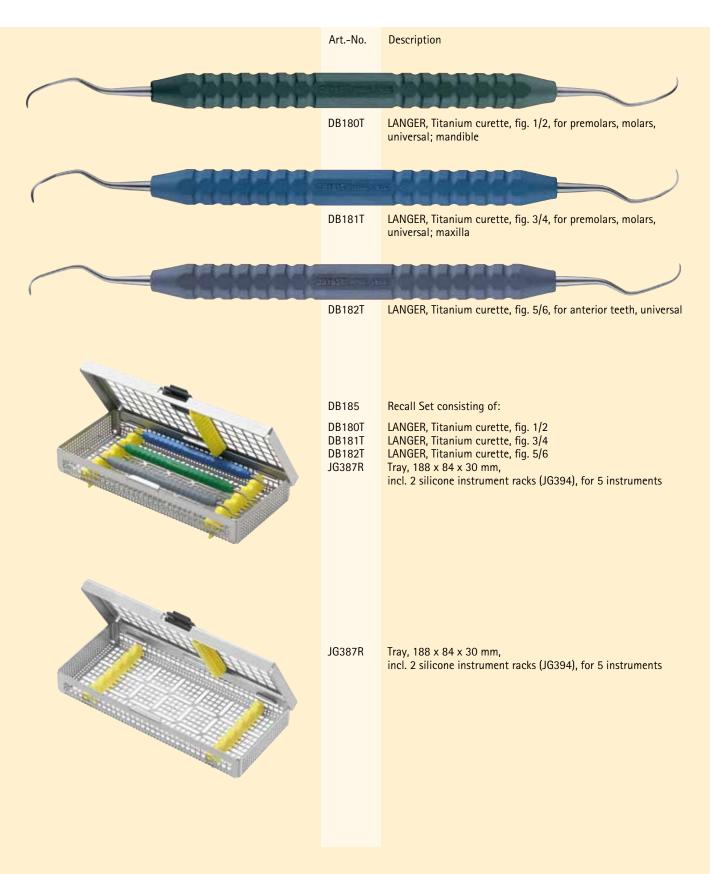
Implantology





Implantology

Recall Set for Implant Cleaning



Dental Prosthetics

Art.-No. Description

Aesculap Impression Trays

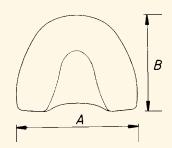
JESCO®-Form impression trays, impression trays acc. WÖSTMANN perforated pattern. Using plastic or resilient impression compounds, these materials will penetrate the holes and give the necessary support for a correct impression. The impession trays are made of stainless steel 18/8.

The impression trays for lower jaw acc. WÖSTMANN in addition have the following characteristics and advantages*:

- I Modified tray shield and changed tray curve.
- Lengthened tray with simultaneous reduction of transversal expansion.
- I All teeth are seized, incl. the third molares
- Sufficient and uniform thickness of the impression compounds in the area of lingual undercut of the teeth.

* The shapes of the impression trays are based on an analysis of naturally toothed patients of:

PD. Dr. B. Wöstmann Zentrum für Zahn-, Mund- und Kieferheilkunde der Julius-Liebig-Universität Abteilung für Zahnärztliche Prothetik Schlangenzahl 14; D-35392 Gießen



A = width of impression tray

B = depth of impression tray

Using plastic or resilient impression compounds, these materials will penetrate the holes and give the necessary support for a correct impression.





According to WÖSTMANN impression trays for toothed lower jaws

Α

UB1, 69 mm x 54 mm

DR082R UB2, 73 mm x 58 mm

DR083R UB3, 79 mm x 64 mm

UB4, 80 mm x 71 mm

JESCO®-Form impression trays for toothed upper jaws

A E

DR201R OB1, 66 mm x 52 mm

DR202R OB2, 71 mm x 62 mm

DR203R OB3, 71 mm x 64 mm

DR204R OB4, 80 mm x 70 mm



DP741R

Telescope pliers, slender pattern, the diamond powder coated gripping surfaces ensure an especially firm grip, 140 mm

Dental Prosthetics

Art.-No.

Description

PLANERT Crown widening pliers

- I universally applicable in the upper and lower jaws
- I essential time saving
- I protection of the periodontium
- I no stump beaks and no periodontal membrane contusions
- No slipping off of the instruments and less injury to the oral cavity soft tissue.
- I Frequent reusability of the crowns and bridges as temporary measure.
- I Use also possible with thinwalled crowns and hard alloys.



At the beginning the crown is slit parallel with a relatively thin instrument.



To produce parallel slit edges which can be easily gripped with the pliers, a cylindrical instrument with diam. of approx 1.0 mm is guided perpendicular to the tooth center line.



The teeth of the crown widening pliers are positioned in order to spread the crown.



Finally the crown will be removed in the conventional way.

Our tip:

The slit walls which are produced must be prependicular. Always cut through the bottom crown edge and, if possible, extend the slit up to the masticatory surface. In the case of bridges, move the slits approximately 1/3 towards the suspension element.





Dental Tray System

The Sterile Goods Cycle

The sterile goods cycle in the dental practice with the Aesculap Sterile Container System:

Hygiene measures in the dental practice are intended first and foremost to protect the health of patients, but also that of the practice staff.

Observing exemplary hygiene in the reprocessing of instruments is therefore particularly important.

Clearly defined hygiene procedures allow that the measures taken to keep the practice environment clean and sterile can be performed hygienically, efficiently, and cost-effectively on a daily basis.

To support you in this, the Aesculap sterile container system is proven to facilitate the organization of instrument reprocessing.

Provision and treatment







2 | Clearing away and disposal

6 Storage



Four good reasons to choose the Sterile Container System

I Reduction of infection risk

for patients and staff through preservation of instrument sterility and closed transport of used instruments

I Economic

Economic advantages due to reusable packaging, low costs of use and long service life

I Comfortable handling

Simple and quick

Transparency

Standardized easy documentation of the supply cycle



3 | Disinfecting and cleaning



5 | Sterilizing





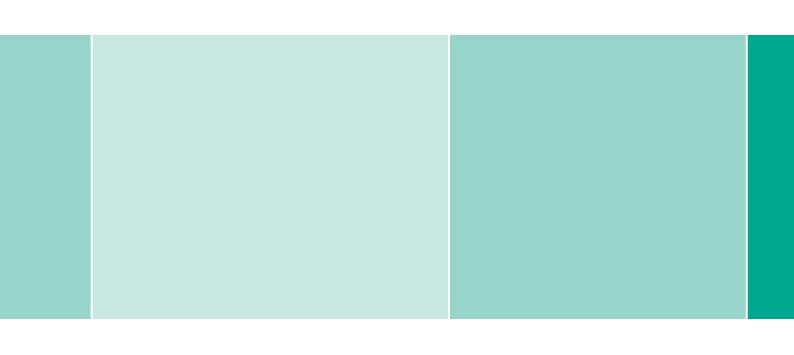
Dental Tray System



Dental Sterile Container System



Notes



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