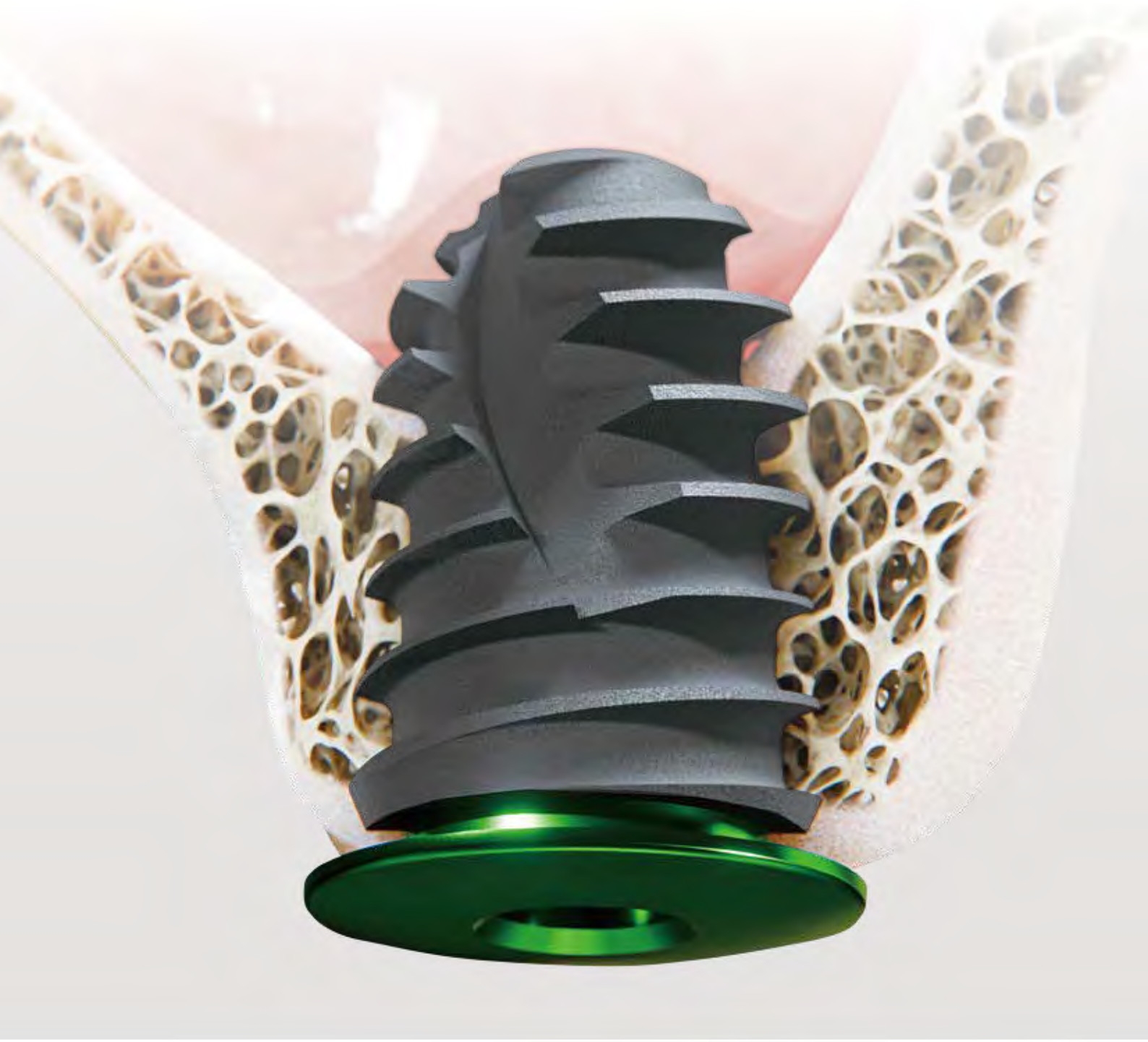
Ver 1

SICON Implant

Sinus & Soft Bone, Immediate Perfect Solution

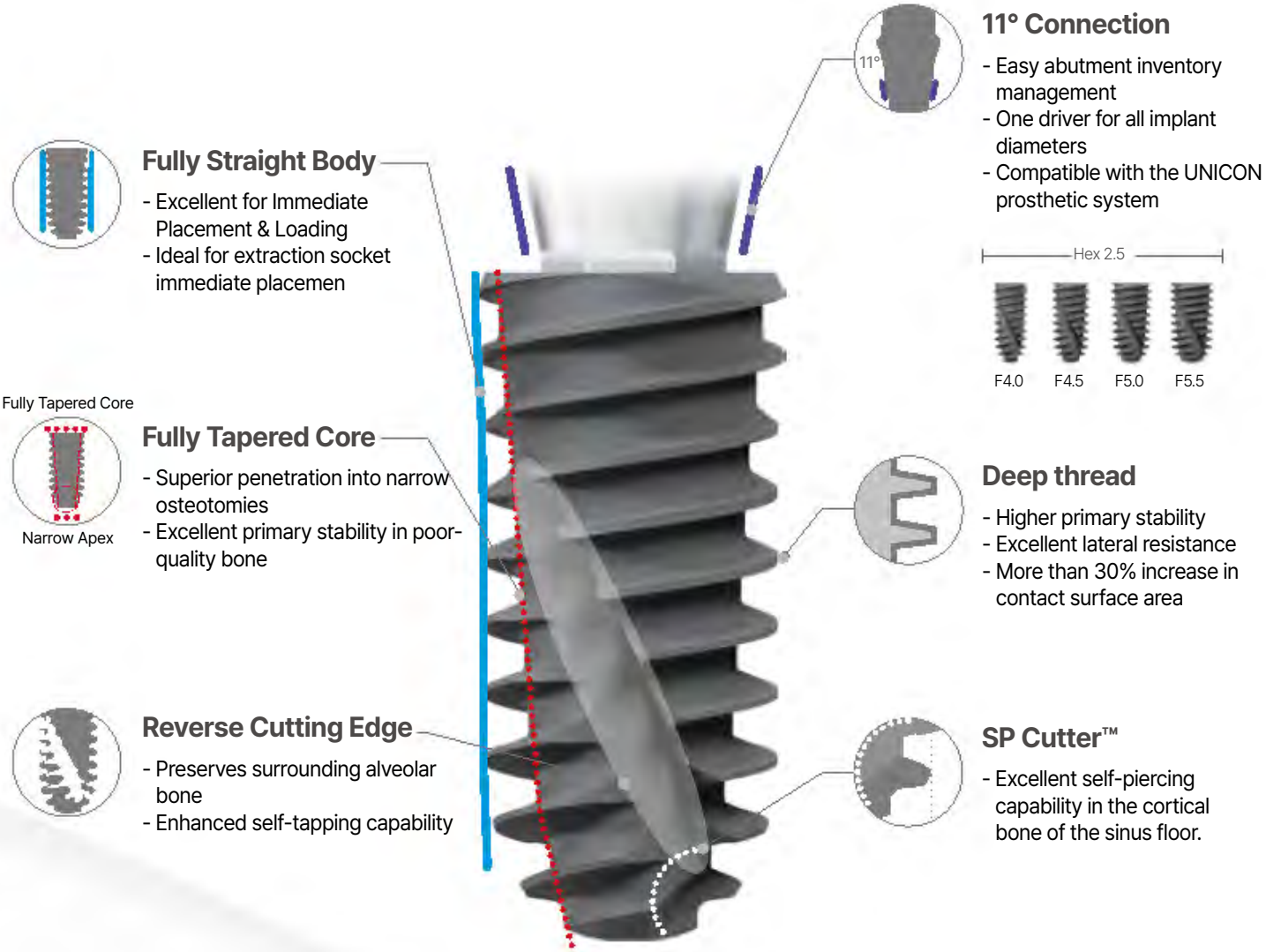


D:O IMPLANT

SICON Fixture

Completion of the 11° CON System:
SICON, Specialized for Difficult Cases

SICON features an 11° Connection design, allowing the use of a single prosthetic platform regardless of implant diameter.
Engineered to achieve outstanding primary stability even in sinus cases and poor-quality bone, SICON delivers predictable clinical outcomes through a simple and reliable protocol when immediate placement and immediate loading are required.



11° Connection
- Easy abutment inventory management
- One driver for all implant diameters
- Compatible with the UNICON prosthetic system

Fully Straight Body
- Excellent for Immediate Placement & Loading
- Ideal for extraction socket immediate placemen

Fully Tapered Core
- Superior penetration into narrow osteotomies
- Excellent primary stability in poor-quality bone

Deep thread
- Higher primary stability
- Excellent lateral resistance
- More than 30% increase in contact surface area

Reverse Cutting Edge
- Preserves surrounding alveolar bone
- Enhanced self-tapping capability

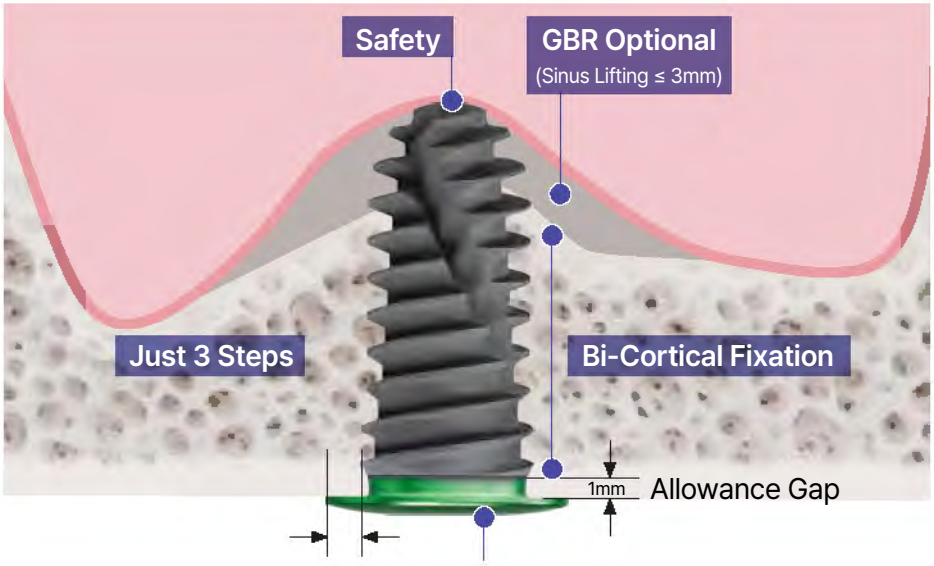
SP Cutter™
- Excellent self-piercing capability in the cortical bone of the sinus floor.

Sinus & Soft Bone + **I**mmediate + **Con**venient = **"SICON"**

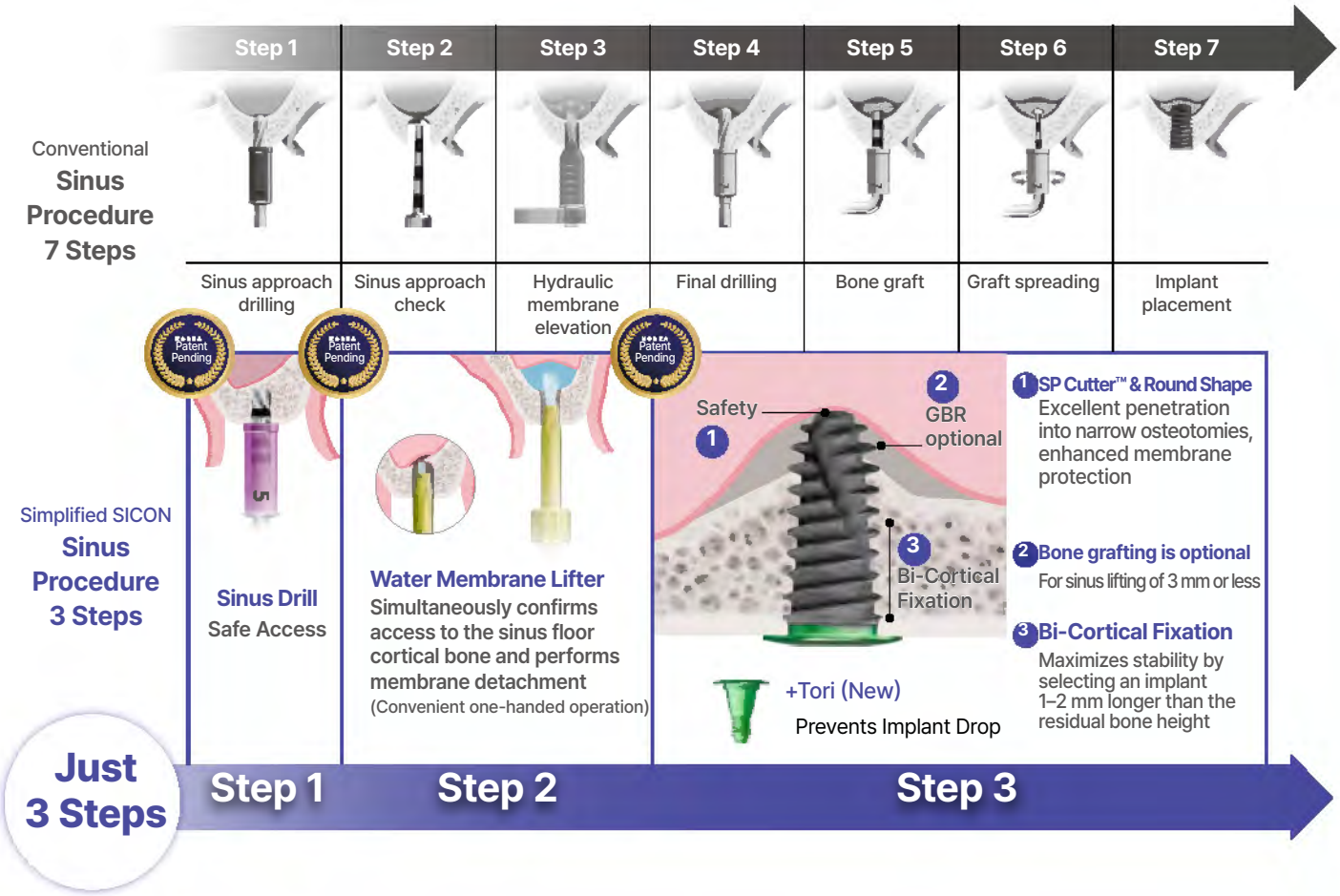
SICON embodies advanced technology designed for sinus cases, poor-quality bone, and other challenging clinical situations, while offering a simple and intuitive protocol that clinicians can easily master.

SICON Advantages

Advantage 1 **Simplified Procedure, Reduced Bone Grafting Burden, and Safer Sinus Surgery with Patented Technology**



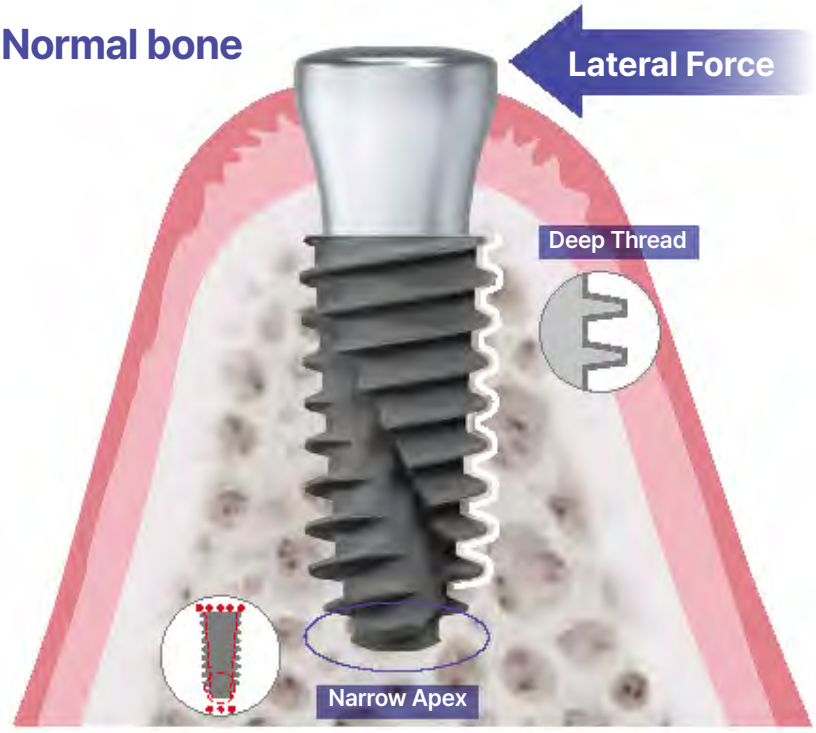
Tori 2.0 : Prevents Implant Drop

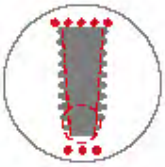


SICON Advantages

Advantage 2 **Stable Osseointegration with Excellent Primary Stability and High Lateral Resistance, Even in Poor-Quality Bone**

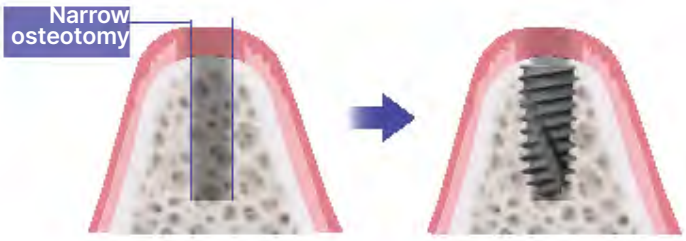
Soft~Normal bone





Narrow Apex

Minimal Drilling **Bone Compaction**



- In soft to normal bone, a narrow osteotomy is created with minimal drilling, allowing the implant to condense the surrounding alveolar bone during insertion

→ Achieves Maximum BIC and Outstanding Primary Stability



Deep Thread

Deep Thread **Shallow Thread**



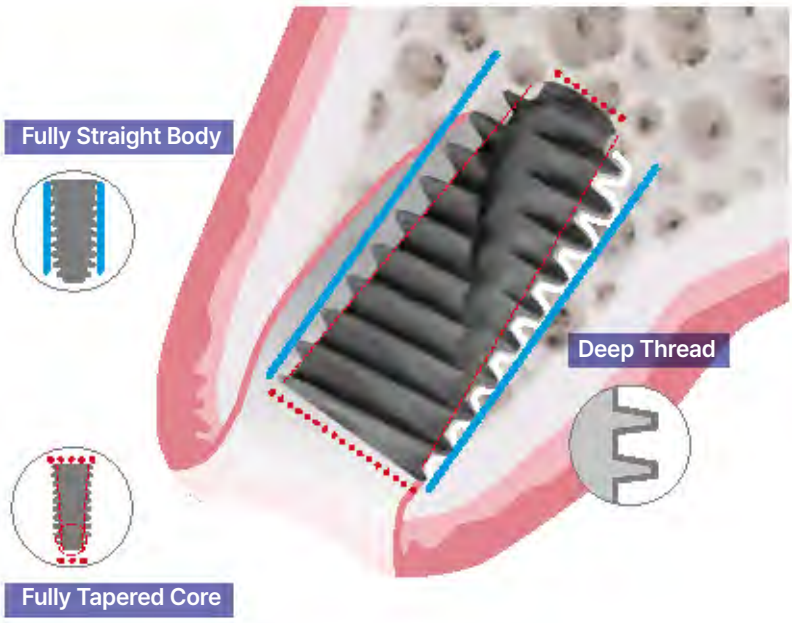
High Lateral Resistance **Low Lateral Resistance**

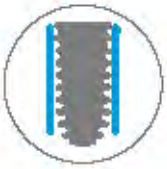
- Provides strong mechanical interlocking, controlling micromotion below the critical threshold.

→ Creates a stable environment for osseointegration, even under external loading from the tongue or food.

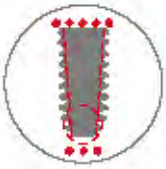
SICON Advantages

Advantage 3 **Outstanding Primary Stability for Immediate Placement in Extraction Sockets**





Fully Straight Body

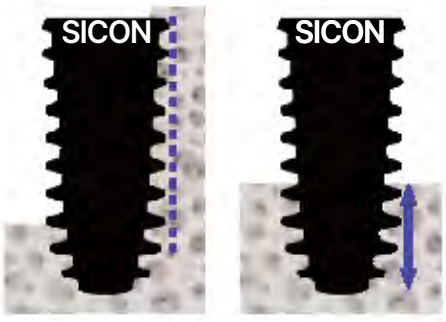


Fully Tapered Core



Deep Thread

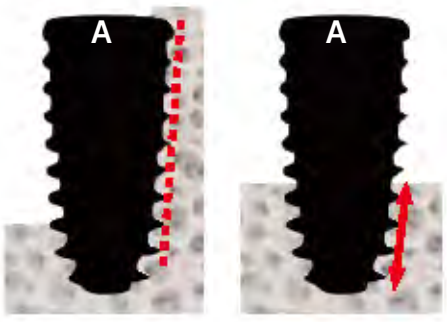
Thread design with progressively increasing depth toward the apex



- Maximizes engagement with available bone for enhanced fixation
- Deep threads increase the contact surface area by more than 30%

VS

Thread design with shallow and uniform depth



- Limited utilization of available bone
- Insufficient contact surface area due to shallow threads

→ Delivers outstanding stability and a favorable environment for osseointegration in immediate placement cases

Prosthetic Advantages

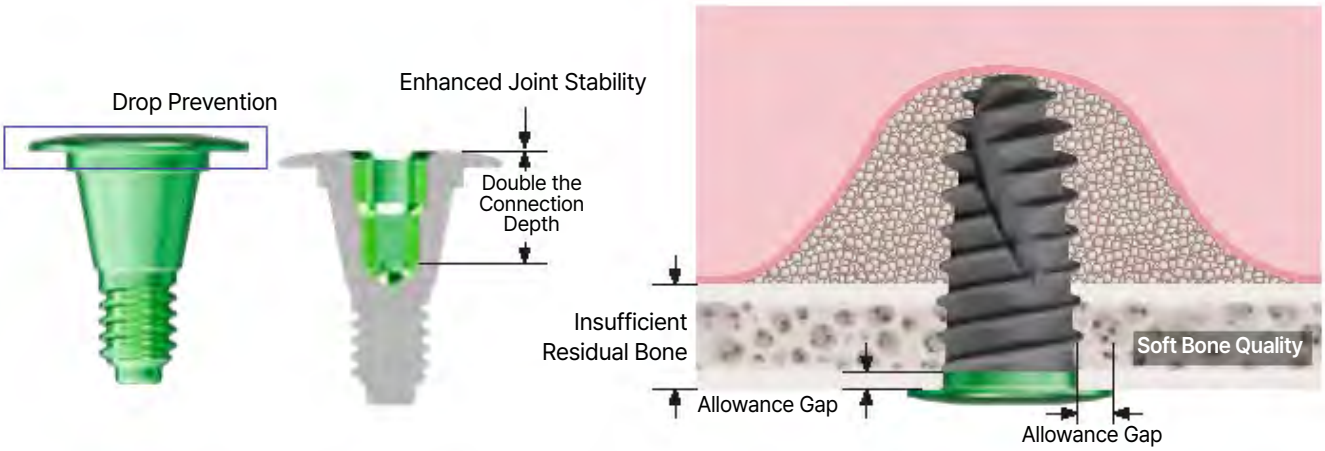
Sinus Safety Device : TORI 2.0 for Implant Drop Prevention

When residual bone is insufficient or bone quality is poor, making it difficult to achieve adequate primary stability.
Use TORI 2.0 instead of a cover screw.

* Recommended when the expected insertion torque is ≤10 Ncm:

First attach TORI 2.0 to the fixture inside the ampoule.
Then pick up the Fixture + TORI 2.0 assembly with a Hex Driver and insert it as a single unit.

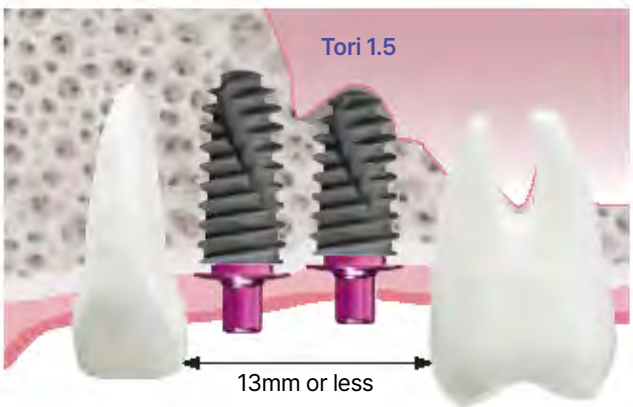
※ Caution : Placement Torque Exceeding 30 Ncm may cause wear on the hex connection. If this occurs, please remove the fixture using the Universal Fixture Removing Driver.



Smile Line : TORI 1.5 for Improved Soft Tissue Management

The narrow-diameter protruding design facilitates interdental papilla regeneration when horizontal space is limited in the smile zone.
Use TORI 1.5 before placing the Healing Abutment.





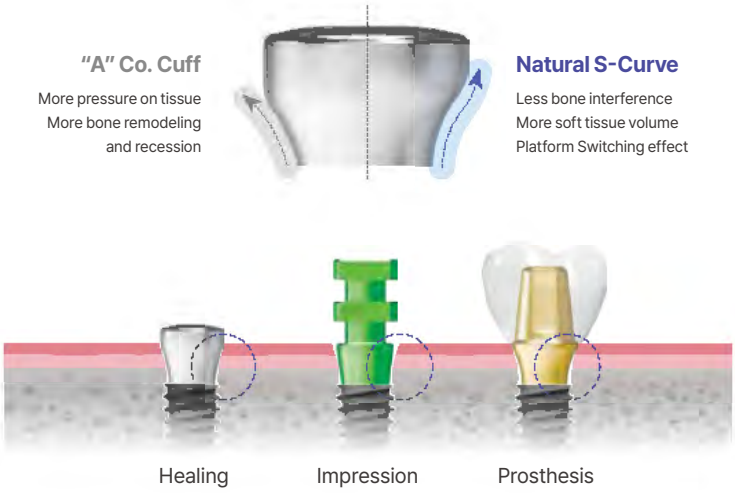
When primary closure cannot be achieved due to insufficient mesiodistal and buccolingual dimensions, use the narrow-diameter TORI 1.5 to facilitate soft tissue management.

Prosthetic Advantages

Consistent Cuff Design

System-wide Natural S-Curve design & minimal bone interference and gingival pressure

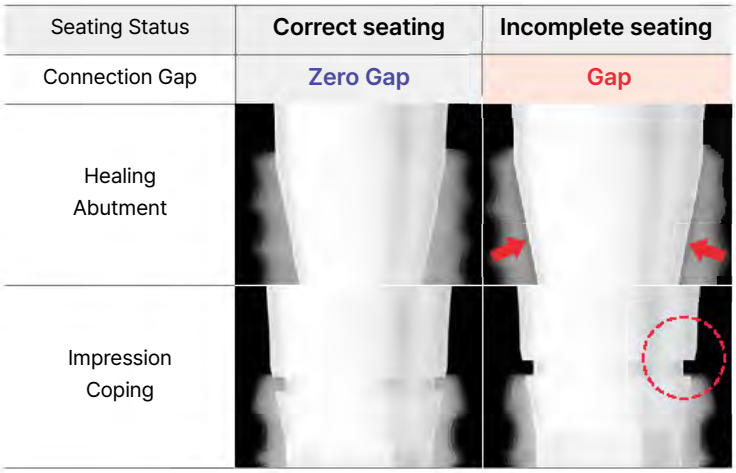
The Natural S-Curve design is applied throughout the entire system, from healing, impression taking, and prosthetic stages, to minimize bone interference and gingival pressure, contributing to the emergence profile of the prosthesis and the formation of healthy interdental papillae.



Intuitive Design

Intuitive Confirmation of Correct Connection

Thanks to its intuitive design with a distinct singularity point, complete or incomplete seating can be easily verified on X-rays.

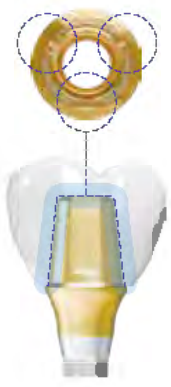


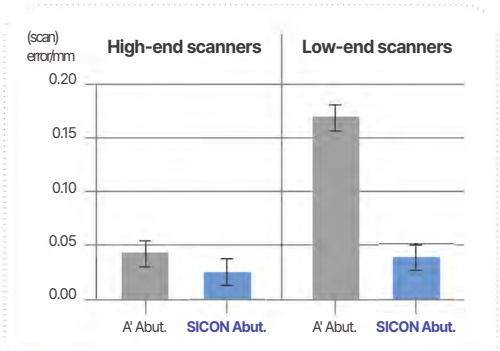
Detail Design

Optimized for Digital Prosthetics

Abutment geometry has been optimized to improve the accuracy of digital scanning and the fitness of zirconia prostheses.

Landmark Function During Scan Registration





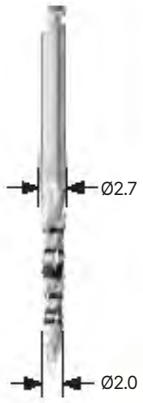
Data Accuracy of Direct Abutment Scan by Scanner Type

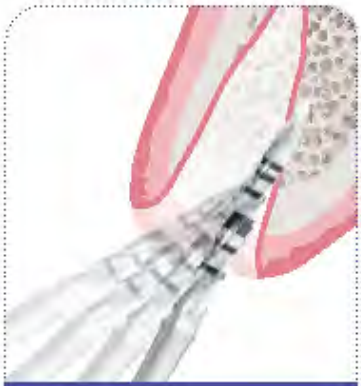
Kit & Tools Advantages

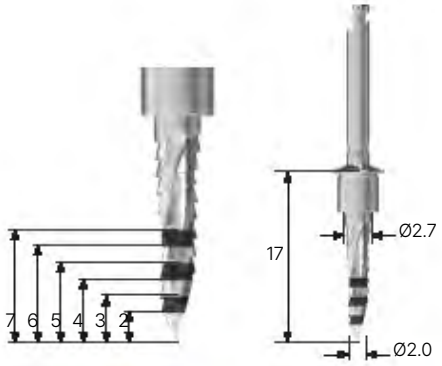
Multi Initial Drill

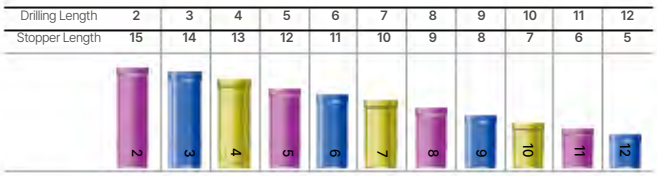
It provides highly accurate initial drilling in extraction sockets. With both point and side-cutting capabilities, it allows stable drilling even when the clinician drills as desired.

* Diameter: Designed to widen from Ø2.0 to Ø2.7




비틀고, 꺾는 수술 환경





Multi Initial ST Drill & Stopper

- Selectively use stoppers depending on the residual bone height.
- Color-coded by length and laser-marked for easy specification selection.

Positioning Bell
for Convenient Implant Placement and Spacing

For single, bridge and free-end multiple cases, the Positioning Bell can be used during initial drilling to simultaneously consider spacing from adjacent teeth and prosthesis dimensions. It can be applied to the Ø2.0 Tissue Punch, Position Drill, or Initial Check Pin depending on the intended use. Its irrigation-easy design minimizes the risk of bone heating during drill sequence.

	
Canine / Premolar	General use
Ø7.2	Ø8.0
	
Second molar	First molar
Ø9.0	Ø10.0
Made of biocompatible medical-grade silicone for safe insertion of drills or instruments	


Occlusion and prosthesis verification


Initial drilling

※UNICON Kit 7 Components


Flapless point use

※UNICON Kit 7 Components

Kit & Tools Advantages

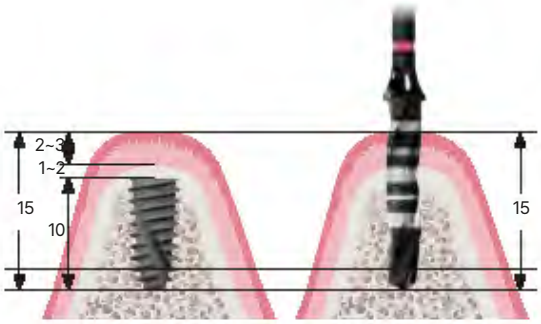
SICON Drill & Stopper

SICON Drill delivers excellent cutting performance in all bone qualities. Its detachable stopper design provides precise depth control while offering outstanding cost efficiency.
A specially designed drill that effectively cuts the cortical bone at the sinus floor while minimizing the risk of membrane damage upon contact.

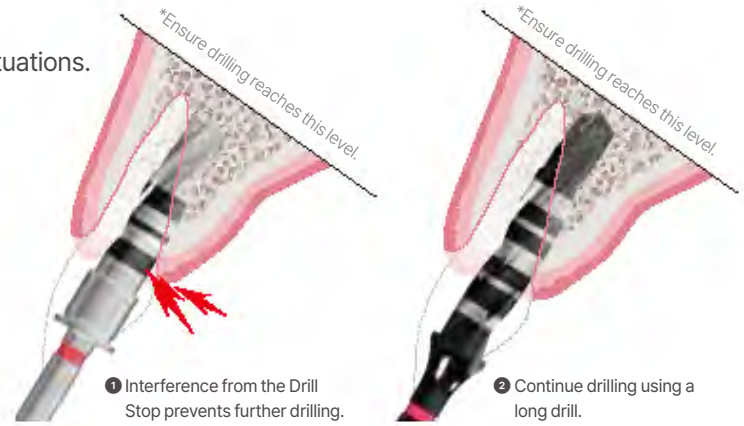


Implant Drill

Recommended for use in the following surgical situations.



When a long drill is required for flapless procedures



❶ Interference from the Drill Stop prevents further drilling.

❷ Continue drilling using a long drill.

When a long drill is required in extraction sockets

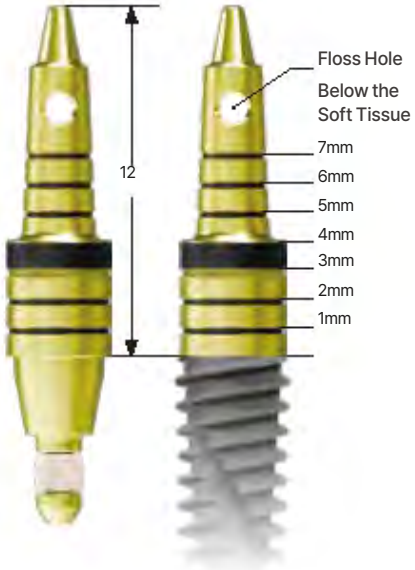
Final Check Pin

A final verification after implant placement is recommended.
Check and adjust the implant depth and prosthetic orientation as needed.

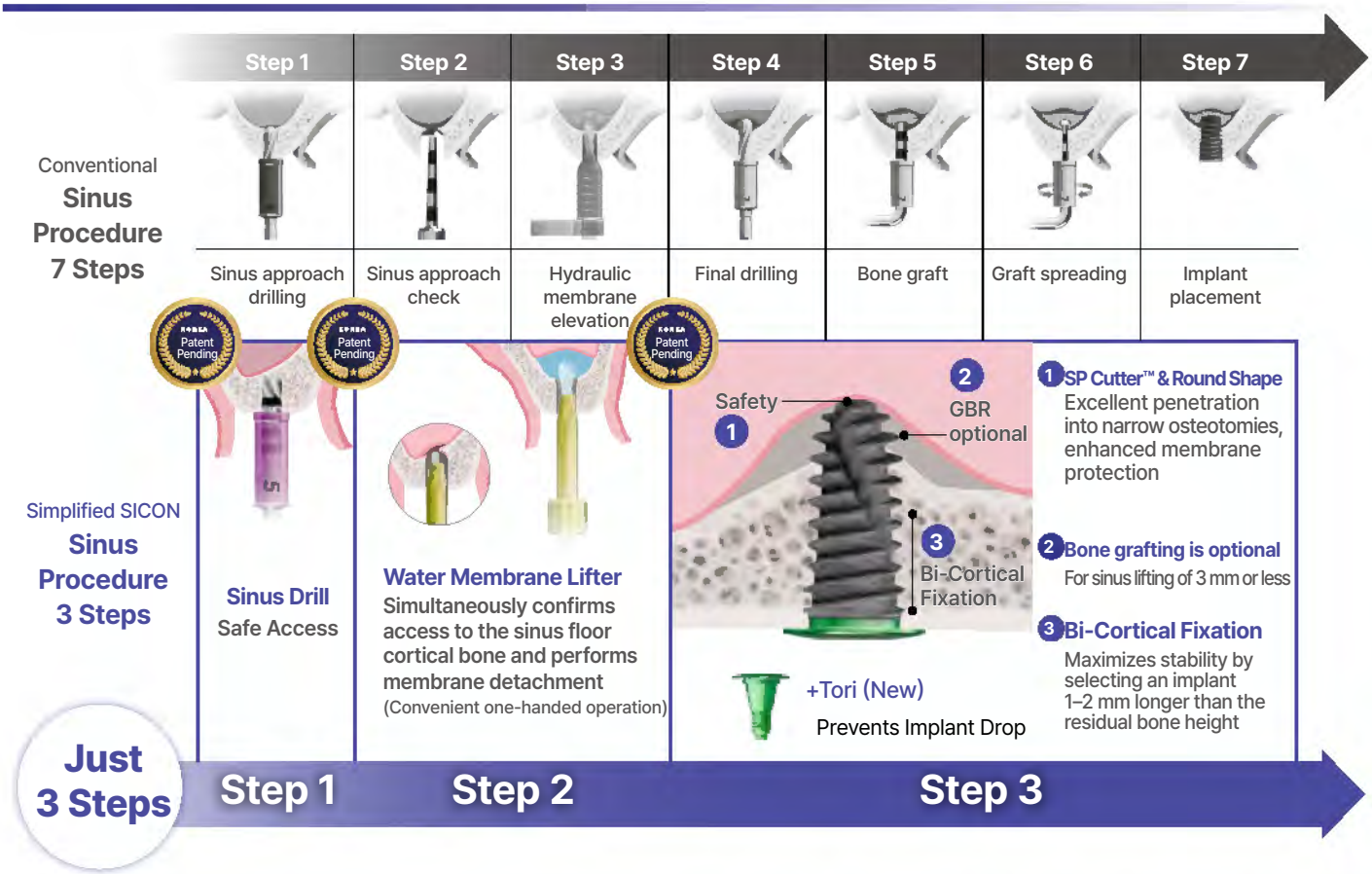


*Securely engages the fixture and remains firmly retained, even when turned upside down.

Occlusal Verification

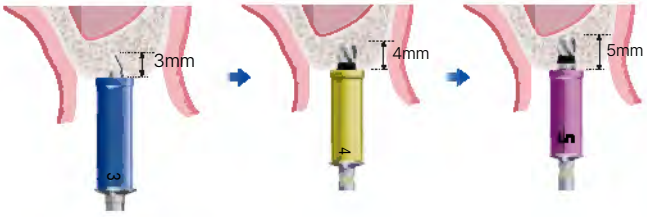


Sinus Lift Advantages



Step 1 Sinus approach drilling

- Multi Initial ST Drill:
  Drill using a stopper that is 2 mm shorter than the bone height measured from the sinus floor on the CT scan.
- Sinus Lift ST Drill :
  Sequentially enlarge the osteotomy by increasing the drill diameter and length one step at a time.
- 600~1,000rpm



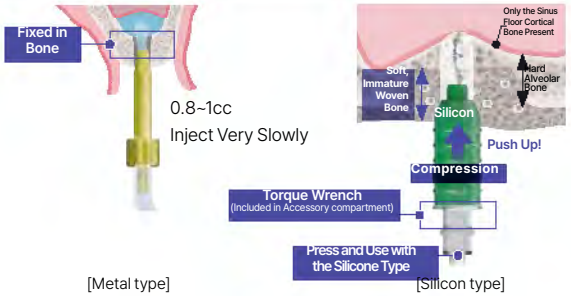
Multi Initial ST Drill Sinus Lift ST Drill

Step 2 Hydraulic membrane elevation

- Simultaneously confirms access to the sinus floor cortical bone and performs membrane lifting

  *Metal Type: For routine cases and immediate placement in extraction sockets (convenient one-handed operation)

  *Silicone Type: For early implant placement (approximately 1 month after extraction) in soft, immature woven bone



[Metal type] Water Membrane Lifter [Silicon type] Water Membrane Lifter

Step 3 Implant placement

- The SP Cutter™ design engages the sinus floor cortical bone for stable implant placement.
- For sinus lifting of 3 mm or less, bone grafting may be omitted at the clinician's discretion.
- For bi-cortical fixation, use an implant 1–2 mm longer than the residual bone height to achieve maximum primary stability.
- The TORI Series helps prevent implant drop during placement.



SICON Implant

Sinus Lift Advantages

Sinus Lift ST Drill

- A key tool for safe and convenient sinus membrane lifting.
- Enables completion of the sinus procedure with drilling and implant placement only.

Patent Pending



Half-round Tip

- Enhances safety when the drill edge contacts an inclined sinus floor and provides excellent cutting performance for bi-cortical fixation.

Flute & Chip Pocket Design

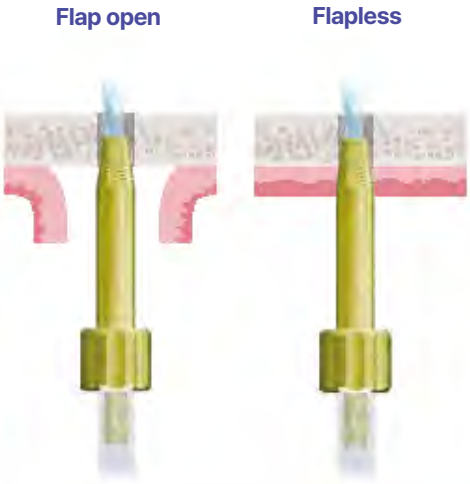
- Designed to efficiently direct bone chips toward the sinus membrane.

Depth Control

- Dedicated stoppers allow convenient 1 mm incremental depth control when approaching the sinus floor.

Water Membrane Lifter designed with the clinician's convenience in mind.

- Easily secured to the bone for freehand operation in both flap-open and flapless procedures.
- Simultaneously confirms sinus membrane access and performs membrane lifting.



Selection of Hydraulic Membrane Lifting Tips

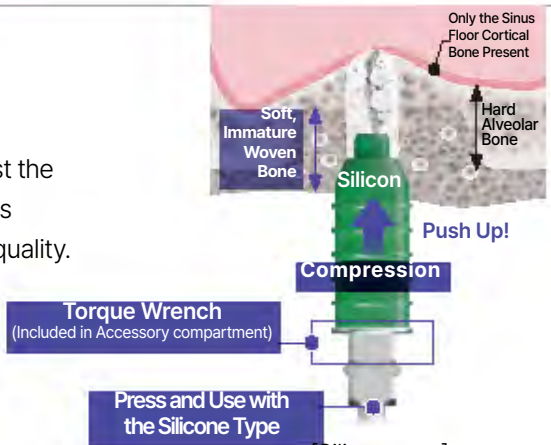
- Yellow for Ø2.8 / Ø3.2, Green for Ø3.6 / Ø4.1
- Select according to the diameter of the Sinus Drill.



[Ø2.8 or Ø3.2] [Ø3.6 or Ø4.1]

For Early Implant Placement (Approximately 1 Month After Extraction)

- The flexible silicone tip at the end of the nozzle seals tightly against the wall of the osteotomy, closing even microscopic gaps. This enables treatment in cases with soft, immature woven bone or poor bone quality.
- Simultaneously confirms sinus membrane access and performs membrane lifting.



[Silicon type]
Water Membrane Lifter

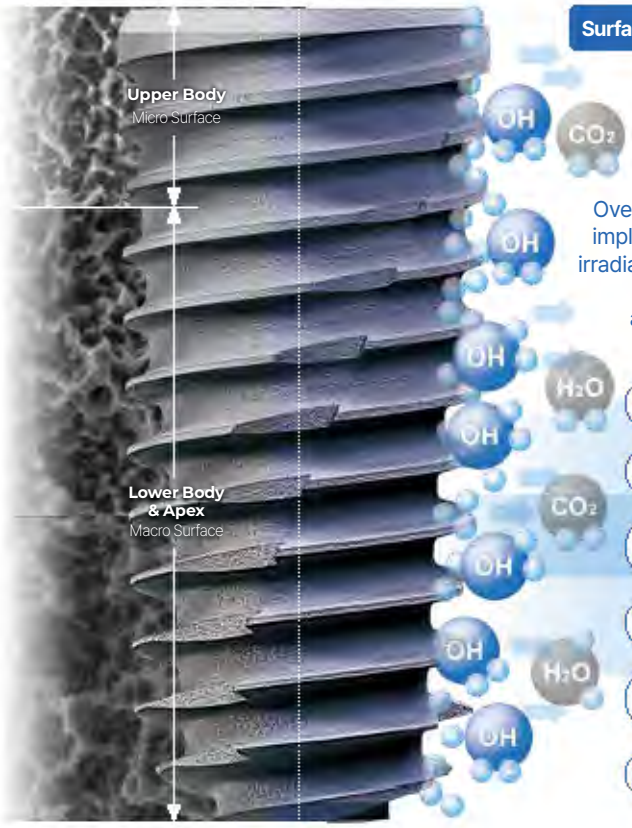
SICON Implant Surface

Hybrid type SLA Surface (HSA)

Optimal Surface Morphology

Implementation of **Micro Surface morphology on the upper part** to reduce peri-implantitis and **Macro Surface morphology on the lower part** to enhance the initial bone response

- Alumina Blasting
- Double Acid Etching
- High-Temperature and High-Pressure Water-jet
- 7-Step Vacuum Ultrasonic Cleaning
- UV Drying
- **High Purity Clean Surface**



Surface Modification by VUV Irradiation

Anti-aging Effect

Over 90% of organic matter on the implant surface with is removed by irradiating a vacuum UV(VUV) source, enabling rapid and strong bone formation.

- VUV Irradiation
- Hydrocarbon Removal
- Modification to Superhydrophilic Surface
- Electro-Positive
- Enhancement of Cell and Protein Adhesion
- **Rapid Osseointegration**

Patented Surface, HSA

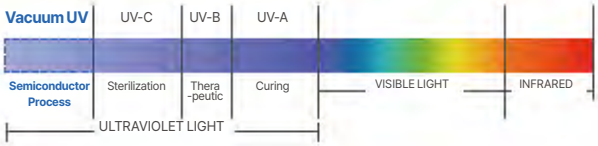
A distinctive level of surface roughness unique to DIO IMPLANT has been achieved through extensive research and experimentation based on sandblast large grit & acid etching (SLA).



*KOREA Patent No. 10-1652968

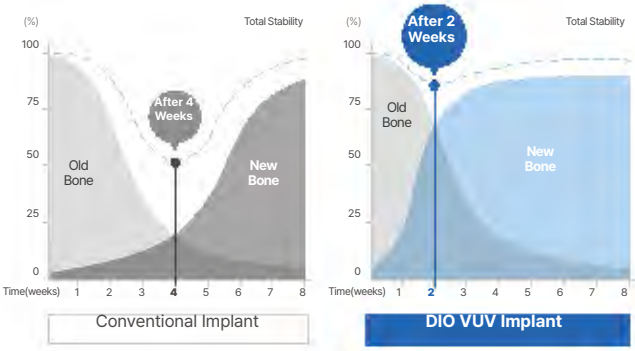
What Is VUV?

VUV is the highest-energy ultraviolet light used in semiconductor processes. DIO was the first to apply VUV to remove organic matter from the implant surface, and its effectiveness has been validated through joint research with UCLA, USA.



VUV, Healing Time in Half!

Fewer surface organics and higher blood absorbability ensure more stable bone-to–implant integration, shortening the treatment period.



*Source: Implant Dentistry, Volume 22, Nov 5, 2013, PhD Takahiro Ogawa et al.

SICON Implant

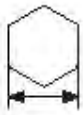
Fixture

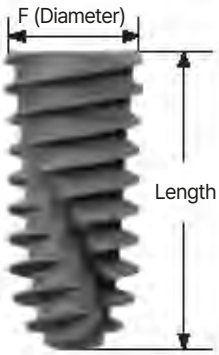
HSA / Packing Unit

- Fixture | Order Code : SCR 0000SF (ex : SCR 4010SF)
- Fixture + Cover Screw | Order code : SCR 0000S (ex : SCR 4010S)

VUV / Packing Unit * -Launch in the Second Half of 2026

- Fixture | Order Code : SCR 0000UV3 (ex : SCR 4010UV3)





R

F4.0 (Ø4.2)

Length	7	8.5	10	11.5	13
HSA	SCR **4007SF**	SCR **4008SF**	SCR **4010SF**	SCR **4011SF**	SCR **4013SF**
VUV	SCR **4007UV3**	SCR **4008UV3**	SCR **4010UV3**	SCR **4011UV3**	SCR **4013UV3**

R

F4.5 (Ø4.7)

Length	7	8.5	10	11.5	13
HSA	SCR **4507SF**	SCR **4508SF**	SCR **4510SF**	SCR **4511SF**	SCR **4513SF**
VUV	SCR **4507UV3**	SCR **4508UV3**	SCR **4510UV3**	SCR 4**511UV3**	SCR **4513UV3**

R

F5.0 (Ø5.1)

Length	7	8.5	10	11.5	13
HSA	SCR **5007SF**	SCR **5008SF**	SCR **5010SF**	SCR **5011SF**	SCR **5013SF**
VUV	SCR **5007UV3**	SCR **5008UV3**	SCR **5010UV3**	SCR 5011UV3	SCR **5013UV3**

R

F5.5 (Ø5.5)

Length	7	8.5	10	11.5	13
HSA	SCR **5507SF**	SCR **5508SF**	SCR **5510SF**	SCR **5511SF**	SCR **5513SF**
VUV	SCR **5507UV3**	SCR **5508UV3**	SCR **5510UV3**	SCR **5511UV3**	SCR **5513UV3**

Components

TORI

❶ Remove any blood or debris from the implant hex before use.
❷ Hand-tighten using a 1.2 Hex Driver (5–8 Ncm).



Diameter	**Ø5.5**
Cuff	-
Model Name	TORI 20



Diameter	**Ø5.5**(Ø2.3)
Cuff	**3.0**
Model Name	TORI 15

SICON Surgical KIT (SCSK 01)

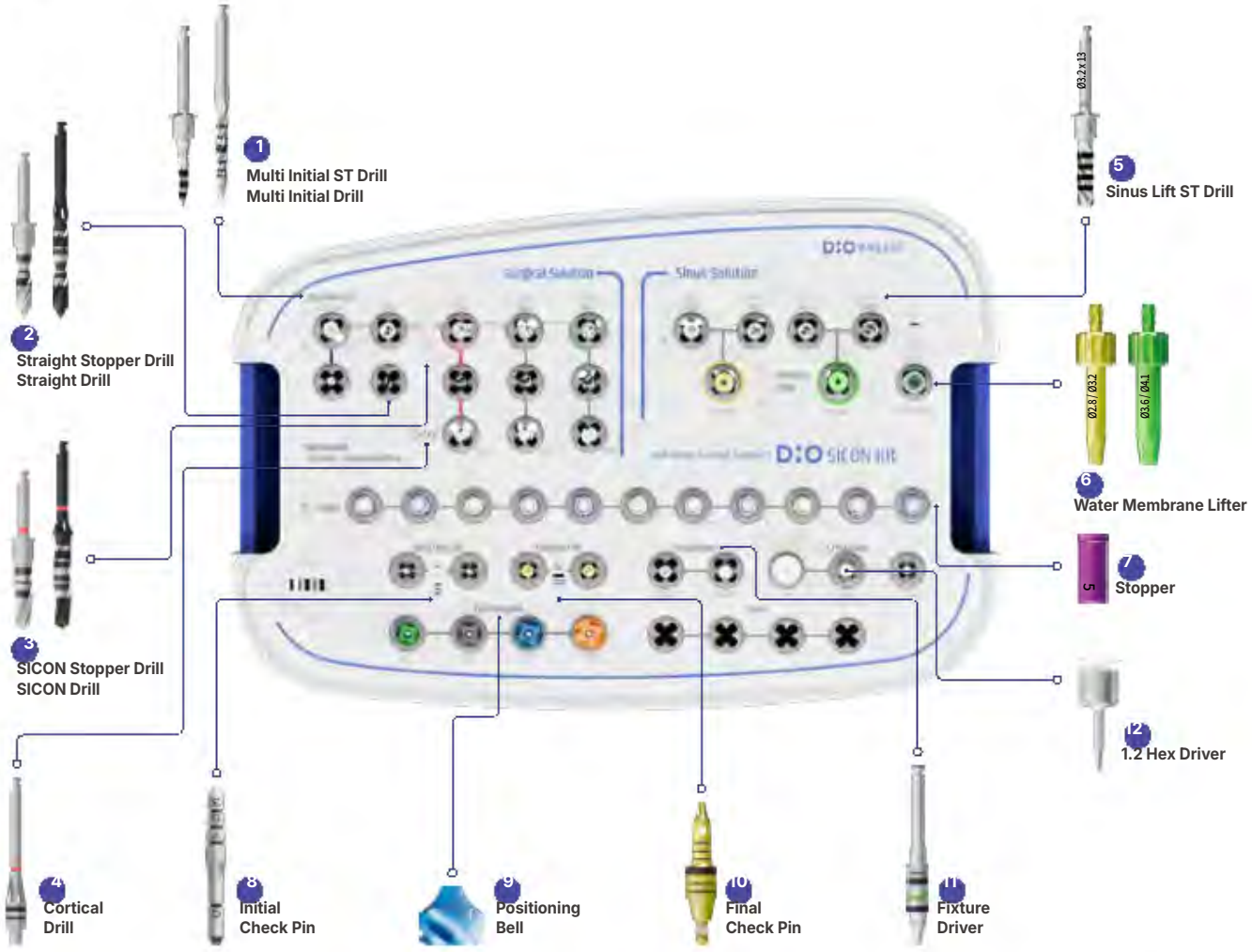
Surgical Kit Optimized for Soft Bone Implant Placement and Crestal Approach Sinus Lifting

Surgical Solution

1. Smart Position System enables preoperative consideration of implant spacing and prosthetic restoration.
2. Multi-step drill design provides excellent cutting performance, while the Drill Stop allows precise depth control.

Sinus Solution

1. Sinus Lift Drill with a Half-Round Tip design delivers excellent cutting performance for bi-cortical fixation.
2. Safe and convenient sinus membrane lifting using the Water Membrane Lifter.



Accessory Compartment



13 **Sinus Membrane Detach Tool**

SMDT 01



14 **Torque Wrench**

DTW 0080



15 **Double Depth Gauge**

DDG 1506



16 **Saline Tube**

MLT 40300

*Disposable

SICON Surgical KIT (SCSK 01)



1 Multi Initial Drill

- Excellent point penetration and side-cutting performance
- Used for creating the initial drilling hole or correcting the drilling direction.



2 Straight Drill

- Used to enlarge the initial drilling hole in both depth and diameter.



3 SICON Drill

- Used to prepare the osteotomy for implant placement.
- Multi-step drill.



4 Cortical Drill

- Used for cortical bone reduction in hard bone.



5 Sinus Lift ST Drill

- Dedicated sinus drill designed to push bone chips in the cutting direction.
- Half-Round Tip design enables safe sinus membrane lifting.
- Used with a stopper corresponding to the residual bone height.



6 Water Membrane Lifter

- Hydraulic membrane lifting tool.
- Secured by screwing clockwise into the drilled hole (Metal Type).
- Secured by compression into the drilled hole (Silicon type)



7 Stopper

- Used with the ST Drill for depth control.
- Laser markings indicate the exposed drill length when the stopper is attached



8 Initial Check Pin

- Inserted into the initial drilling hole to verify the drilling direction and its relationship to the opposing dentition



9 Positioning Bell

- Used to estimate the distance from adjacent teeth during initial drilling.
- Compatible with the Ø2.0 Tissue Punch, Position Drill, and Initial Check Pin.
- Designed for efficient irrigation.



10 Final Check Pin

- Attached to the placed fixture to verify implant depth, angulation, soft tissue thickness, and the relationship to the opposing dentition.



11 Fixture Driver

- Can be inserted up to 7 mm below the soft tissue, depending on soft tissue thickness.
- Improved fixture engagement strength for enhanced torque transmission.



12 1.2 Hex Driver

- Used for tightening screws and abutments with a 1.2 Hex connection.

13 Sinus Membrane Detach Tool

- Used for sinus membrane detachment through the crestal approach.
- Features a slim, rounded tip design.

*Accessory Compartment



14 Torque Wrench

- Used for tightening fixtures, abutments, and screws.
- Torque can be verified using the calibrated scale.

*Accessory Compartment



15 Double Depth Gauge

- 드릴Used to measure the depth of the drilling hole.
- Also used to assess pocket depth or internal bone morphology.

*Accessory Compartment

16 Saline Tube

- Connects the Water Membrane Lifter to the syringe.

*Accessory Compartment

*Syringe sold separately.

SICON Fixture Drilling Sequence (SICON KIT, Surgical Solution)

F4.0 Fixture

RPM	800 ~ 1,500				20
Stopper		10mm	10mm	10mm	
Diameter	Ø2.0	Ø3.0	F4.0(Φ3.6)	F4.0(Φ4.1)	F4.0
Tool	Multi Initial Drill	Straight Stopper Drill	SICON Stopper Drill	Cortical Drill	Fixture



Soft	▶	▶			●
Medium	▶	▶	▶		●
Hard	▶	▶	▶	▶	●

F4.5 Fixture

RPM	800 ~ 1,500					20
Stopper		10mm	10mm	10mm		
Diameter	Ø2.0	Ø3.0	F4.0(Φ3.6)	F4.5(Φ3.8)	F4.5(Φ4.6)	F4.5
Tool	Multi Initial Drill	Straight Stopper Drill	SICON Stopper Drill	SICON Stopper Drill	Cortical Drill	Fixture



Soft	▶	▶	▶			●
Medium	▶	▶	▶	▶		●
Hard	▶	▶	▶	▶	▶	●

F5.0 Fixture

RPM	800 ~ 1,500						20
Stopper		10mm	10mm	10mm	10mm		
Diameter	Ø2.0	Ø3.0	F4.0(Φ3.6)	F4.5(Φ3.8)	F5.0(Φ4.2)	F5.0(Φ5.0)	F5.0
Tool	Multi Initial Drill	Straight Stopper Drill	SICON Stopper Drill	SICON Stopper Drill	SICON Stopper Drill	Cortical Drill	Fixture



Soft	▶	▶	▶	▶			●
Medium	▶	▶	▶		▶		●
Hard	▶	▶	▶		▶	▶	●

F5.5 Fixture

RPM	800 ~ 1,500						20
Stopper		10mm	10mm	10mm			
Diameter	Ø2.0	Ø3.0	F4.0(Φ3.6)	F5.0(Φ4.2)	F5.5(Φ4.7)(별매품)	F5.5(Φ5.4)(별매품)	F5.5
Tool	Multi Initial Drill	Straight Stopper Drill	SICON Stopper Drill	SICON Stopper Drill	SICON Drill	Cortical Drill	Fixture



Soft	▶	▶	▶	▶			●
Medium	▶	▶	▶	▶	▶		●
Hard	▶	▶	▶	▶	▶	▶	●

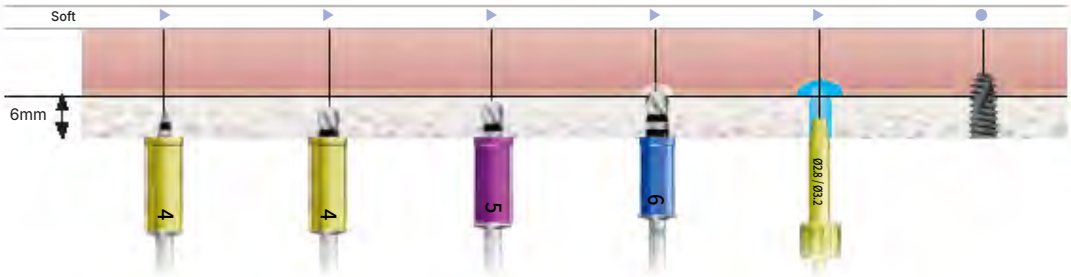
SICON Fixture Drilling Sequence (SICON KIT, Sinus Solution)

F4.0
Fixture



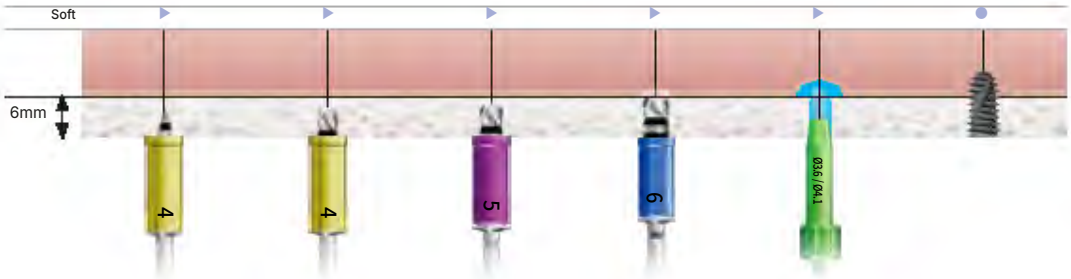
Tool	Multi Initial ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Water Membrane Lifter (detach)	Fixture
Diameter	Ø2.0	F4.0(Φ2.8)	F4.0(Φ2.8)	F4.0(Φ2.8)	Ø2.8 / Ø3.2	F4.0
Stopper	4mm	4mm	5mm	6mm		
RPM			600 ~ 1,000			20

F4.5
Fixture



Tool	Multi Initial ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Water Membrane Lifter (detach)	Fixture
Diameter	Ø2.0	F4.0(Φ2.8)	F4.0(Φ2.8)	F4.5(Φ3.2)	Ø2.8 / Ø3.2	F4.5
Stopper	4mm	4mm	5mm	6mm		
RPM			600 ~ 1,000			20

F5.0
Fixture



Tool	Multi Initial ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Water Membrane Lifter (detach)	Fixture
Diameter	Ø2.0	F4.0(Φ2.8)	F4.5(Φ3.2)	F5.0(Φ3.6)	Ø3.6 / Ø4.1	F5.0
Stopper	4mm	4mm	5mm	6mm		
RPM			600 ~ 1,000			20

F5.5
Fixture



Tool	Multi Initial ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Sinus Lift ST Drill	Water Membrane Lifter (detach)	Fixture
Diameter	Ø2.0	F4.0(Φ2.8)	F4.5(Φ3.2)	F5.0(Φ3.6)	F5.5(Φ4.1)	Ø3.6 / Ø4.1	F5.5
Stopper	4mm	4mm	4mm	5mm	6mm		
RPM				600 ~ 1,000			20

UNICON Kit 7 (UK 07)

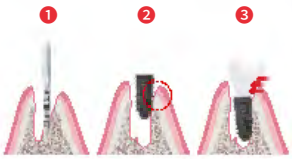
SICON can also be placed using the UNICON Kit 7

- Smart Position System allows preoperative consideration of implant spacing and prosthetic restoration.
- Taper design provides excellent cutting performance, while the integrated Drill Stop allows convenient depth control.
- Flow-line design arranged from left to right follows the surgical workflow.

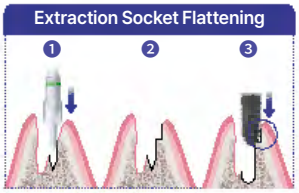


Pre-bone Flattening Drill

Even with accurate initial drilling in the extraction socket, the implant may shift toward the gap during placement. The pre-bone flattening drill allows implants to be placed in the correct position.



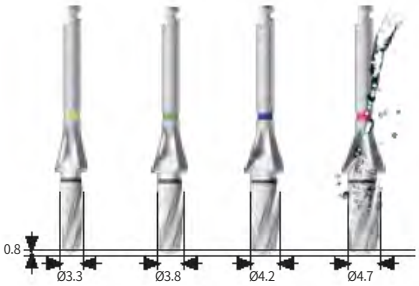
❶ Initial drilling hole only
❷ Unstable fixture placement
❸ Drifts toward the gap when entering an inclined surface



❶ Extraction Socket Flattening Drill along the initial drilling hole
❷ Flattening (prep.)
❸ Stable placement without drifting

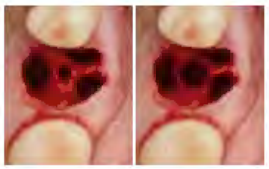
Taper Drill for Implant Placement

UNICON Taper Drill delivers excellent cutting performance in all bone qualities, and its integrated Drill Stop allows convenient depth control.
The streamlined drill body directs irrigation more effectively into the drilling hole, reducing the risk of bone heating.



Modify Bur for Ridge Adjustment or Post-initial Drilling Expansion

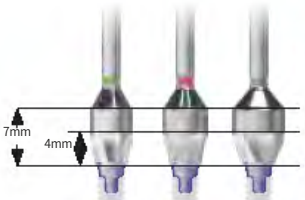
* Prevents displacement of cortical bone in the septum

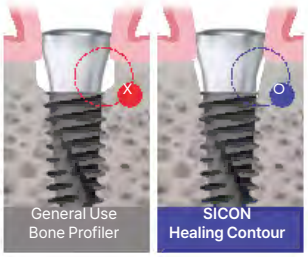




❶ High-speed ridge preparation
❷ Stable and smooth drilling without shifting

Healing Contour Removal of interfering bone during prosthetic connection



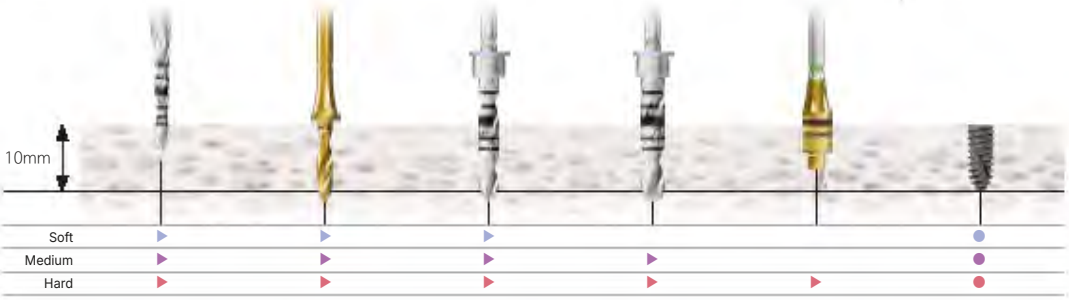


SICON Fixture Drilling Sequence (UNICON Kit 7)

*Staight Drill 사용

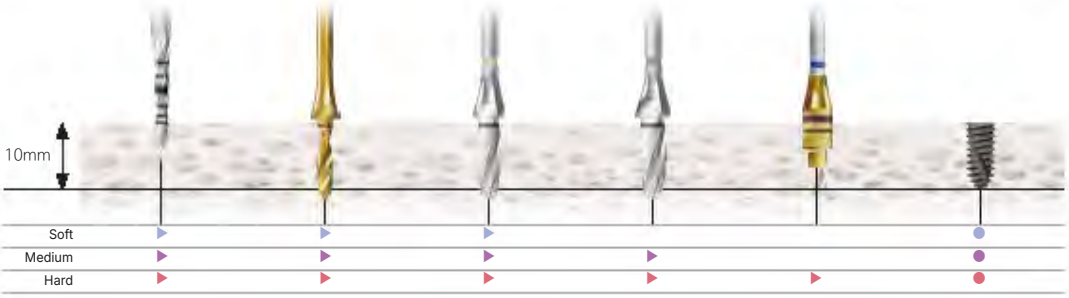
F4.0
Fixture

RPM	800 ~ 1,500					20
	-	Ø2.2	Ø3.0	Ø3.6	F4.0(Φ4.1)	F4.0
Tool	**Multi Initial Drill**	**Straight Drill**	**Straight Drill**	**Straight Drill**	**Cortical Drill**	**Fixture**



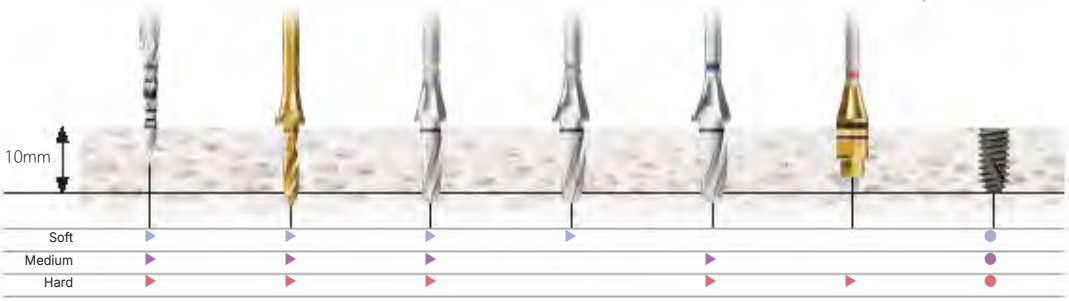
F4.5
Fixture

RPM	800 ~ 1,500					20
	-	Ø2.2	F3.5(Φ3.3)	F4.0(Φ3.8)	F4.5(Φ4.6)	F4.5
Tool	**Multi Initial Drill**	**Straight Drill**	**Taper Drill**	**Taper Drill**	**Cortical Drill**	**Fixture**



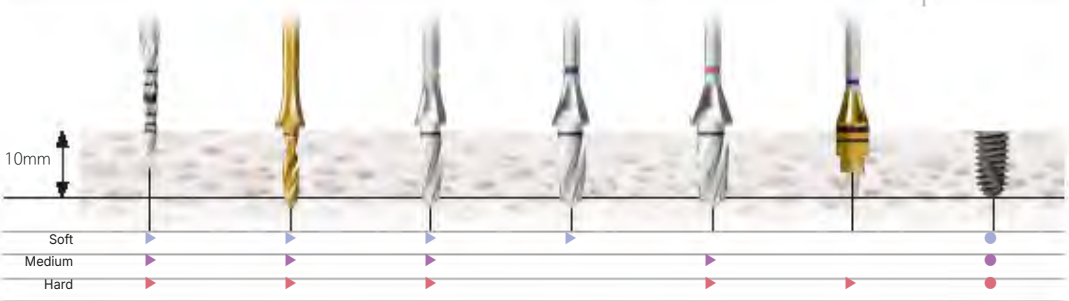
F5.0
Fixture

RPM	800 ~ 1,500						20
	-	Ø2.2	F3.5(Φ3.3)	F4.0(Φ3.8)	F4.5(Φ4.2)	F5.0(Φ5.0)	F5.0
Tool	**Multi Initial Drill**	**Straight Drill**	**Taper Drill**	**Taper Drill**	**Taper Drill**	**Cortical Drill**	**Fixture**



F5.5
Fixture

RPM	800 ~ 1,500						20
	-	Ø2.2	F3.5(Φ3.3)	F4.5(Φ4.2)	F5.0(Φ4.7)	F5.5(Φ5.4)(별매품)	F5.5
Tool	**Multi Initial Drill**	**Straight Drill**	**Taper Drill**	**Taper Drill**	**Taper Drill**	**Cortical Drill**	**Fixture**



Sinus Drill Kit (SKDS 01)

Dedicated Kit for Crestal Sinus Lifting

- Includes Stop Drills corresponding to the residual bone height.
- For sinus lifting of 3 mm or less, safe and efficient membrane lifting can be performed using the drills only.
- For 4 mm or greater, or when extensive membrane lifting is required, the hydraulic membrane lifting tool enables a simple and convenient procedure.



Sinus Expansion Drill

SED 2503 SED 2504
SED 2505 SED 2506
SED 2507 SED 2508
SED 2510



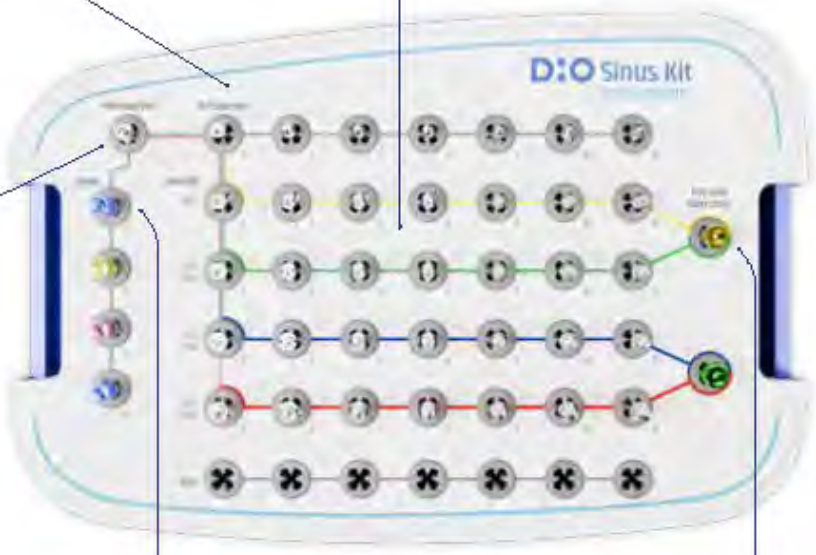
Sinus Lift Drill

SLD 2803 SLD 2804 SLD 2805 SLD 2806 SLD 2807 SLD 2808 SLD 2810
SLD 3203 SLD 3204 SLD 3205 SLD 3206 SLD 3207 SLD 3208 SLD 3210
SLD 3603 SLD 3604 SLD 3605 SLD 3606 SLD 3607 SLD 3608 SLD 3610
SLD 4103 SLD 4104 SLD 4105 SLD 4106 SLD 4107 SLD 4108 SLD 4110



Multi Initial ST Drill

MISD 2027



Stopper



NST 03BL NST 04YE NST 05RD NST 06BL



Water Membrane Lifter

WML 2637 WML 3446

Sinus Membrane Detach Tool

SMDT 01



Saline Tube

MLT 40300



Depth Gauge

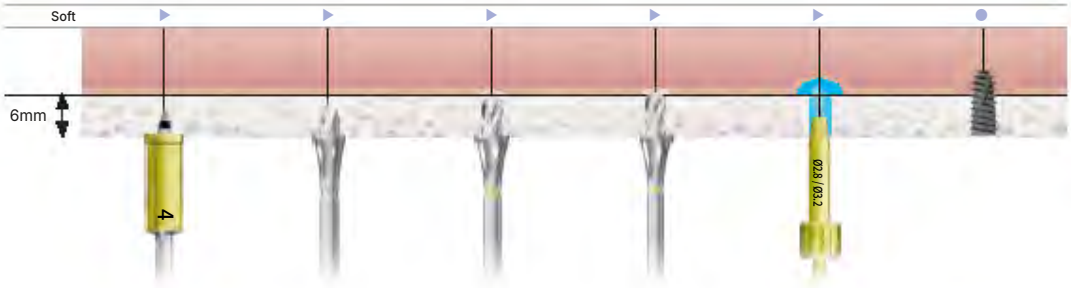
DPG 2050



*Bottom Panel Components

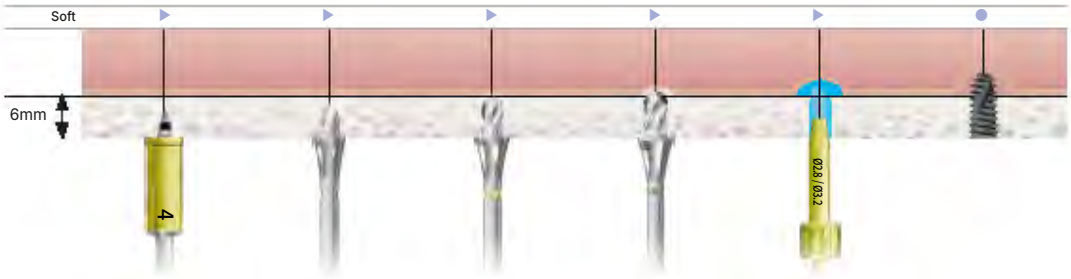
SICON Fixture Drilling Sequence (Sinus Drill Kit)

F4.0
Fixture



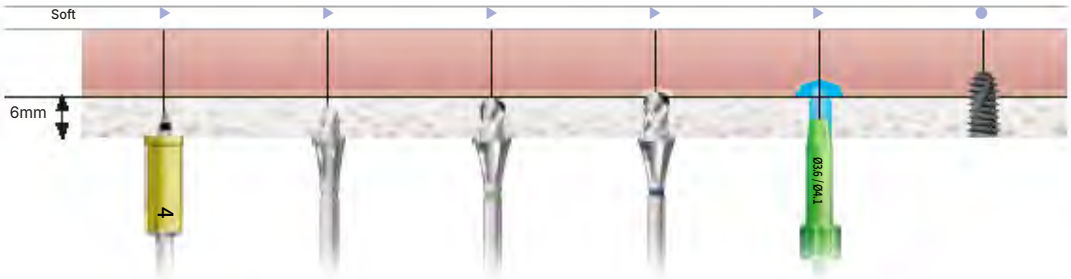
Tool	Multi Initial ST Drill	Sinus Expansion Drill	Sinus Lift Drill	Sinus Lift Drill	Water Membrane Lifter (detach)	Fixture
Diameter	Ø2.0	Φ2.5 x 4mm	Ø2.8 x 5mm	Ø2.8 x 6mm	Ø2.8 / Ø3.2	F4.0
Stopper	4mm					
RPM			600 ~ 1,000			20

F4.5
Fixture



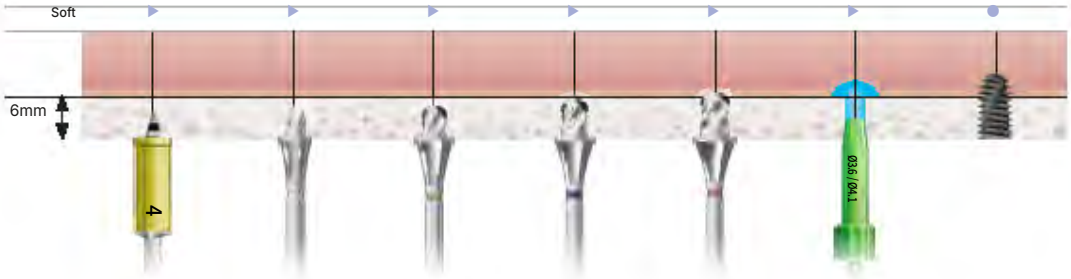
Tool	Multi Initial ST Drill	Sinus Expansion Drill	Sinus Lift Drill	Sinus Lift Drill	Water Membrane Lifter (detach)	Fixture
Diameter	Ø2.0	Φ2.5 x 4mm	Ø2.8 x 5mm	Ø3.2 x 6mm	Ø2.8 / Ø3.2	F4.5
Stopper	4mm					
RPM			600 ~ 1,000			20

F5.0
Fixture



Tool	Multi Initial ST Drill	Sinus Expansion Drill	Sinus Lift Drill	Sinus Lift Drill	Water Membrane Lifter (detach)	Fixture
Diameter	Ø2.0	Φ2.5 x 4mm	Ø3.2 x 5mm	Ø3.6 x 6mm	Ø3.6 / Ø4.1	F5.0
Stopper	4mm					
RPM			600 ~ 1,000			20

F5.5
Fixture



Tool	Multi Initial ST Drill	Sinus Expansion Drill	Sinus Lift Drill	Sinus Lift Drill	Sinus Lift Drill	Water Membrane Lifter (detach)	Fixture
Diameter	Ø2.0	Φ2.5 x 4mm	Ø3.2 x 4mm	Ø3.6 x 5mm	Ø4.1 x 6mm	Ø3.6 / Ø4.1	F5.5
Stopper	4mm						
RPM				600 ~ 1,000			20

SICON Clinical Case

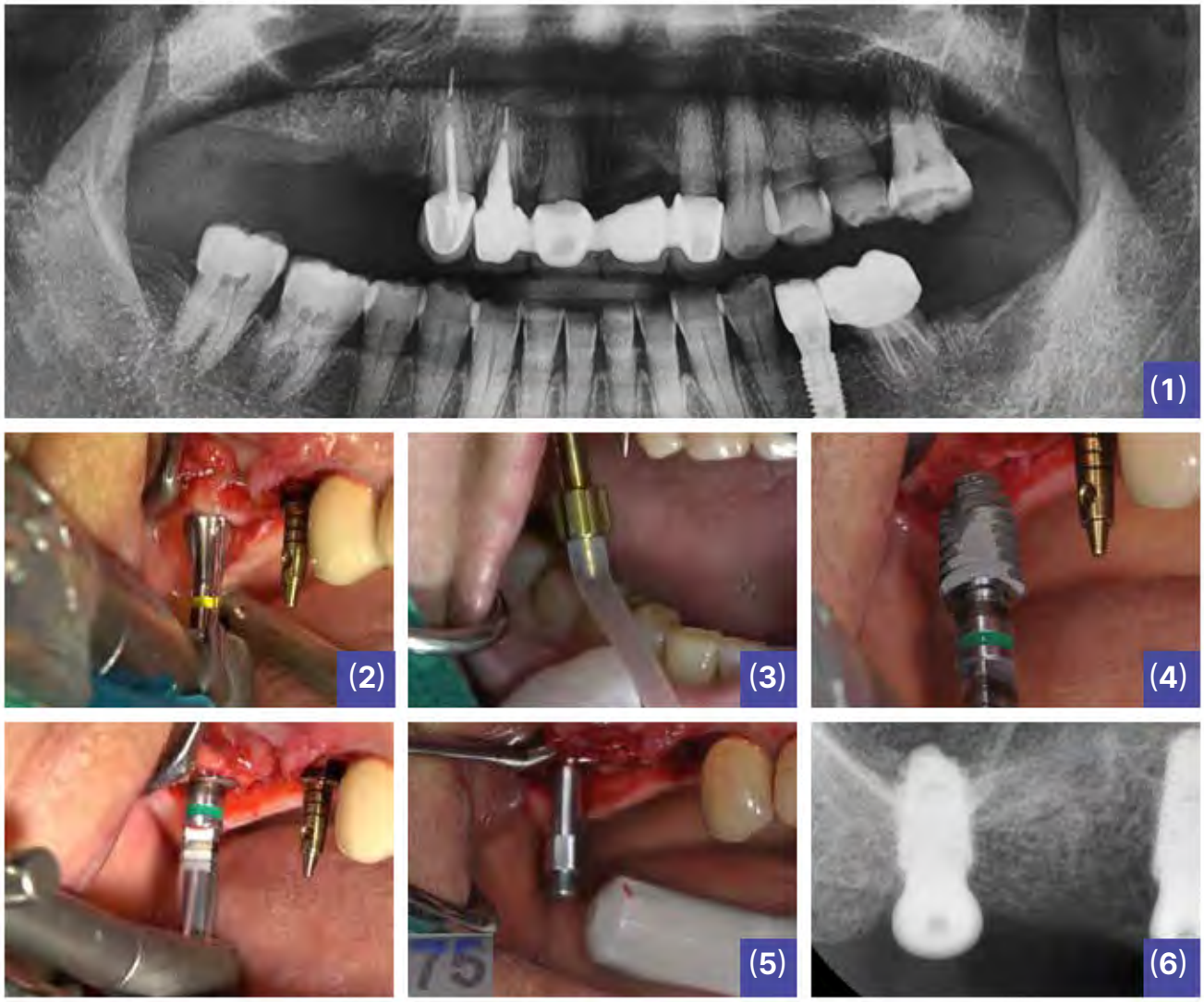
Jaeseok Kang, DDS, MSD, Ph.D

Case No. 01

Sinus | Soft bone | Immediate

[Sinus Lift #17] SICON placement (RBH ≤ 6mm, No bone grafting)

This case demonstrates a crestal approach hydraulic sinus lifting procedure for #17 with a 6 mm residual bone height adjacent to the maxillary sinus, followed by placement of a SICON implant (Ø5.0 × 8.5 mm, VUV) and completion with a Healing Abutment.



(1) Residual bone height at #17: 6 mm

(2) Access the sinus floor and establish communication using the Sinus Lift Drill

(3) Secure the Water Membrane Lifter into the osteotomy by screwing it into place, then perform hydraulic membrane lifting.

(4) Place the SICON implant (Ø5.0 × 8.5 mm, VUV)

(5) ISQ value: 75

(6) Postoperative panoramic X-ray

SICON Clinical Case

Jaeseok Kang, DDS, MSD, Ph.D

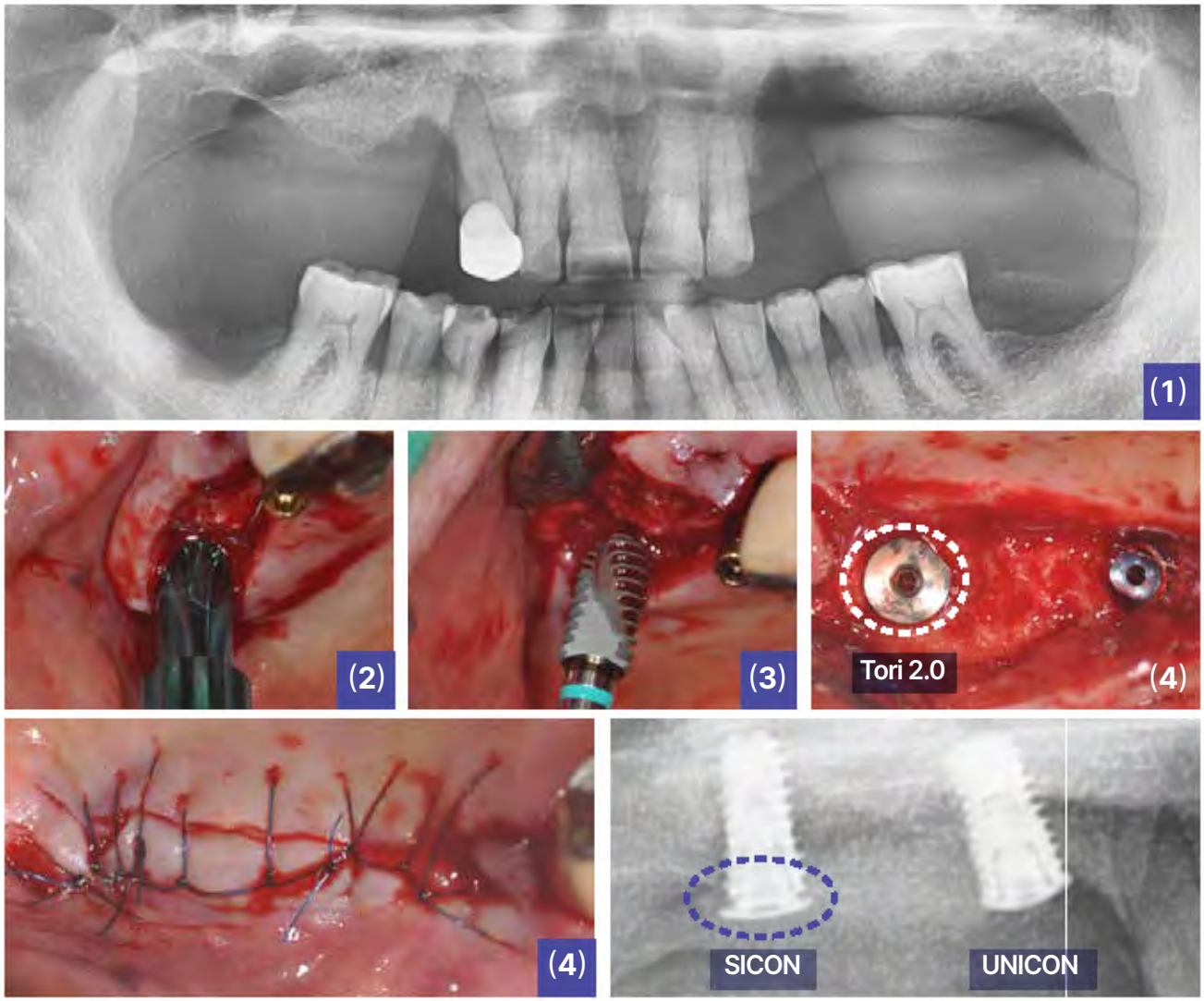
Case No. 02

Sinus | Soft bone | Immediate

[Sinus Lift #17] SICON placement & Tori 2.0 (RBH ≤ 1mm)

[Sinus Lift #15] UNICON placement (RBH ≤ 3mm)

This case demonstrates a crestal approach hydraulic sinus lifting procedure in a posterior region adjacent to the maxillary sinus with a residual bone height of 3 mm or less, followed by placement of a SICON implant (Ø5.0 × 10 mm, VUV) and completion with TORI 2.0



(1) Residual bone height at #17: ≤3 mm

(2) Secure the Water Membrane Lifter into the osteotomy by screwing it into place, then perform hydraulic sinus membrane lifting.

(3) At #17, place a SICON implant (Ø5.0 × 10 mm, VUV) and attach TORI 2.0 to prevent implant drop into the maxillary sinus. At #15, place a UNICON implant (Ø5.0 × 10 mm, VUV) and attach a Cover Screw.

(4) Suturing

SICON Clinical Case

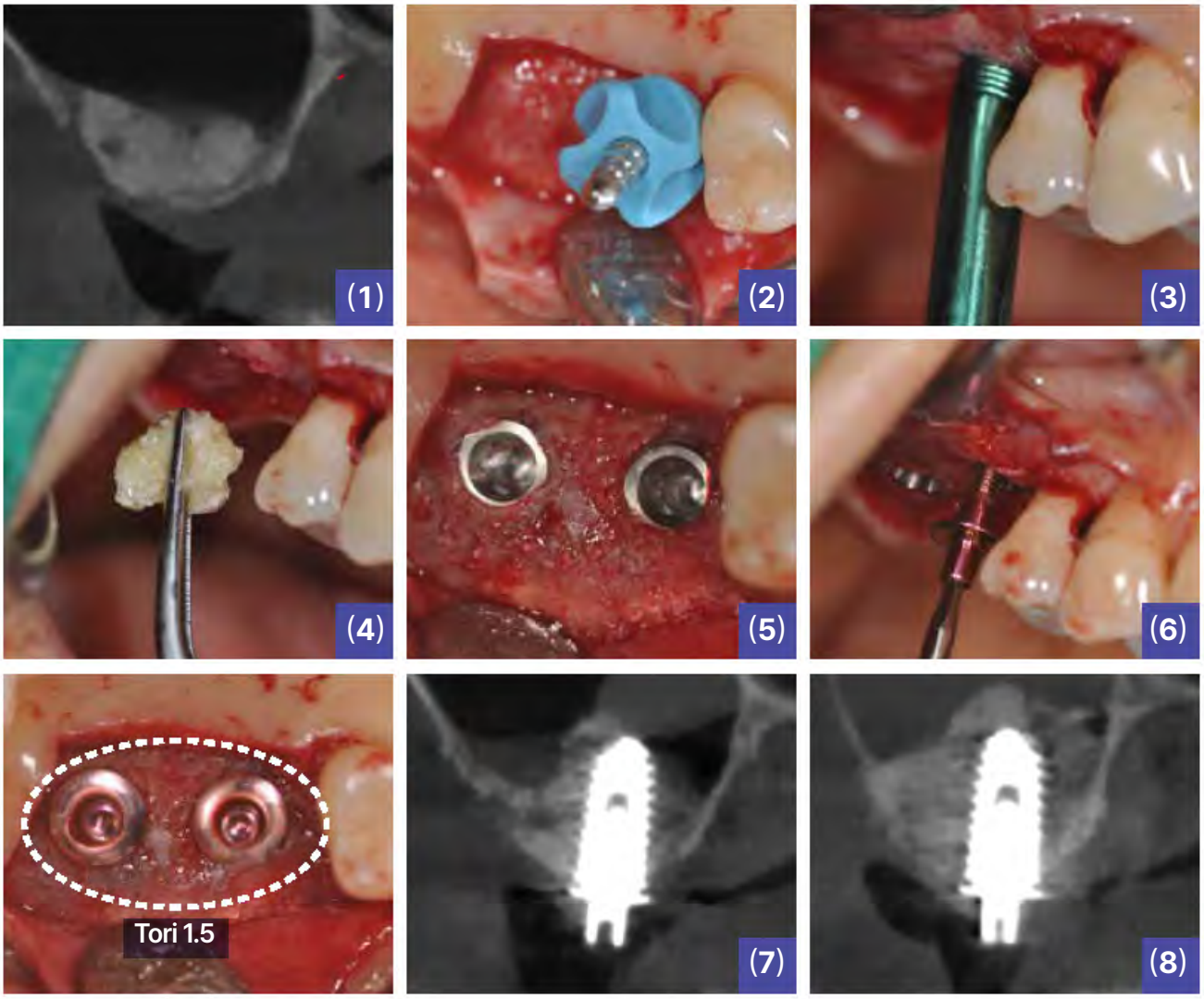
Jaeseok Kang, DDS, MSD, Ph.D

Case No. 03

Sinus | Soft bone | Immediate

[Sinus Lift #26, 27] SICON placement & Tori 1.5

This case demonstrates a crestal approach hydraulic sinus lifting procedure in the maxillary left posterior region (#26 and #27) adjacent to the maxillary sinus, followed by bone grafting, placement of SICON implants (Ø5.0 × 10 mm, VUV), and completion with TORI



(1) Preoperative CBCT

(2) Verify the drilling direction and the relationship to adjacent teeth using the Positioning Bell and Initial Check Pin.

(3) Secure the Water Membrane Lifter into the osteotomy by screwing it into place, then perform hydraulic sinus membrane lifting.

(4) Bone graft

(5) Place the SICON implant (Ø5.0 × 10 mm, VUV).

(6) Tighten TORI 1.5 using a 1.2 Hex Driver

(7) Immediate postoperative CBCT of #26

(8) IMMEDIATE POSTOPERATIVE CBCT OF #27

SICON Clinical Case

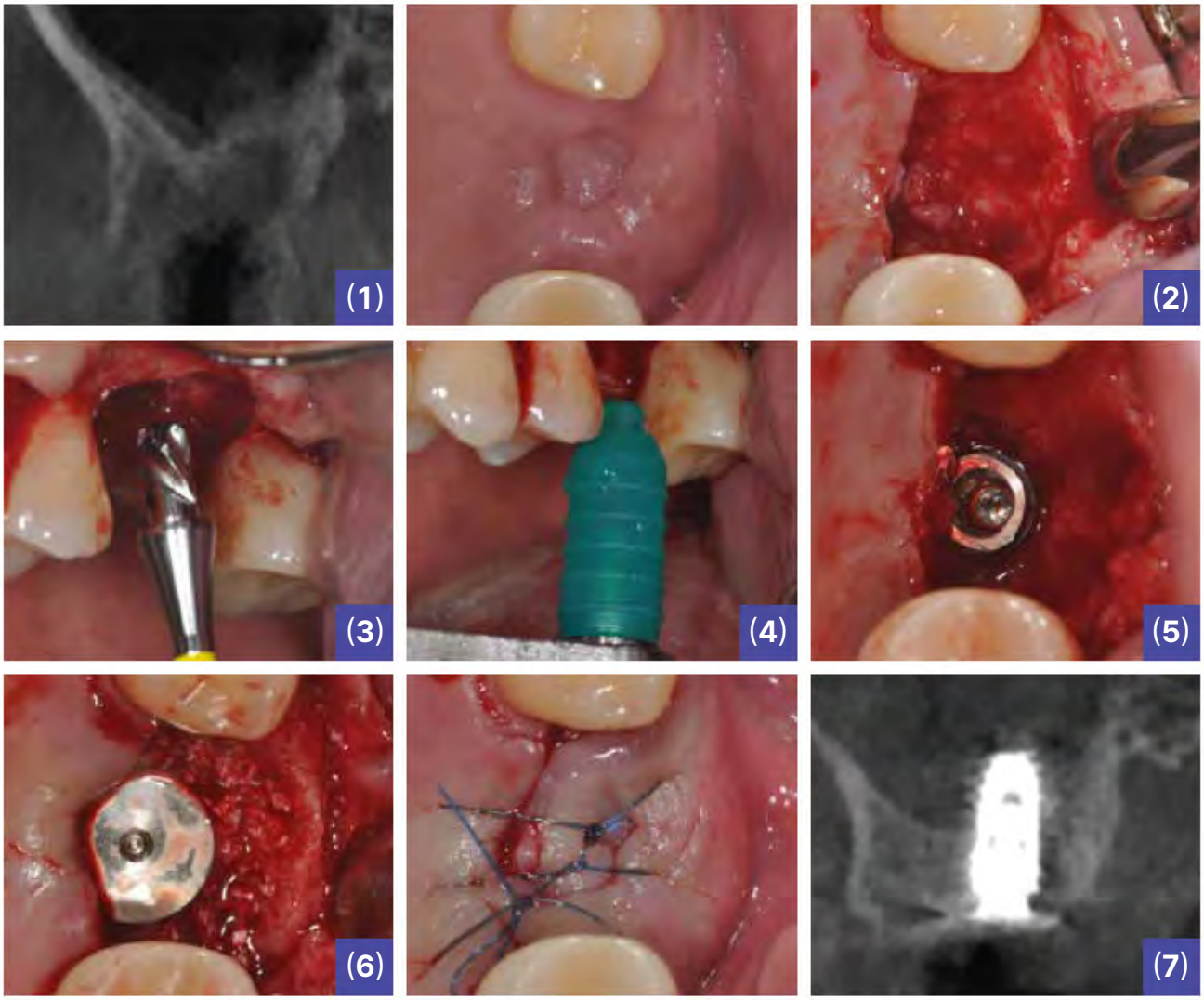
Jaeseok Kang, DDS, MSD, Ph.D

Case No. 04

Sinus | Soft bone | Immediate

[Sinus Lift #26] SICON placement (1 month post-extraction)

This case demonstrates placement of a SICON implant (Ø5.0 × 10 mm, VUV) at #26, one month after extraction while alveolar bone remodeling was still in progress.
A crestal approach sinus membrane lifting was performed, followed by bone grafting in both the maxillary sinus and the extraction socket. The procedure was completed with placement of a GBR Screw.



(1) Preoperative CBCT (1 month after extraction)
(2) Alveolar bone remodeling in progress
(3) Access the sinus floor and establish communication using the Sinus Lift Drill
(4) Secure the Silicone-Type Water Membrane Lifter by pressing it into the osteotomy, then perform hydraulic sinus membrane lifting.
(5) Place the SICON implant (Ø5.0 × 10 mm, VUV)
(6) Perform bone grafting and place the GBR Screw
(7) Immediate postoperative CBCT of #26

SICON Clinical Case

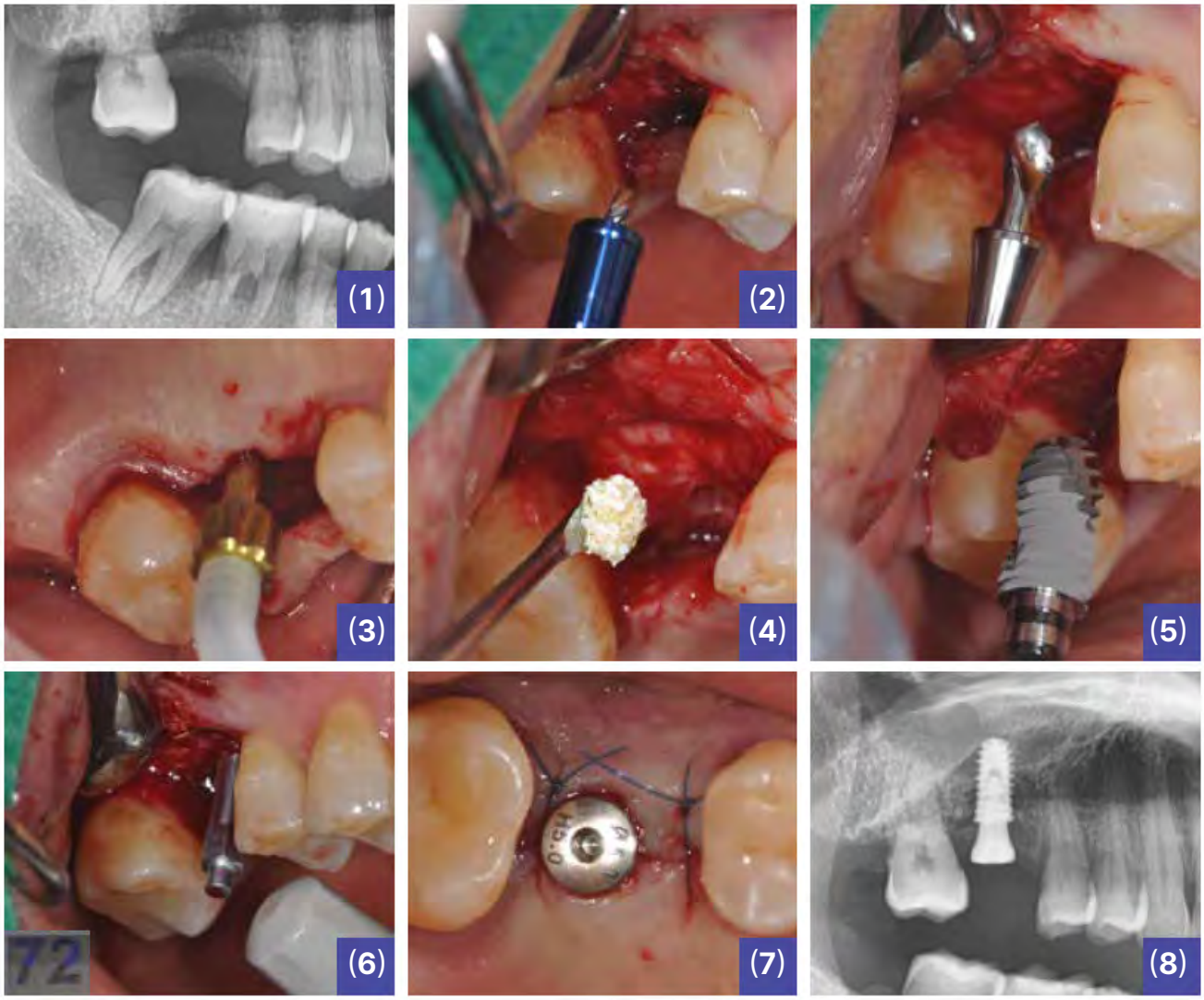
Jaeseok Kang, DDS, MSD, Ph.D

Case No. 05

Sinus | Soft bone | Immediate

[Sinus Lift #16] SICON placement

This case demonstrates a crestal approach sinus membrane lifting and bone grafting at #16, adjacent to the maxillary sinus with a residual bone height of 6 mm, followed by placement of a SICON implant (Ø5.0 × 8.5 mm, VUV) and completion with a Healing Abutment.



(1) Preoperative panoramic X-ray
(2) Initial drilling position established and osteotomy prepared for implant placement
(3) Secure the Water Membrane Lifter into the osteotomy by screwing it into place, then perform hydraulic sinus membrane lifting.
(4) Bone graft
(5) PLACE THE SICON IMPLANT (Ø5.0 × 8.5 MM, VUV)
(6) ISQ value: 72
(7) Place the Healing Abutment
(8) Immediate postoperative panoramic X-ray

SICON Clinical Case

Jaeseok Kang, DDS, MSD, Ph.D

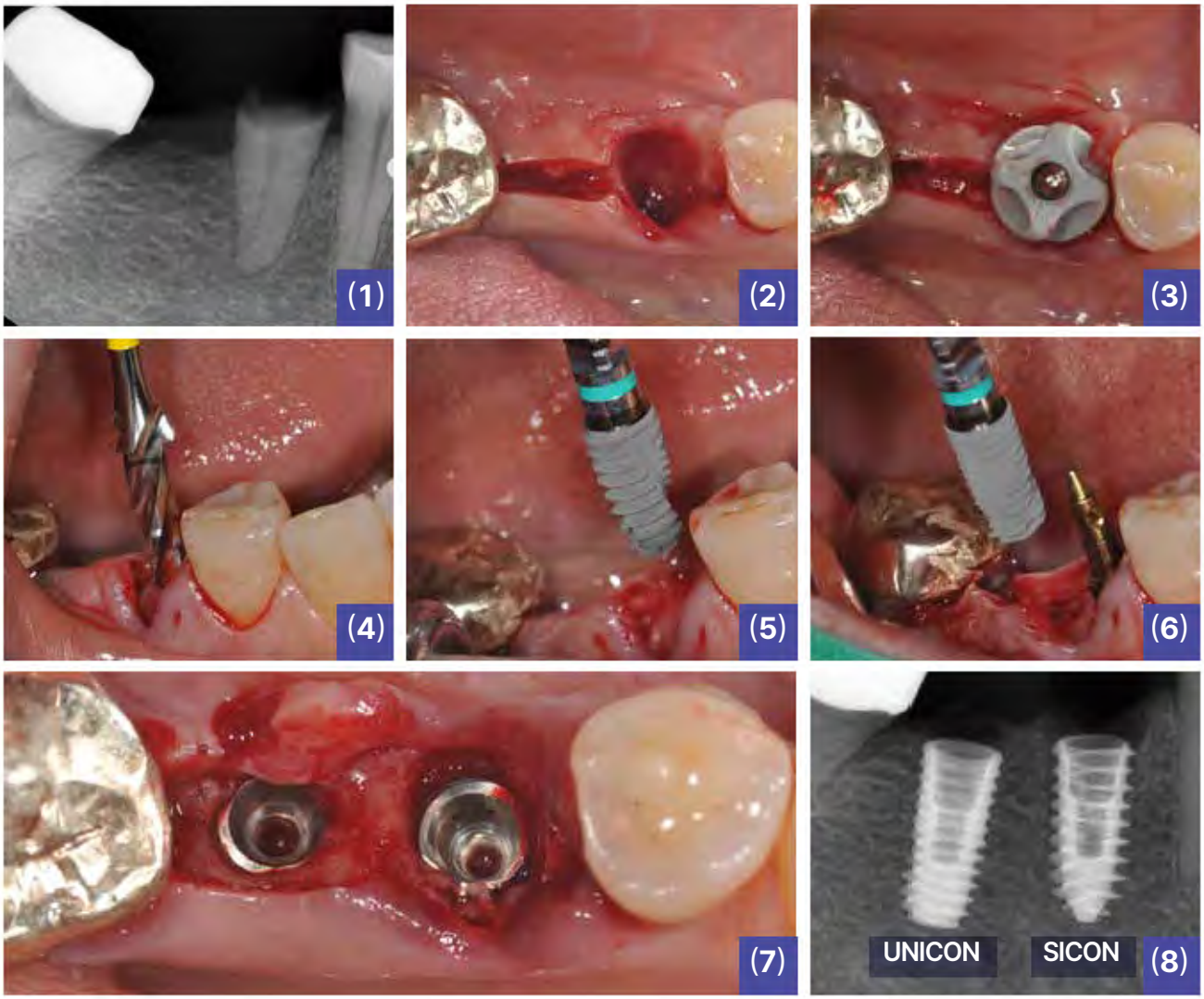
Case No. 06

Sinus | Soft bone | Immediate

[Immediate Placement #45] SICON placement

[Implant Placement #46] UNICON placement

This case demonstrates immediate placement of a SICON implant (Ø5.0 × 10 mm, VUV) at #45 immediately after extraction of the residual root, together with placement of a UNICON implant (Ø5.0 × 10 mm, VUV) at #46.



(1) Preoperative standard panoramic X-ray
(2) Intraoral photograph after extraction of the residual root at #45
(3) Verify the drilling direction and the relationship to adjacent teeth using the Positioning Bell and Initial Check Pin at #45
(4) Prepare the osteotomy using the Taper Drill
(5) Place the SICON implant (Ø5.0 × 10 mm, VUV) at #45
(6) Place the UNICON implant (Ø5.0 × 10 mm, VUV) at #46
(7) Immediate postoperative intraoral photograph
(8) Immediate postoperative standard panoramic X-ray

SICON Clinical Case

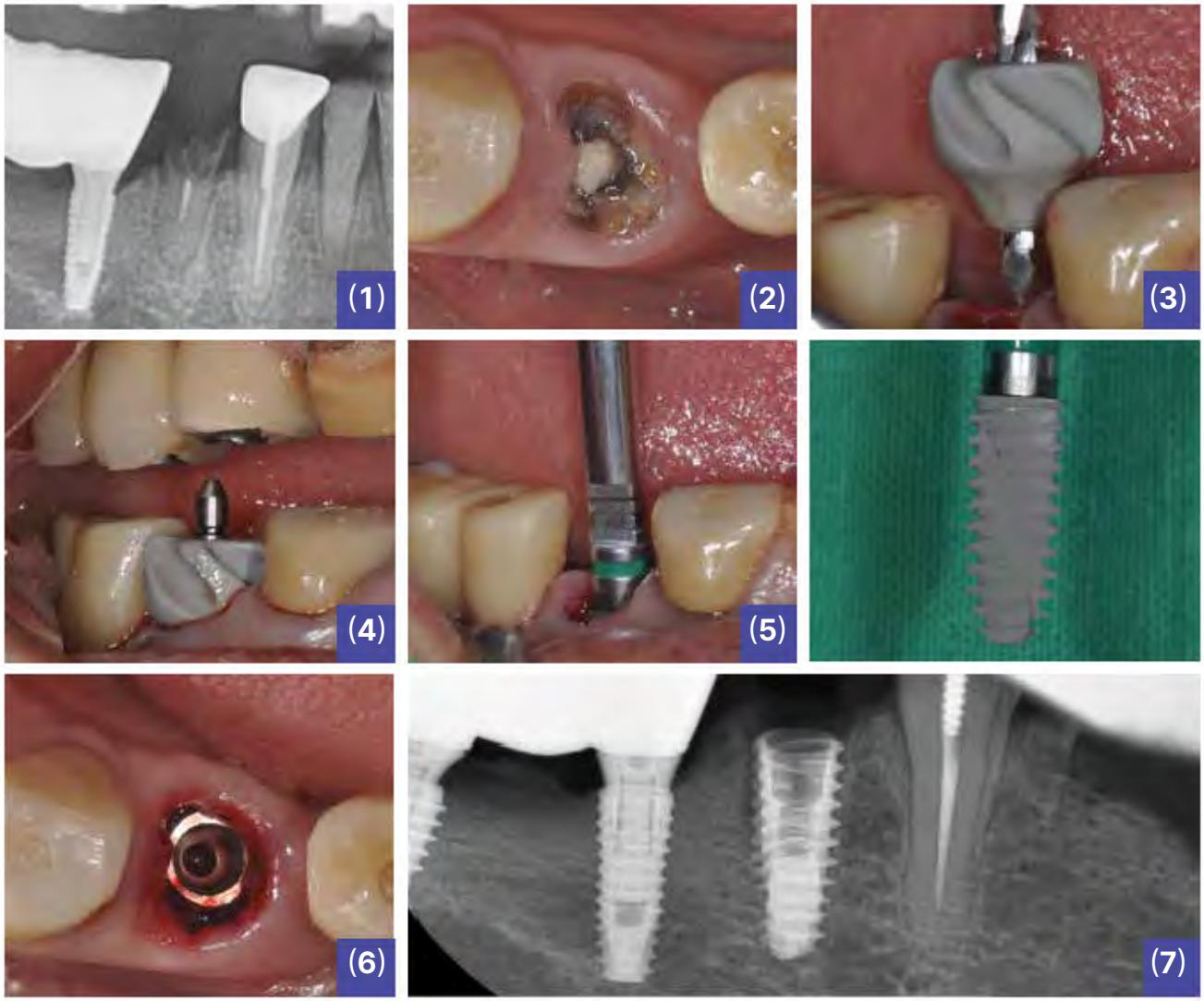
Jaeseok Kang, DDS, MSD, Ph.D

Case No. 07

Sinus | Soft bone | Immediate

[Immediate Placement #44] SICON placement

This case demonstrates immediate placement of a SICON implant (Ø5.0 × 11.5 mm, VUV) at #44 immediately after extraction of the residual root.



(1) Preoperative standard panoramic X-ray
(2) Intraoral photograph before extraction of the residual root
(3) Attach the Positioning Bell to the Multi Initial Drill to establish the drilling direction and perform initial drilling
(4) Verify the drilling direction and the relationship to adjacent teeth using the Positioning Bell and Initial Check Pin
(5) Prepare the osteotomy and place the SICON implant (Ø5.0 × 11.5 mm, VUV) at #44
(6) Immediate postoperative intraoral photograph
(7) Immediate postoperative standard panoramic X-ray

SICON Clinical Case

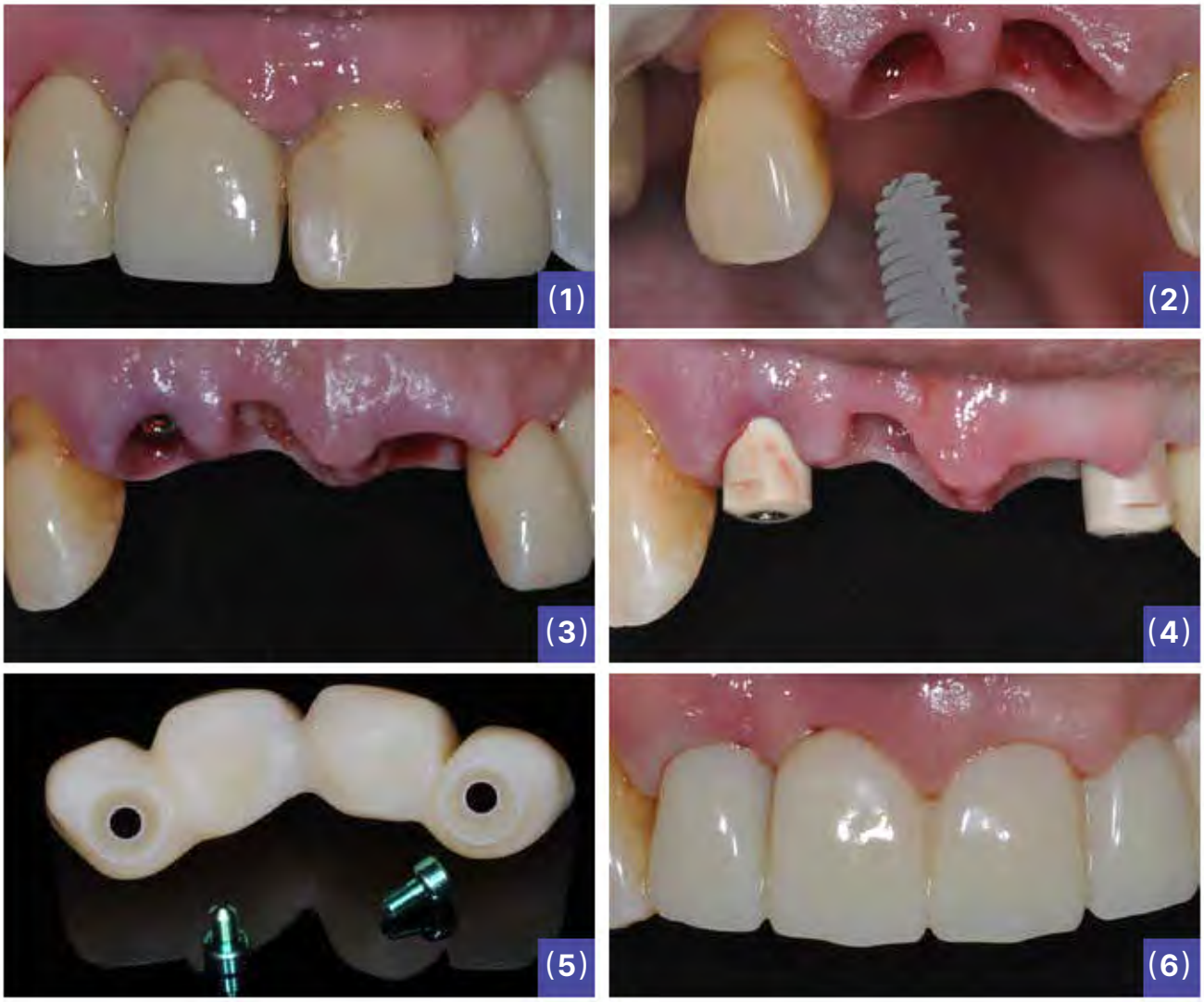
Jaeseok Kang, DDS, MSD, Ph.D

Case No. 08

Sinus | Soft bone | **Immediate**

[Immediate Loading #12, #22] SICON placement

This case demonstrates placement of SICON implants (Ø5.0 × 11.5 mm, VUV) at #12 and #22 following extraction of the maxillary anterior teeth (#12, #11, #21, and #22), with immediate restoration using a screw-retained 4-unit provisional bridge on the day of implant placement.



(1) Pre-extraction intraoral photograph
(2) Extract #11 and #12, then place the SICON implant (Ø5.0 × 11.5 mm, VUV) at #12
(3) Extract #21
(4) Extract #22, place the SICON implant (Ø5.0 × 11.5 mm, VUV), and perform a digital impression
(5) Screw-retained type의 4-unit provisional bridge
(6) Intraoral photograph immediately after placement of the provisional restoration

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