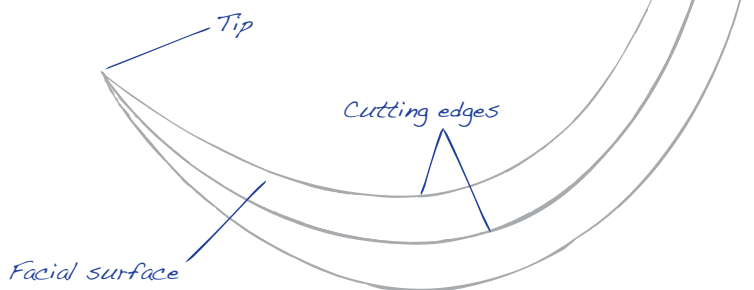




American Eagle
INSTRUMENTS®



INSTRUMENT GUIDE

Information on Periodontal Instruments

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Periodontal probes/periodontometers

Periodontal probes are indispensable instruments for the initial diagnosis as part of the Periodontal Screening Index (PSI) and also for the documentation and follow-up of periodontal disease. Periodontal probes are extremely precise to ensure exact pocket depth



AE P WHOB

AE periodontal probe/
periodontometer
Ball-Tip Screening,
stainless steel
handle, thin

AE P WHOB X

AE periodontal probe/
periodontometer
Ball-Tip Screening,
plastic handle



A WHO-
recommended
periodontal probe
with a spherical tip
(Ø 0.5 mm)



AE P UNC15RB

AE periodontal probe/
periodontometer
UNC15 Rung,
stainless steel
handle, thin

AE P UNC15RB X

AE periodontal probe/
periodontometer
UNC15 Rung,
Plastic handle



AE P 12B

AE periodontal probe/
periodontometer
3-6-9-12 Marquis,
stainless steel
handle, thin

AE P 12B X

AE periodontal probe/
periodontometer
3-6-9-12 Marquis,
plastic handle

Special periodontal probes and explorers

measurement and reliable diagnostics. The markings on the probe tip are milled or applied in black, yellow and green for easy reading. All periodontal probe scales are in millimetres.

The overview shows the most commonly used probes.



AE P N2B

AE periodontal probe/
periodontometer
Nabers 2, stainless
steel handle, thin

AE P N2B X

AE periodontal probe/
periodontometer
Nabers 2, plastic
handle



For examining
furcation lesions
in the upper
and lower jaw.
Scale 3, 6, 9, 12 mm



AE EXP 11-12DP

AE probe (explorer)
Deep Pocket 11-12,
stainless steel
handle, thin

AE EXP 11-12DPX

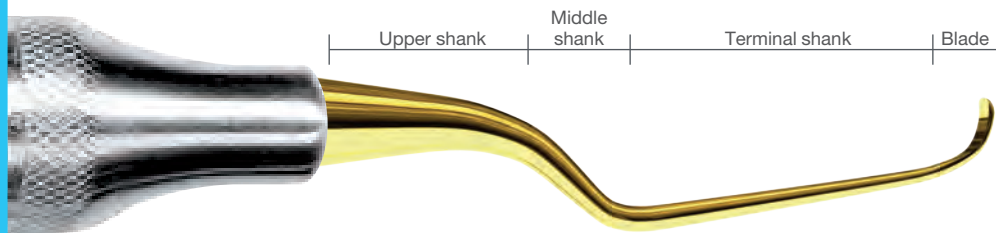
AE Probe (explorer)
Deep Pocket 11-12,
plastic handle



A very fine
periodontal probe
for detecting
calculus on
approximal,
oral and facial
surfaces in even
deep periodontal
pockets.

Structure of periodontal hand instruments

A hand instrument consists of three sections: an instrument handle, functional shanks and a working end/blade. Starting from the working end, the functional shanks are referred to as the terminal, middle and upper shanks.

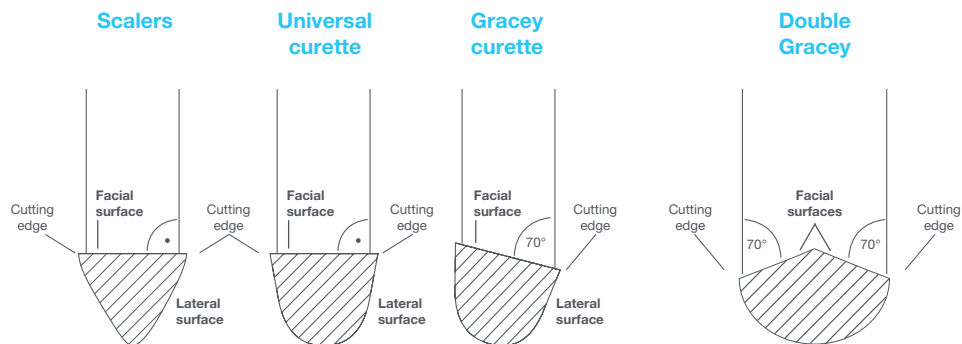


Curettes are characterised by a rounded working end, while scalars taper to a point.

The working ends of the instruments consist of a facial surface, working surfaces (also called lateral surfaces) and cutting edges.



The figure shows cross-sections of the different types of instruments. Gracey curettes have a bevelled facial surface.



Instrument variations – characteristics and areas of application

Scalars are used supragingivally to remove soft and hard deposits such as tartar above the gumline. Due to their pointed shape, they are not suitable for subgingival work.

Scalars	Characteristics	Areas of application
	– Tip at the working end – Angular back surface – Double-edged	– Supragingival – Particularly fine variants for interproximal region
Example: Scaler 204S		

Curettes are used additionally for subgingival work below the gum line. They are suitable for the gentle removal of calculus and inflammatory tissue. Curettes are also used to gently plane the root surface.

Universal curettes	Characteristics	Areas of application
	– Rounded working end – Rounded back surface – Double-edged	– Supragingival and subgingival
Example: Columbia 4L		

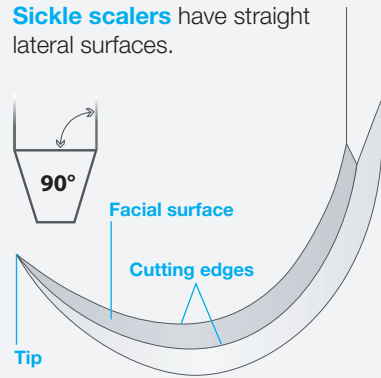
Gracey curettes	Characteristics	Areas of application
	– Rounded working end – Rounded back surface – Facial surface sloping by 20°	– Area-specific – Mesial-distal/buccal/oral – Supragingival and subgingival
Example: Gracey 7		

Double Gracey	Characteristics	Areas of application
	– Rounded working end – Two cutting edges – Facial surface sloping by 20° on both sides	– Supragingival and subgingival – Combines several Gracey variants in a single instrument
Further information: p.33		

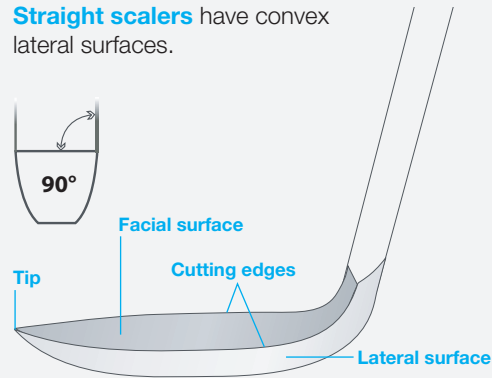
The structure of scalers

A distinction is made between straight and sickle-shaped scalers. While straight scalers have a flat, straight working end, the blade of a sickle scaler is curved. **The product overview shows the most commonly used scalers.**

Sickle scalers have straight lateral surfaces.



Straight scalers have convex lateral surfaces.



204SD

AE S 204SD X
AE S 204SD Z
Universal

Scaler 204SD is characterised by particularly fine instrument tips and can be used very universally.



204S

AE S 204S X
AE S 204S Z
Posterior

The 204S is an extra fine sickle scaler and is particularly suitable for the posterior region due to its strong curve.



M23

AE S M23 X
AE S M23 Z
Universal



H 6-7

AE S H6-7 X
AE S H6-7 Z
Anterior



N1

AE S N1 X
AE S N1 Z
Anterior



DE NEBRASKA 128

AE S N128 DE X
AE S N128 DE Z
Anterior



EAGLE CLAW

AE SC X
AE SC Z
Posterior

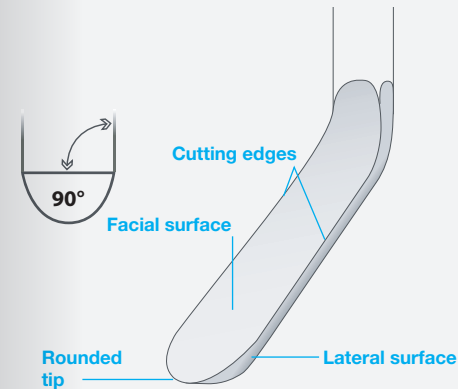


BLACKJACK

AE S BJ X
AE S BJ Z
Posterior

The structure of universal curettes

Unlike scalers, universal curettes have rounded working ends and are therefore also suitable for subgingival use. The cross-section of a universal curette is almost semicircular, which means that it has a rounded back surface.



BARNHART 5-6

AE CB 5-6 X
AE CB 5-6 Z
Universal



"Did you know?"

The perfect combination for all tooth surfaces: curette Barnhart 5-6 and scaler M23

The most commonly used universal curettes



LANGER 1-2

AE CL 1-2 X
AE CL 1-2 Z
Lower posterior/mesial-distal



LANGER 3-4

AE CL 3-4 X
AE CL 3-4 Z
Upper posterior/mesial-distal



LANGER 5-6

AE CL 5-6 X
AE CL 5-6 Z
Lower/upper anterior



COLUMBIA 2L-2R

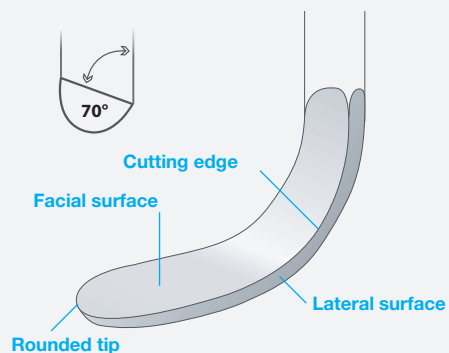
AE CC 2L-2R X
AE CC 2L-2R Z
Anterior



COLUMBIA 4L-4R

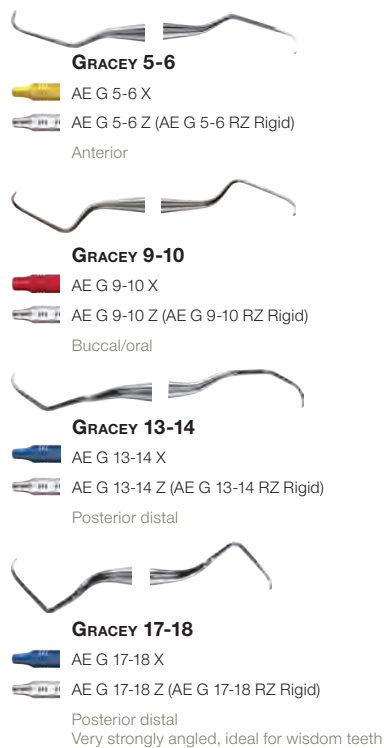
AE CC 4L-4R X
AE CC 4L-4R Z
Posterior

The structure of Gracey curettes

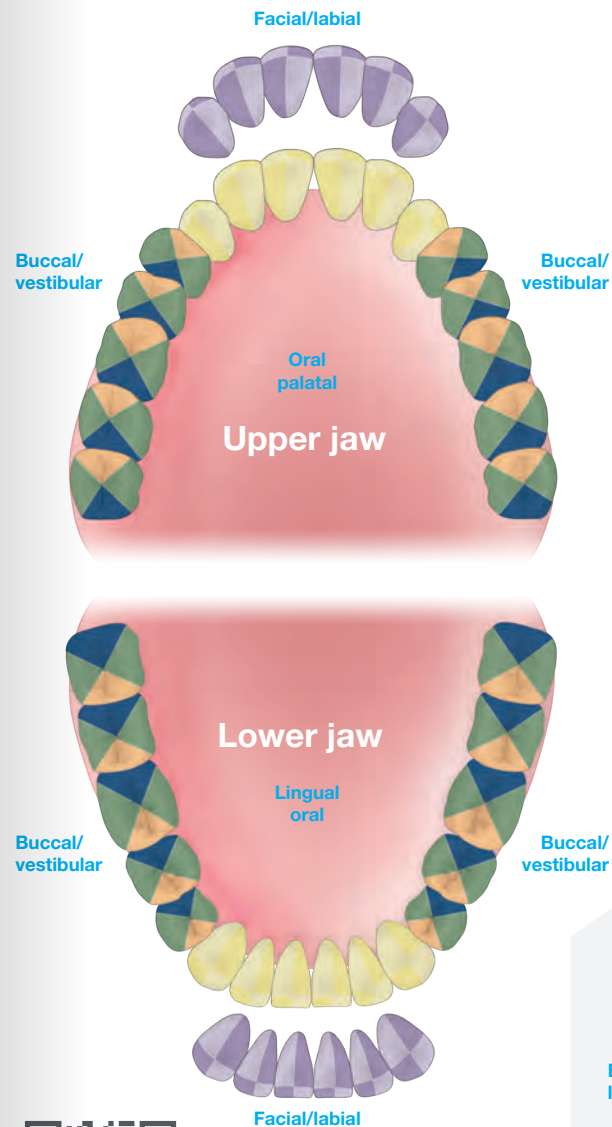


Like universal curettes, Gracey curettes also have rounded working ends. The cross-section of a Gracey curette is also almost semicircular, but the facial surface has an inclination of 70° to the terminal shank. They are used for specific areas of the tooth.

The most commonly used Gracey curettes



Application areas of Gracey curettes



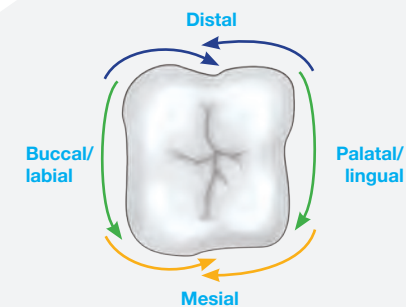
The following diagram of an upper and lower jaw provides a simple overview of the areas in which Gracey curettes are used.

Usage of Gracey curettes

00-0 and/or 1-2 or 5-6	7-8
11-12 or 15-16	13-14
17-18	

Systematic cleaning is carried out by **overlapping the surfaces**.

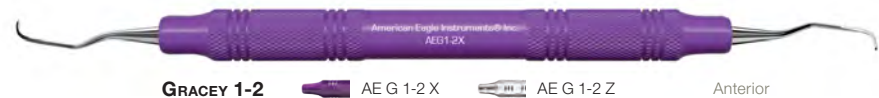
The arrows indicate the direction of the instrument tip.



Request your laminated overview of the usage of our Gracey curettes here.

The (reduced) Gracey curette set

The Gracey set contains all the instruments needed for the comprehensive treatment of any periodontal pocket. The following example shows which Gracey curettes can be included in an instrument set.



GRACEY 1-2

AE G 1-2 X

AE G 1-2 Z

Anterior

or

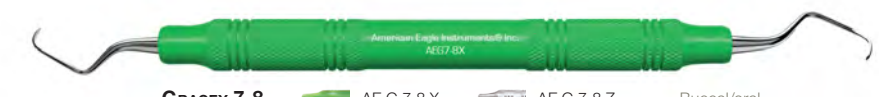


GRACEY 5-6

AE G 5-6 X

AE G 5-6 Z

Anterior



GRACEY 7-8

AE G 7-8 X

AE G 7-8 Z

Buccal/oral



GRACEY 11-12

AE G 11-12 X

AE G 11-12 Z

Posterior mesial

or



GRACEY 15-16

AE G 15-16 X

AE G 15-16 Z

Posterior mesial



GRACEY 13-14

AE G 13-14 X

AE G 13-14 Z

Posterior distal



GRACEY 17-18

AE G 17-18 X

AE G 17-18 Z

Posterior distal

The different Gracey variants

Depending on the treatment area, multiple Gracey variants are available to the practitioner. They differ in terms of the length of the working end and the terminal shank.

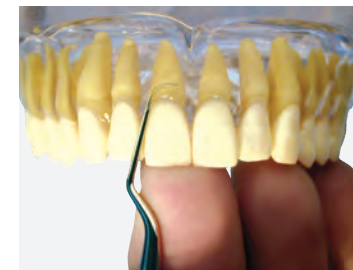
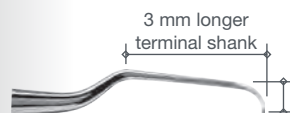
Gracey curettes

Gracey curettes are designed for specific areas of the tooth. The angle of the blade allows for easy insertion into the sulcus and minimises tissue trauma.



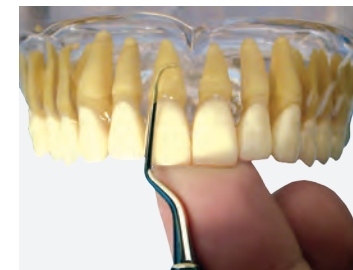
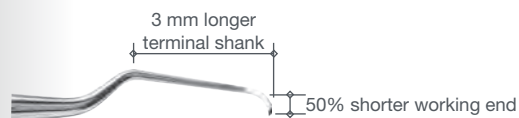
Gracey Deep Pocket curettes

With a 3 mm longer terminal shank, this instrument can be used for cleaning and root planing in pockets of 5 mm or deeper.



Gracey Access curettes

With a 50% shorter blade and a 3 mm longer terminal shank, the entire blade of this instrument comes into contact with the root surface. Even tight pockets and furcations are thus easily accessible.



Gracey Deep Pocket

With a 3 mm longer terminal shank, this instrument can be used for cleaning and root planing in pockets of 5 mm or deeper.



or



or



Gracey Access



Gracey Access curettes have a 50% shorter working end and a 3 mm longer terminal shank. Delicate root surfaces, such as those of the anterior teeth and in deep pockets, can thus be reached without damaging the tissue.



and/or



or



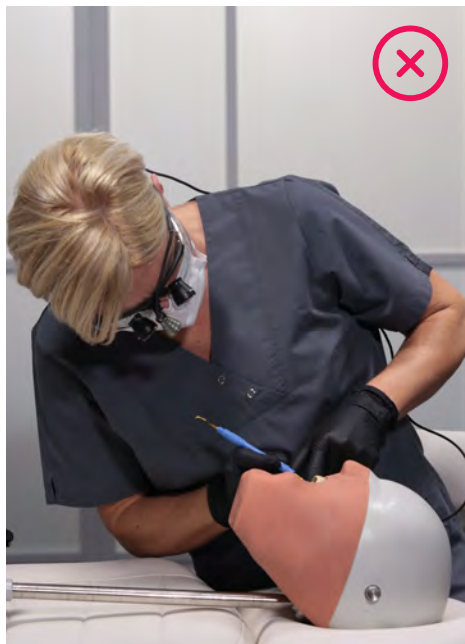
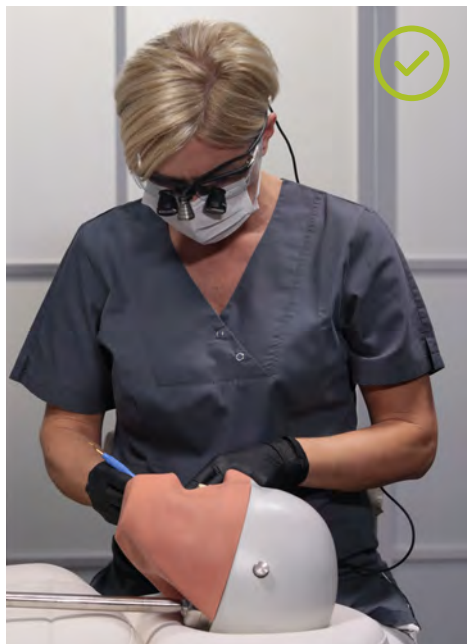
or



Ergonomics when using hand instruments

Ergonomics plays a significant role in everyday dental practice.

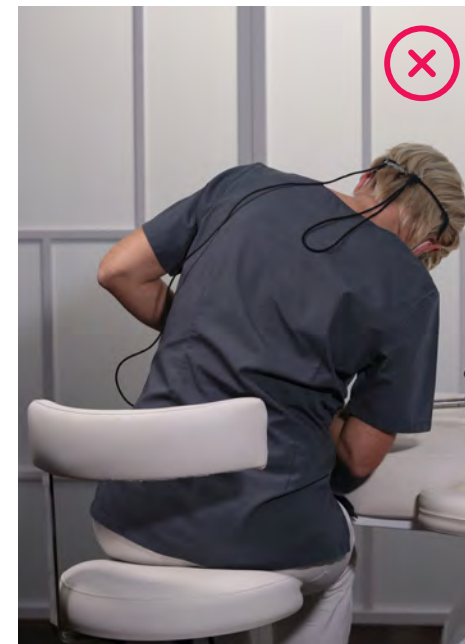
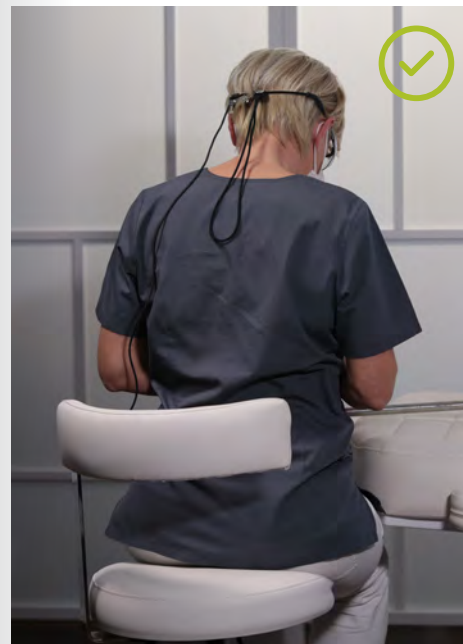
Preventive behavioural change is at least as important as treating symptoms.



To avoid health problems, observe the following rules:

- Your shoulders should be straight – do not raise them
- Your feet should be flat on the floor
- The angle between the upper and lower leg should be approx. 110° to 130°
- Your forearms should be parallel to the floor
- Keep your wrists straight
- The arm position should be relaxed and close to the body
- Your buttocks should cover 2/3 of the dental stool
- Maintain an eye-to-object distance of about 35 cm

The natural S-shape of the spine is supported by an upright sitting posture, which ensures an even distribution of pressure. The muscles should not be neglected. The back and abdominal muscles provide important support. Set aside 10-15 minutes a day to exercise these muscles.



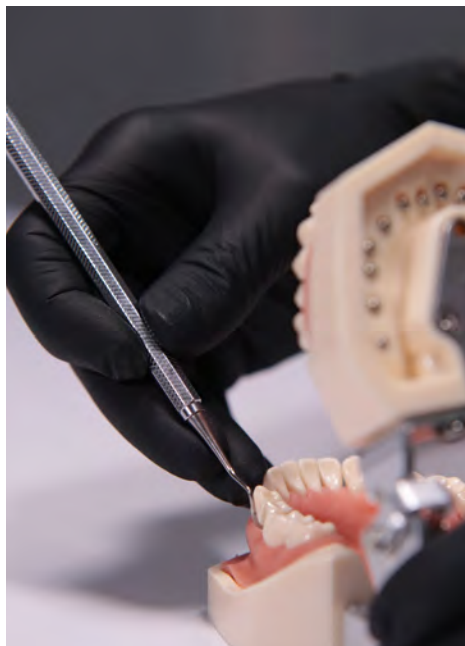
Working correctly with hand instruments

Practitioners achieve perfect results with hand instruments. This is especially due to the good tactile sensitivity and the precise handling of the delicate working end.

Attention should be paid to the following points during their use:

- Modified pen grasp
- Support
- Work technique
- Adaptation
- Working angle
- Work system

Hand instruments are held in a modified pen grasp. The thumb, index and middle finger are positioned together to form an entity. The thumb rests between the index and middle fingers on the opposite side of the instrument.



Instruments with wider handles are particularly easy on the muscles.

The index finger provides support. It also serves as a support point for changing the angle of the instrument. If possible, always rest your hand intraorally. If it is supported extraorally, there is a risk of slipping. The movement does not come from the fingers but from the whole arm. This prevents joint and ligament damage.

Lowering the forearm and moving it in the opposite direction over the ring finger support moves the instrument coronally. The front third of the working end must be modified. The working angle differs according to the type of instrument. With scalers or universal curettes, the terminal shank must be inclined approx. 20° to the tooth axis. Gracey and Double Gracey curettes already have this angle predefined due to their sloping facial surfaces, meaning that the terminal shank must be placed parallel to the surface to be treated.



A good and repetitive work method and the resulting pressureless scaling leads to relaxed work that is easy on the muscles.

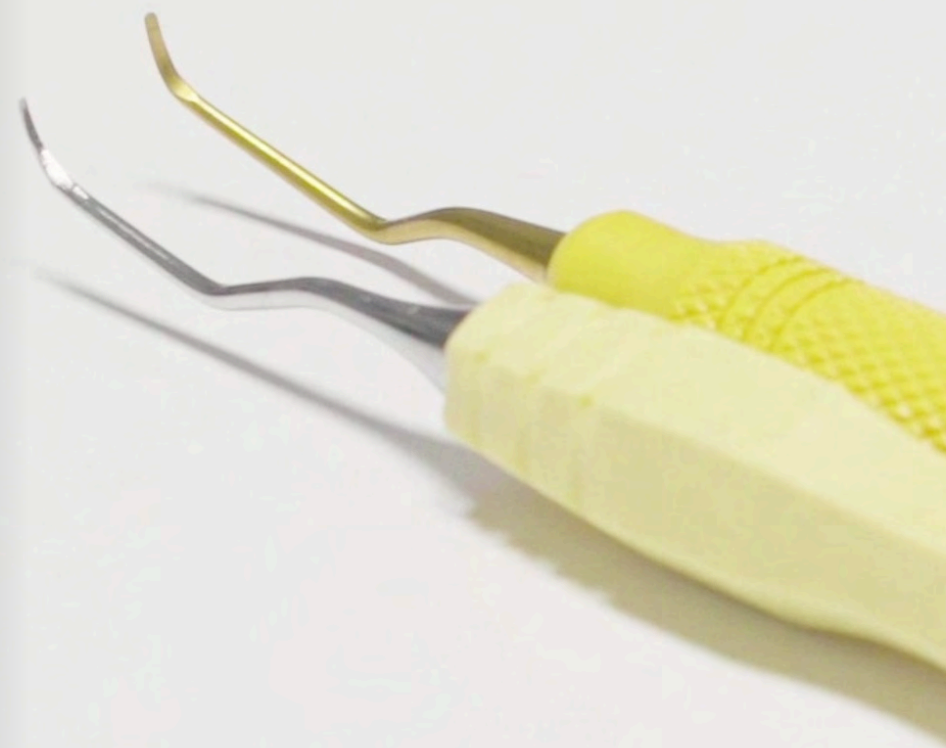
American Eagle instruments and ergonomics

Ergonomic aspects were the top priority in the development of American Eagle instruments.

The use of wider handles allows for work that is easy on the muscles. At the same time, special attention was paid to good grip. The grip structure of both metal and plastic handles has been optimally designed.

With their low weight of only 11.4 g, American Eagle instruments with Eagle*Lite*® plastic handles offer unrivalled tactility, thus supporting work that is particularly gentle on the patient.

Correct sharpening also plays a significant role in ergonomics. Incorrect geometry and inadequate cutting edges result in significantly more effort for the practitioner. American Eagle sharpen-free instruments with XP Technology® offer the solution here. In this way, the curette blades remain perfectly round throughout their entire service life and are not sharpened into scalers. Thus the typical error of incorrect cutting edges on the instrument is no longer an issue.

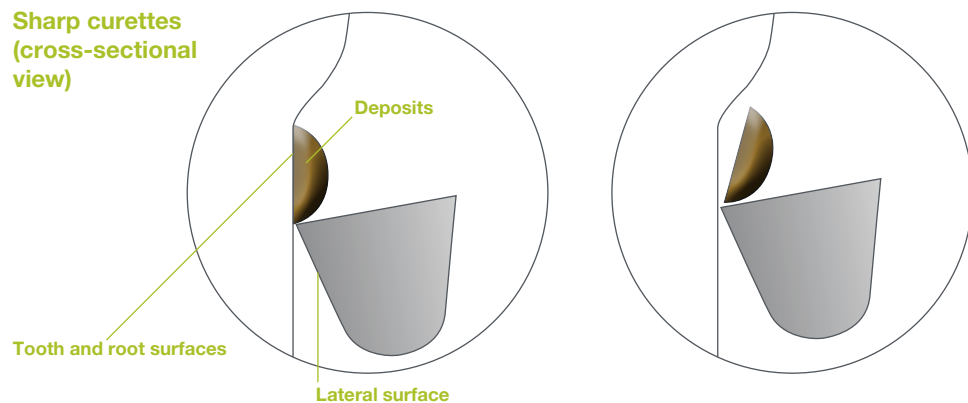


Curette was sharpened into a scaler

To sharpen or not to sharpen?

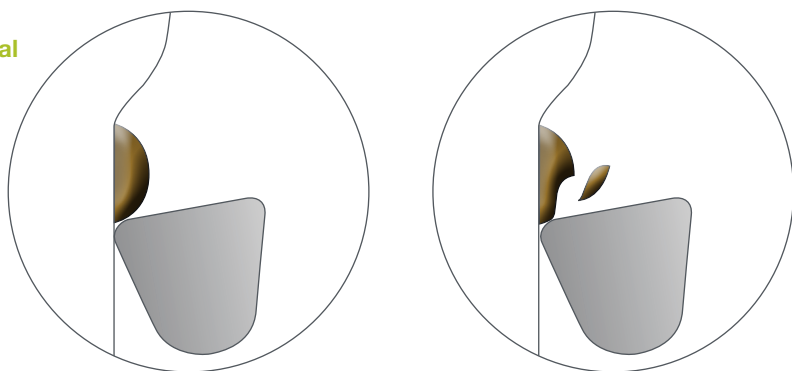
Stainless steel instruments should be checked after each treatment and sharpened, if necessary. Below you can see why you should always work with sharp instruments.

Sharp curettes (cross-sectional view)



Sharp instruments remove deposits from tooth and root surfaces.

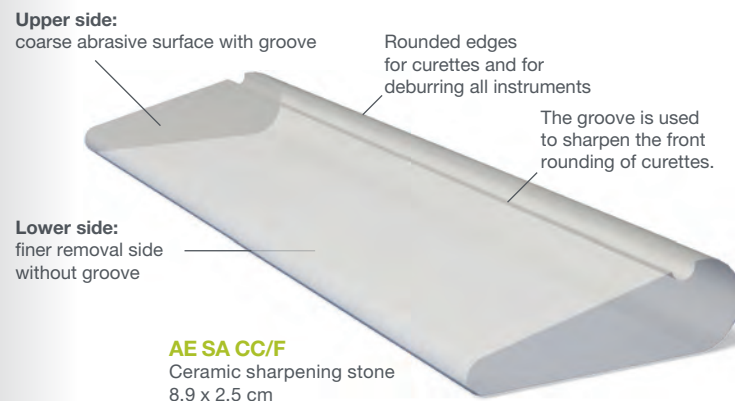
Dull curettes (cross-sectional view)



Blunt instruments only partially “polish” or remove deposits. In addition, there is an increased risk of breakage due to the increased pressure applied while working. The permanent use of blunt instruments also increases the physical strain due to the higher pressure. This puts a strain on both the patient and the practitioner's health and can lead to carpal tunnel syndrome, among other things.

Sharpening materials

Admittedly, sharpening is time-consuming. To do it effectively, you need the right tools:



AE SA DS
Diamond sharpening stone
10.1 x 2.5 cm



Magnifier



AE SA STS
Test sticks, single pack

AE SA STP
Test sticks, pack of 6

Sharpening technique

The best sharpening materials alone cannot sharpen your instruments. The correct method for sharpening the instruments is also important.

Method 1



Move the sharpening stone while holding the instrument in place. The edge is visible while the stone is moved at the correct angle, producing a sharp edge.

Method 2



Move the instrument while holding the sharpening stone in place. This method creates less fatigue. However, maintaining the correct instrument angle may be more difficult, due to the inability to see the edge while moving the instrument.

Instrument maintenance is of significant importance. But what is important and what needs to be considered?

Important!

Clean and disinfect used, contaminated instruments as soon as possible. It is essential to follow the instructions of the detergent and disinfectant manufacturers as well as the instructions for the processes in the thermal disinfectant.

Never use drill brushes or other abrasive tools to clean the instruments.

Only use soft plastic brushes.

Always place the instruments in cassettes for sterilisation, transport and storage. They keep the hand instruments fixed securely and separately from each other.

Why?

If handled improperly, the aggressive chemicals can corrode the surface of the instruments. Concentration, retention time and water quality have an influence on the quality and life span of the instruments.

Drill brushes or other abrasive tools will damage the surface. Rust formation and dirt deposits may occur.

Safe, contact-free storage ensures that the instruments have a long service life.

Cassettes also lower the risk of injury and infection and make it possible to put together individual instrument sets.

Correct sharpening requires intensive education and training. American Eagle offers regular sharpening courses for this purpose. Contact us!

No more sharpening thanks to the revolutionary XP Technology®



- Never sharpen again
- Thinner working tips
- Sharper cutting edges
- Faster, easier treatments
- More comfort for users and patients, less fatigue

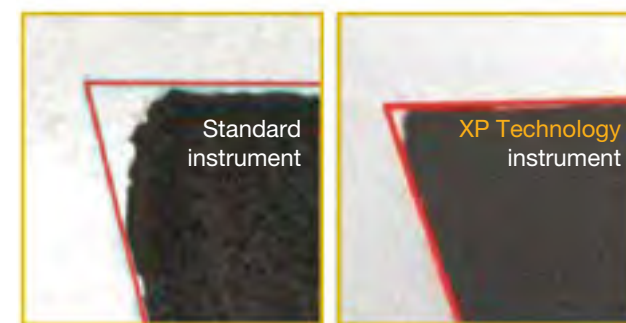
XP Technology® is a patented surface treatment process. The metallurgical composition of the instrument surface is designed to make the material much more durable. This process allows for the production of thinner instrument tips with sharper cutting edges.

Time-consuming sharpening of instruments is thereby eliminated.

A comparison – independent research has recognised XP Technology® as a revolutionary technological breakthrough in the dental industry.

Dr. Phillip Watson from the University of Toronto was able to demonstrate the superior durability of the XP instruments compared to standard instruments.

Research: University of Toronto, Dr. Phillip A Watson, Dept. of Biological and Diagnostic Sciences.



1,500
strokes

15,000
strokes

Special instruments and instrument shapes



Morse scaler – the smallest scaler in the world – especially suitable for overlaps and extreme crowding. The delicate working end is also suitable for removing deposits on and around braces and orthodontic wire.

MORSE SCALER

 AE SM0-00 X
Anterior



Eagle Talon scaler – an anterior scaler, a very fine sickle scaler on one side and a right-angled scaler on the other side. Suitable for narrow interdental spaces.

EAGLE TALON

 AE SET XP X
Anterior

Special instruments and instrument shapes



N1 – combination of a sickle scaler and a sharp spoon excavator on the other side. The small spoon excavator makes it easier to remove large amounts of tartar (lower lingual), for example. Discolourations and tartar can also be effectively removed from the fissures in this way.

N1 SCALER

 AE SN1 XP X
Anterior



Eagle Claw – this posterior sickle scaler has a reinforced rear part of the working end and a very fine scaler tip. The angle of the instrument allows you to reach the interdental spaces in the molar region in an ergonomic manner. Hard and solid calculus can be easily removed using the reinforced sickle, without having to neglect the approximal areas.

EAGLE CLAW

 AE SEC XP X
Posterior

Special Gracey curettes



GRACEY ACCESS 00-0 XP

AE GA 00-0 XP X

Anterior

Gracey Access 00-0 – minimally angled anterior Gracey curette. The small angle between the terminal and upper shanks allows for more direct access to periodontal pockets in the anterior region. 3 mm longer terminal shank and 50% shorter working end than a standard Gracey curette.



GRACEY STANDARD 15-16 XP

AE G15-16 XP X

Posterior mesial

Gracey 15-16 – the Gracey 15-16, like the Gracey 11-12, is suitable for the mesial surfaces of the posterior teeth. The special feature of the Gracey 15-16 is the pronounced angle between its terminal and upper shanks. This makes it easier to access and treat hard-to-reach areas, especially in the posterior molar area. The 15-16 can completely replace the 11-12. It is available in Standard, Deep-Pocket, Access and Pro Thin™ versions.



GRACEY STANDARD 17-18 XP

AE G15-16 XP X

Posterior distal

Gracey 17-18 – the Gracey 17-18 serves as a useful addition to the standard Gracey set. Thanks to the particularly pronounced angle between the terminal and upper shanks as well as the extended terminal shank, you can reach both the supragingival and the subgingival distal surfaces of the tooth with this instrument. This instrument gives you greatly improved access, especially for patients with restricted mouth opening or who still have wisdom teeth. The 17-18 complements a standard Gracey set, but cannot replace the regular 13-14.

Pro Thin™ XP instruments

Pro Thin™ instruments have extremely thin, delicate working tips with a precise design. Together with the lightweight, ergonomic handles, this produces optimal tactile sensitivity, greater comfort and less fatigue and enables the practitioner to provide a safe and gentle periodontal therapy. Thanks to XP Technology®, the instruments no longer require sharpening.

Pro Thin instruments were developed to address the particular challenges of periodontal treatment – from deep pockets to tight interproximal spaces.



M23 Pro Thin scaler – the M23 Pro Thin scaler allows for excellent access to the supragingival and interproximal regions of all teeth, right down to the contact area. It adapts well to hard-to-reach mesial and distal surfaces.

M23 PRO THIN SCALER

AE S M23T XP X

Posterior



This and all following clinical images are courtesy of Sabrina Dogan (DH), Maurer.

In combination with XP Technology®, Pro Thin instruments can reach the smallest deposits even in narrow interproximal contact areas, such as here on an upper anterior tooth. The practitioner guides the instrument with a relaxed grip and moderate pressure when probing and scanning to achieve the best possible tactile sensitivity.

Pro Thin™ XP instruments

Blackjack Pro Thin scaler – the popular instrument for supragingival debridement is now even thinner for the improved removal of mineralised deposits above the gingiva. The Blackjack Pro Thin™ with XP Technology® is used in a modified scaling technique. Controlled probing and scanning strokes are possible thanks to this instrument's particularly delicate tips.

The Blackjack Pro Thin™ can replace other sickle scalers, such as the H 6-7, making treatment even more effective. The Blackjack Pro Thin can be used universally, even in the anterior area.



Pro Thin instrument with XP Technology® for precise interproximal work on a premolar.



BLACKJACK PRO THIN SCALER

AE S BJT XP X

Posterior

Barnhart 5-6 Pro Thin universal curette – this universal curette is a popular instrument in periodontal therapy. Unlike traditional curettes, which are often too thick, this instrument's narrow design makes it very effective for treating deep pockets with gingivitis and subgingival deposits, providing much greater comfort.



BARNHART 5-6 PRO THIN CURETTE

AE C B5-6T XP X

Universal for all tooth surfaces

Gracey Access Pro Thin™ XP curettes

Gracey curettes are the standard instrument for removing calculus and bacterial biofilm in pockets deeper than 4 mm. Instruments with a 50% shorter blade and a 3 mm longer shank (Gracey Access instruments) are now very popular in periodontal therapy.

The design of Gracey Access instruments has been enhanced with the Pro Thin™ to facilitate access to concave root areas as well as furcations and delicate anterior roots. Thanks to XP Technology®, which eliminates the need to sharpen sensitive instruments, the complex design of the shortened working tip can be perfectly preserved.



Gracey Access 1-2 Pro Thin curette

The Gracey Access 1-2 Pro Thin curette is used on anterior teeth as well as in the buccal and lingual furcation areas of the molars.

GRACEY ACCESS 1-2 PRO THIN CURETTE

AE GA 1-2T XP X

Anterior



Gracey Access 7-8 Pro Thin curette

The Gracey Access 7-8 Pro Thin curette is used on premolars as well as in the buccal and lingual surfaces and furcation areas of molars.

GRACEY ACCESS 7-8 PRO THIN CURETTE

AE GA 7-8T XP X

Premolar/molar



Gracey Access Pro Thin™ XP curettes

Gracey Access 13-14 Pro Thin curette

The Gracey Access 13-14 Pro Thin curette optimises access to distal pockets and tooth surfaces. The thinner working tip makes it easier to treat tight pockets and hard-to-reach areas.



GRACEY ACCESS 13-14 PRO THIN CURETTE

AE GA 13-14T XP X
Posterior distal

Gracey Access 15-16 Pro Thin curette

The Gracey 15-16 curette is a logical further development of the traditional Gracey 11-12. The greater angle between the terminal and upper shanks of the 15-16 provides improved access to all mesial surfaces, especially with patients who have limited mouth opening.



GRACEY ACCESS 15-16 PRO THIN CURETTE

AE GA 15-16T XP X
Posterior mesial

All instruments in the Pro Thin series are also available as Quik-Tips. See pages 40–41 (Quik-Tip series) for further information.

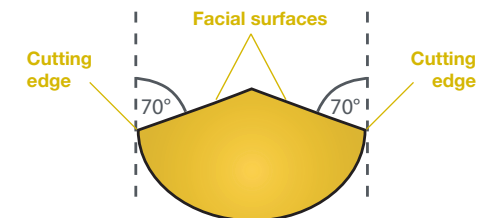
Double Gracey™ XP instruments



Double Gracey™ – two Graceys in a single instrument

The revolutionary Double Gracey instruments offer the effectiveness of Gracey curettes, while at the same time enabling economical use on a par with universal instruments! The Double Gracey Anterior combines the 1-2 for all anterior surfaces with the 7-8 for all buccal and oral surfaces of premolars and molars. The Double Gracey Posterior combines the 15-16 mesial with the 13-14 distal. This enables you to switch directly from one surface or tooth to the next, without changing instruments.

The development and production of the Double Gracey instruments was only made possible by XP Technology®. The specially manufactured working ends of the Double Gracey curettes would quickly lose their original shape and effectiveness with regular sharpening.



It is only thanks to XP that the intricate design of the cutting edge can be maintained throughout the entire service life of the instruments – WITHOUT SHARPENING!

Double Gracey™ Standard XP instruments

The standard set is recommended for use in subgingival calculus removal and biofilm management.



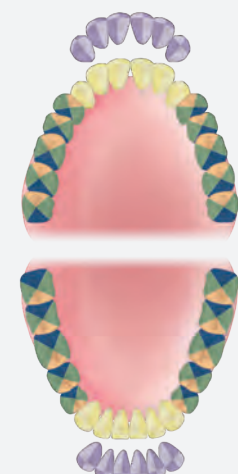
DOUBLE GRACEY ANTERIOR

AE DG A XP X
Anterior + buccal/oral posterior



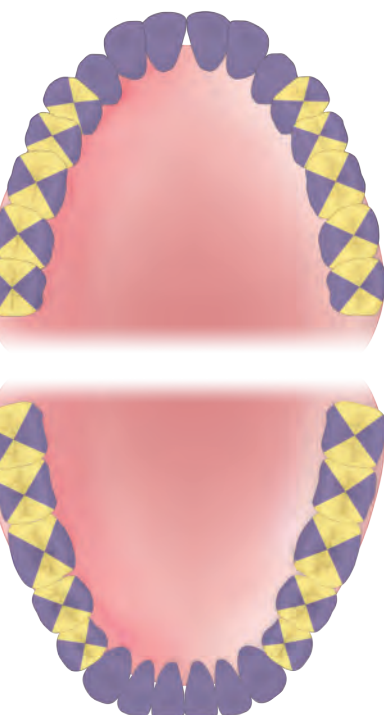
DOUBLE GRACEY POSTERIOR

AE DG P XP X
Posterior mesial/distal



Required Gracey instruments:

1-2 or 5-6	
7-8 or 9-10	
11-12 or 15-16	
13-14	



DG Anterior DG Posterior

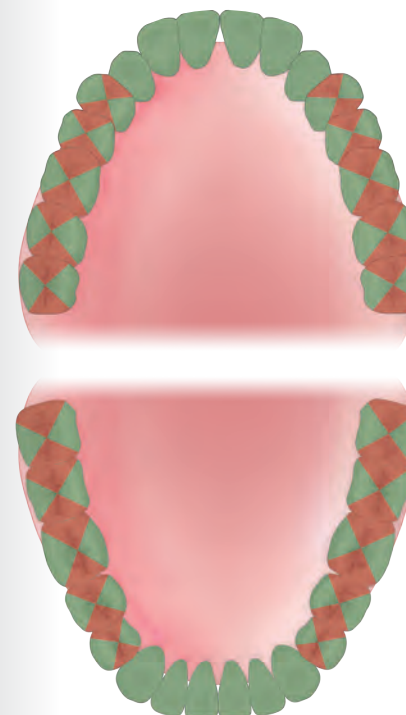
This overview shows the specific areas of application of the two Double Gracey curettes. Two instruments replace a full set of standard Gracey curettes.

Here you can see all the standard Gracey instruments that would usually be required for a complete treatment and their specific areas of application.

Double Gracey™ Mini XP instruments

Double Gracey™ Mini – for easy access to deep and narrow pockets and furcations.

Two instruments replace a complete set of Gracey Access curettes. These working ends have 50% shorter working ends and a 3 mm longer terminal shank than the standard Double Gracey curettes.



DG Mini Anterior DG Mini Posterior



DOUBLE GRACEY MINI ANTERIOR

AE DG MA XP X
Anterior + buccal/oral posterior



DOUBLE GRACEY MINI POSTERIOR

AE DG MP XP X
Posterior mesial/distal

Double Gracey		Replaces	Surfaces
AEDGAXPX	Anterior	Gracey 1-2, 3-4, 5-6, 7-8, 9-10 and universal curettes	Anterior + buccal/oral posterior
AEDGPXPX	Posterior	Gracey 11-12, 13-14, 15-16 and universal curettes	Posterior mesial/distal
AEDGMAXPX	Mini Anterior	Gracey Access 00-0, 1-2, 3-4, 5-6, 7-8 and universal curettes	Anterior + buccal/oral posterior
AEDGMPXPX	Mini Posterior	Gracey Access 11-12, 13-14, 15-16 and universal curettes	Posterior mesial/distal

Implant instruments

The implant instruments are made of medical grade titanium. This instrument series includes scalers and universal curettes.



AE IIB 5-6 X

The Barnhart 5-6 universal implant curette



AE II 204S X

The implant scaler 204S offers good access in the molar area due to its sharp angle

Implant instruments

The particularly lightweight handle made of EagleLite® plastic effectively prevents hand fatigue and enables particularly gentle use on sensitive implant surfaces.



AE II N128-L5 X

The N 128/Langer 5 combination is a modified sickle scaler featuring a universal anterior curette. The Nebraska 128 tip provides good access to small, narrow areas and the periphery of the implant abutment.

The working end of the Langer 5 is a universal curette that is suitable for all anterior implants in the upper and lower jaw.



AE II L3-4X

The Langer 3-4 universal curette replicates the shank angulation of the Gracey 13-14. The Langer 3-4 curette is a good choice for treating implant abutments in the molar or premolar region.

Why titanium?

With regular and optimal oral hygiene, the structures surrounding the implant can be kept healthy for a very long time.

Current evidence-based studies^{1,2} show that smooth, clean implant surfaces are significantly less susceptible to biofilm caused by peri-implant mucositis* or peri-implantitis**. Based on these findings, American Eagle developed an instrument set made of titanium that supports the efforts of practitioners towards long-term prognosis of implant treatment.

What is medical-grade titanium? – Medical-grade titanium is the currently most biocompatible material for implants on the market. Through the use of titanium that is softer than the implant itself, an instrument was developed that neither scratches the implant surface when used professionally nor leaves behind shavings during instrumentation.

Plastic curettes are not suitable for working on rough implant surfaces; they leave behind material residue, which in turn promotes the development of peri-implant diseases**.³

* Mucositis occurs in approximately 50% of patients with implants.³

** Peri-implantitis occurs in 12% to 47% of cases five years after placement.³

1. Darby, M, and Walsh, M. Dental Hygiene Theory and Practice, 4th ed.

2. Wilkins, E. Clinical Practice of the Dental Hygienist, 11th edition

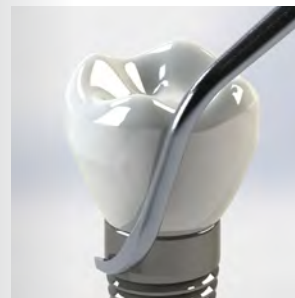
3. Nakamura, Linh, RDH, BS, and Dianne L. Sefto, RDH, BA. "Implant Instrumentation." Dimensions of Dental Hygiene. Dimensions of Dental Hygiene,

1 June 2013. Web. 18 May 2015.

Implant curettes	Properties	Indication
 Example: AE II B5-6 X, Barnhart 5 implant curette	– Rounded working end – Rounded side and back surface – Two cutting edges	– Supragingival and subgingival

Please note – medical grade titanium implant instruments were specially developed for implant prophylaxis. These instruments must not be used for work on crown margins, amalgam, cement, overhanging fillings or composite.

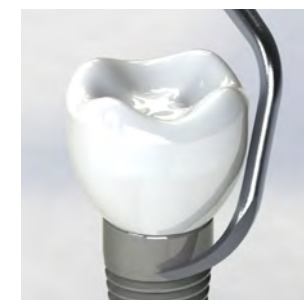
Tips for implant debridement



Removal of biofilm – supragingival work: a short, preferably gentle, horizontal stroke on the implant neck and abutment is recommended. The cutting edge must be at an angle of 70–80 degrees to the surface being worked on in order to protect the surrounding tissue and effectively remove biofilm.

Removal of tartar – locate the tartar and work from its base, applying light pressure, again at an angle of 70–80 degrees towards the surface to be worked on. Work on the abutment and exposed threads with short, horizontal strokes. The tartar can be removed without scratching the implant surface.

An intact and well-preserved working end is an absolute prerequisite for effectively removing tartar. Blunt cutting edges merely “smooth” the tartar. We recommend regular sharpening of your implant instruments.



Implant scaler	Properties	Indication
 Example: AE II 204S X, 204S implant scaler	– Bevelled side and back surface – Two cutting edges	– Hard-to-reach areas

Quik-Tips™ – interchangeable tips



The Quik-Tips from American Eagle Instruments save you money and reduce waste. You customise your hand instrument with different coloured handles and the familiar scaler and curette tips. In this way, you never have to replace the entire instrument when it wears out, just the worn working end. This reduces costs and protects the environment. The handles are available in different versions and colours. In this way, numerous individual models can be created. The accompanying tool makes it quick and easy to replace the Quik-Tips.

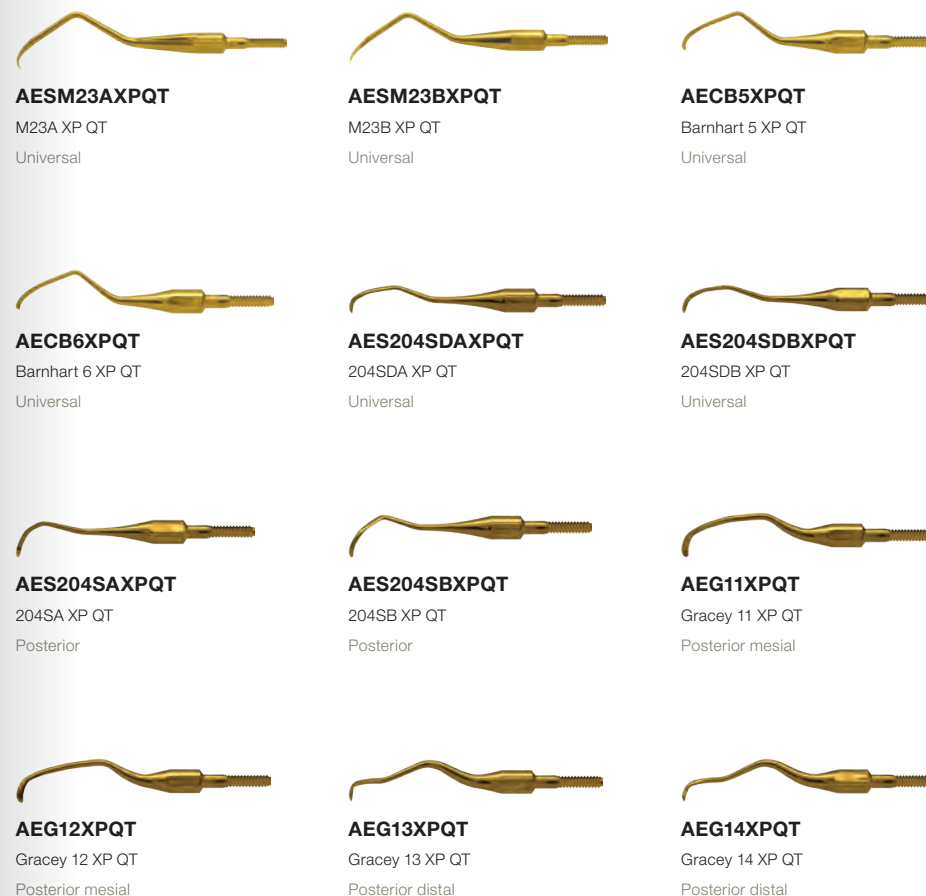


Quik-Tips™ – interchangeable tips

Available for scalers, curettes and Gracey curettes. The instrument tips are available as versions in sharpen-free XP Technology® or stainless steel. Selected tip designs are also available as extra thin Pro Thin Quik-Tips.

The assembled instruments can easily be sterilised in a thermal disinfectant.

Common tip designs as XP Quik-Tip versions:



GALAXIE instrument cassettes

GALAXIE instrument cassettes

The gold-standard solution for instrument reprocessing

The new instrument cassettes with an innovative tooth design guarantee maximum efficiency in the cleaning and sterilisation process. Additional cassette models, such as container and 1/1 DIN surgical cassettes and new clips for attaching hinged instruments increase the range of options for optimum reprocessing organisation in your practice.

AEC1/4DIN

Cassette in unique tooth design for 5 instruments, 1/4 DIN, blue rails, incl. 5 colour coding options (purple, red, yellow, green, black), 185x80x37

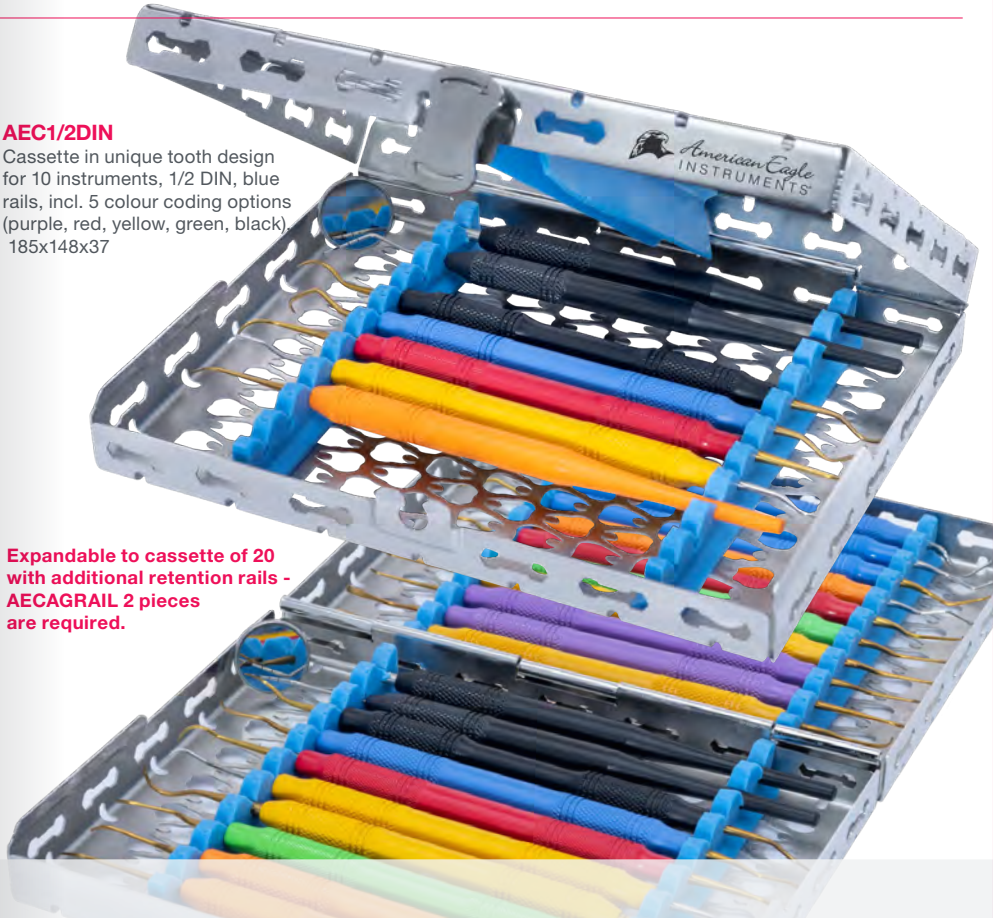
Expandable to cassette of 10 with additional retention rails AECAGRAIL, 1 piece is required.



AEC1/2DIN

Cassette in unique tooth design for 10 instruments, 1/2 DIN, blue rails, incl. 5 colour coding options (purple, red, yellow, green, black), 185x148x37

Expandable to cassette of 20 with additional retention rails - AECAGRAIL 2 pieces are required.



High-quality materials:

- Electropolished stainless steel with smooth edges for quick drying and protection against corrosion
- Use of food grade silicone

Innovative and ergonomic closing latch:

- Safe and easy-to-use locking system allows for one-handed opening

New design for an improved cleaning process

- The new and innovative laser-cut pattern guarantees maximum efficiency during the cleaning and sterilisation process, while ensuring the stability and strength of the cassette
- Open lattice design, specially intended for use in washer-disinfectors, enables maximum water through flow
- Smooth round edges and slotted corners increase drainage and reduce the drying time

Partcode	Description
AESCDIN	Surgical cassette in unique tooth design for up to 17 instruments, DIN, blue rails, incl. 5 colour coding options (purple, red, yellow, green, black), 285x183x37
AESCCON	Container cassette in unique tooth design for up to 16 instruments, fits DIN dental standard containers, with handle on lid, blue rails, incl. 5 colour coding options (purple, red, yellow, green, black), 268x176x34
AECAGRAIL	Retention Rail instrument rail, blue, 10 instruments, 1 piece
AECRAIL	Standard instrument rail, 10 instruments, blue, 1 piece
AECCRAIL	Compression rail, blue, V-profile, 1 piece
AESCLIPS	Clamp for scissors, 1 piece - NOTE: Use in pairs recommended for optimal fixation
AESCLIPNH	Clamp for needle holders or forceps, 1 piece - NOTE: Use in pairs recommended for optimal fixation
AESCTOOL	Assembly tool for scissors and needle holder clips, 1 piece

Cassettes are supplied without instruments and without additional silicone splints.

YOUNG[®]

INNOVATIONS



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