



OSTEOGENICS
REGENERATION
PRODUCTS CATALOG

INTERNATIONAL | www.osteogenics.com



25
1996 | 2021
OSTEOGENICS



WELCOME TO OSTEOGENICS BIOMEDICAL

We are Osteogenics Biomedical, makers of Cytoplast™. Established in 1996 with a goal to create a more predictable alternative to Gore-Tex® membranes, we have grown to be a leader in barrier membrane and PTFE suture technologies in the United States. After 20 years of product development focused on surgical predictability, we are expanding globally. We encourage you to try Cytoplast™ regenerative products to see why thousands of surgeons rely on us. We guarantee your satisfaction – or your money back. To find the distributor nearest you, go to www.osteogenics.com/GlobalNetwork.



TABLE OF CONTENTS

4	Zcore™ Porcine Xenograft Particulate
	RESORBABLE GTR BARRIER MEMBRANES
6	Cytoplast™ RTM Collagen
7	Cytoplast™ RTMPlug, RTMFoam, & RTMTape
8	Vitala® Porcine Derived Collagen
9	Zmatrix™ Porcine Peritoneum Collagen Membrane
10	The Cytoplast™ Technique
	NON-RESORBABLE GTR BARRIER MEMBRANES
11	Cytoplast™ TXT-200 & TXT-200 Singles
12	Cytoplast™ Ti-250 & Ti-150 Titanium-Reinforced
16	• RPM™ Reinforced PTFE Mesh
20	Cytoplast™ PTFE Suture
	Pro-Fix™ – Precision Fixation System
21	Pro-Fix™ Membrane Fixation
21	Pro-Fix™ Individual Components
22	Pro-Fix™ Tenting
23	Pro-Fix™ Bone Fixation

• *New Items Available*

| *All PART NUMBERS are denoted with a vertical bar*



Zcore™ is an osteoconductive, porous, anorganic bone mineral with a carbonate apatite structure derived from porcine cancellous bone.

INTERCONNECTING PORES

Interconnecting macroscopic and microscopic porous structure supports the formation and ingrowth of new bone

88% TO 95% VOID SPACE

88% to 95% Void Space: hyper-porosity of porcine cancellous matrix and intra-particle space facilitated by rough particle morphology reduce bulk density of the graft, allowing greater empty space for new bone growth*

PORCINE CANCELLOUS BONE

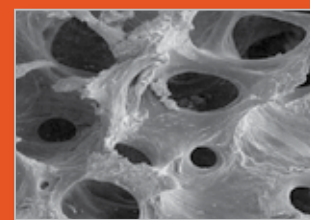
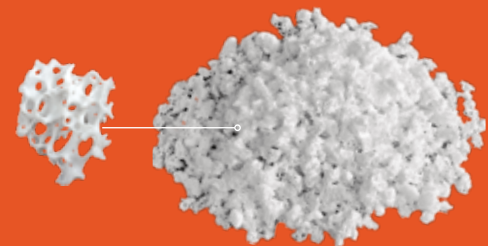
Derived from porcine cancellous bone, eliminating risk of BSE transmission

PROCESSED USING MINIMAL HEAT

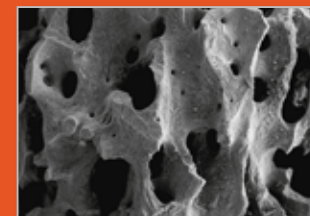
Heat treated to an optimal temperature that ensures a degree of crystallinity¹ consistent with native bone mineral to allow for remodeling of the healing bone

*0.25 mm - 1.0 mm particle size = 88% void space, 1.0 mm - 2.0 mm = 95% void space

1. Li ST, Chen HC, Yuen D. Isolation and Characterization of a Porous Carbonate Apatite From Porcine Cancellous Bone. *Science, Technology, Innovation*, Aug. 2014: 1-13.



SEM of Processed
Human Bone
Magnification x50



SEM of Zcore™ Porcine
Xenograft Particulate
Magnification x50

Zcore™

Porcine Xenograft Particulate

Zcore™ Porcine Xenograft Particulate

.25 mm - 1.0 mm Particle Size

0.5 cc	ZS050	(1 per box)
1.0 cc	ZS100	(1 per box)
2.0 cc	ZS200	(1 per box)
4.0 cc	ZS400	(1 per box)

1.0 mm - 2.0 mm Particle Size

1.0 cc	ZL100	(1 per box)
2.0 cc	ZL200	(1 per box)

Zcore™ Porcine Xenograft Particulate in Syringe

.25 mm - 1.0 mm Particle Size

0.25 cc	ZY025	(1 per box)
0.5 cc	ZY050	(1 per box)



not actual size

Cytoplast™ RTM Collagen

Type I bovine collagen membrane



15 mm x 20 mm

| RTM1520 (2 per box)

shown actual size



20 mm x 30 mm

| RTM2030 (2 per box)



30 mm x 40 mm

| RTM3040 (2 per box)



“...I am impressed with its **handling**, but most importantly, I am impressed with its **results**.”

*Jerald Rosenberg, DMD
Periodontist*

MANUFACTURED FROM HIGHLY PURIFIED TYPE 1 BOVINE ACHILLES TENDON

Safe for the patient

26 – 38 WEEK RESORPTION TIME

Long predictable resorption time limits the risk of particle loss due to premature resorption

HIGH TENSILE STRENGTH

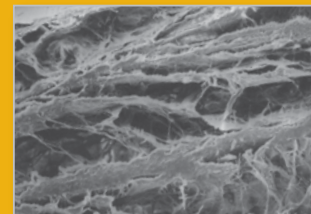
You can suture or tack the membrane in place without tearing

CELL OCCLUSIVE

Prevents epithelial down growth

OPTIMIZED FLEXIBILITY

Stiff enough for easy placement, yet easily drapes over ridge



Reconstituted fiber construction allows tissue integration while preventing direct passage of epithelial cells.

Cytoplast™ RTMPlug, RTMFoam, & RTMTape

Absorbable Wound Dressing | Type I & Type III bovine collagen



shown actual size



RTMPlug

1 cm x 2 cm

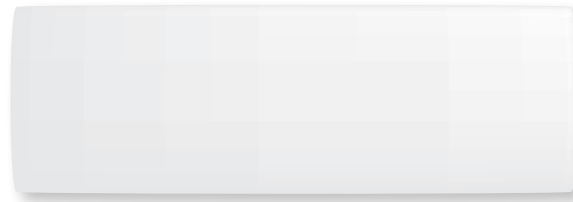
| RTMPLUG10 (10 per box)



RTMFoam

2 cm x 4 cm (3 mm thick)

| RTMFOAM10 (10 per box)



RTMTape

2.5 cm x 7.5 cm (1 mm thick)

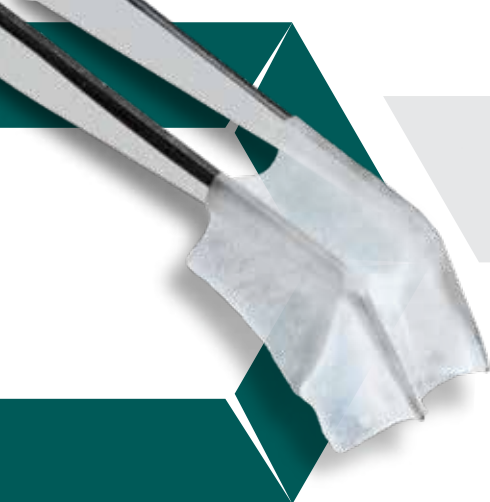
| RTMTAPE10 (10 per box)



Wound dressings will be essentially resorbed within 30 days

APPLICATIONS

- Surgical wounds
- Periodontal surgical wounds
- Extraction sites
- Dental sores
- Oral ulcers (non-infected or viral)
- Suture sites
- Burns
- Traumatic wounds



15 mm x 20 mm

| VIT1520 (1 per box)

shown actual size



13 mm x 25 mm

| VIT1325 (1 per box)



20 mm x 30 mm

| VIT2030 (1 per box)



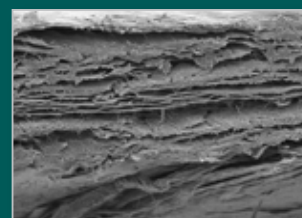
30 mm x 40 mm

| VIT3040 (1 per box)



“I have used Vitala™ membranes for larger GBR procedures and I really like the *ease of use, the drapeability/ no memory structure*, but still has the strength to allow tacking the membrane without tearing. Thus far, the regenerative results have been very promising.”

Samir Shah, DMD
Periodontist



1000x magnification



Excellent tensile strength



Supple and flexible

NATURAL

Manufactured using a proprietary protocol designed to maintain the natural, microporous, 3-layered architecture of the tissue without the need for cross-linking chemicals and agents

DURABLE

Designed to resist tearing during placement, Vitala® is naturally strong

ADAPTABLE

The natural collagen structure provides a unique combination of supple handling and ideal defect adaptability. Because both sides are smooth, either side may be placed against the defect

Zmatrix™

Porcine peritoneum collagen membrane | Substantially resorbed in 26 weeks



“I have used many easy-to-adapt materials. The Zmatrix™ works well in about any procedure where this type of barrier would be appropriate. It has **superior handling characteristics** and stays in place once adapted.”

Joseph Marchi, DMD
Periodontist

A perfectly soft consistency that drapes without the usual self-adherence experienced with other natural collagen membranes.



shown actual size



15 mm x 20 mm

| ZM1520 (1 per box)



20 mm x 30 mm

| ZM2030 (1 per box)



30 mm x 40 mm

| ZM3040 (1 per box)

NATURAL, NATIVE COLLAGEN MEMBRANE

Zmatrix™ is a natural, native collagen membrane; cross-linking chemicals and agents are unnecessary. Proprietary processing technology allows preservation of collagen as well as extracellular components including laminin, fibronectin, elastin, and glycosaminoglycans.*

EASY TO HANDLE

Designed to drape without adhering to itself

ELASTIC

Natural peritoneum collagen structure allows for elasticity

*Hoganson DM, Owens GE, O'Doherty EM, Bowley CM, Goldman SM, Harital DO, Neville CM, Kronen-gold RT, Vacanti JP. Preserved extracellular matrix components and retained biological activity in decellularized porcine mesothelium. *Biomaterials*. 2010, 27: 6934-6940.

Cytoplast™ Technique

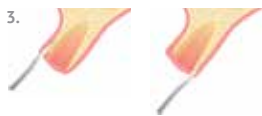
Ridge preservation without primary closure | U.S. Patent # 6,019,764



1. Preoperative view. To maximize the result of ridge preservation procedures, techniques designed to minimize trauma to the alveolar bone, such as the use of periostomes and surgical sectioning of ankylosed roots should be considered.



2. All soft tissue remnants should be removed with sharp curettage. Special care should be taken to remove all soft tissue at the apical extent of the socket of endodontically treated teeth. Bleeding points should be noted on the cortical plate. If necessary, decortication of the socket wall should be done with a #2 round burr to improve blood supply.



3. A subperiosteal pocket is created with a micro periosteal elevator or small curette, extending 3-5 mm beyond the socket margins on the palatal and the facial aspect of the socket. In the esthetic zone, rather than incising and elevating the interdental papilla, it is left intact and undermined in a similar fashion. The Cytoplast™ high-density PTFE membrane will be tucked into this subperiosteal pocket.



4. Particulate graft material can be placed into the socket with a syringe or with a curette. Ensure that the material is evenly distributed throughout the socket. However, the particles should not be densely packed to preserve ample space for blood vessel ingrowth.



5. The Cytoplast™ high-density PTFE membrane is trimmed to extend 3-5 mm beyond the socket walls and then tucked subperiosteally under the palatal flap, the facial flap and underneath the interdental papilla with a curette. The membrane should rest on bone 360° around the socket margins, if possible. Note that minimal flap reflection is necessary to stabilize the membrane.



6. Ensure that there are no folds or wrinkles in the membrane and that it lies passively over the socket. To prevent bacterial leakage under the membrane, take care to avoid puncturing the membrane, and do not overlap two adjacent pieces of membrane material.



7. The membrane is further stabilized with a criss-cross Cytoplast™ PTFE suture. Alternatively, interrupted sutures may be placed. The PTFE sutures, which cause minimal inflammatory response, are left in place for 10 to 14 days.



8. The membrane is removed, non-surgically, in 21 to 28 days. Sockets with missing walls may benefit from the longer time frame. Topical anesthetic is applied, then the membrane is grasped with a tissue forcep and removed with a gentle tug.



9. Studies have shown that by 21-28 days there is a dense, vascular connective tissue matrix in the socket and early osteogenesis is observed in the apical 2/3 of the socket.



10. Immediately following membrane removal, a dense, highly vascular, osteoid matrix is observed. The natural position of the gingival margin has been left intact because primary closure was not necessary. The dense PTFE membrane has contained the graft material and prevented epithelial migration into the socket.



11. The socket at 6 weeks. Keratinized gingiva is beginning to form over the grafted socket. The natural soft tissue architecture is preserved, including the interdental papillae. New bone is beginning to form in the socket. Over the next 6 to 10 weeks, increasing thickness of trabeculae and mineralization will result in load bearing bone suitable for implant placement.

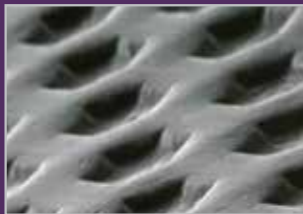
Cytoplast™ TXT-200 & TXT-200 Singles

Micro-textured, high-density PTFE membrane



“I always know, *in advance*, the results of my bone grafting when I use Cytoplast™ TXT-200 as a membrane. *Why bother with other membranes?*”

Mark Cohen, DDS
Periodontist



The patented *Regentex™* surface helps stabilize the membrane and the soft tissue flap. Hexagonal surface dimples provide a textured surface that increases the area available for cellular attachment without increasing porosity. U.S. Patent #5,957,690



shown actual size

**MOST POPULAR SOCKET
GRAFTING MEMBRANE**



TXT-200 Singles

12 mm x 24 mm

| TXT1224-1 (1 per box)

| TXT1224 (10 per box)

TXT-200

25 mm x 30 mm

| TXT2530-1 (1 per box)

| TXT2530 (4 per box)

NON-RESORBABLE

Won't resorb prematurely – you dictate healing time

100% DENSE (NON-EXPANDED) PTFE

Impervious to bacteria (pore size less than 0.3 µm) *Data on file*

PURPOSELY LEAVE THE MEMBRANE EXPOSED

Preservation of the soft tissue architecture and keratinized mucosa

SOFT TISSUE ATTACHES, BUT DOESN'T GROW THROUGH THE MEMBRANE

Exposed membrane allows for non-surgical removal; no anesthesia required

HEXAGONAL DIMPLES INCREASE SURFACE AREA

Designed to increase membrane stabilization



Cytoplast™ Titanium-Reinforced

Titanium-reinforced, high-density PTFE membrane

Ti-250 (250 µm thick)	Ti-150 (150 µm thick)
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ANL

12 mm x 24 mm

Ti250ANL-1	Ti150ANL-1	(1 per box)
Ti250ANL-2	Ti150ANL-2	(2 per box)

Designed for narrow single-tooth extraction sites, especially where one bony wall is missing

ANL30

12 mm x 30 mm

Ti250ANL30-1	(1 per box)
Ti250ANL30-2	(2 per box)

Designed for narrow single-tooth extraction sites, especially where one bony wall is missing

PS

20 mm x 25 mm

Ti250PS-1	Ti150PS-1	(1 per box)
Ti250PS-2	Ti150PS-2	(2 per box)

Designed for large extraction sites and limited ridge augmentation

PL

25 mm x 30 mm

Ti250PL-1	Ti150PL-1	(1 per box)
Ti250PL-2	Ti150PL-2	(2 per box)

Designed for large bony defects, including ridge augmentation

VERSATILE RECTANGULAR SHAPES

These configurations can be trimmed to fit a variety of defects. Shown actual size.



Cytoplast™ Titanium-Reinforced

Titanium-reinforced, high-density PTFE membrane



VERSATILE RECTANGULAR SHAPES

These configurations can be trimmed to fit a variety of defects.

Shown actual size.



*Ti-150 membranes are 40% thinner than Ti-250 membranes, providing clinicians another handling option in Cytoplast™ Titanium-Reinforced Membranes.

Ti-250 (250 µm thick)	Ti-150 (150 µm thick)
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XL

30 mm x 40 mm

Ti250XL-1	Ti150XL-1	(1 per box)
Ti250XL-2	Ti150XL-2	(2 per box)

Designed for very large bony defects, including ridge augmentation

XLK

30 mm x 40 mm

Ti250XLK-1	Ti150XLK-1	(1 per box)
Ti250XLK-2	Ti150XLK-2	(2 per box)

Designed for very large bony defects, including ridge augmentation

K2

40 mm x 50 mm

Ti250K2-1	Ti150K2-1	(1 per box)
Ti250K2-2	Ti150K2-2	(2 per box)

Designed for the largest bony defects, including ridge augmentation



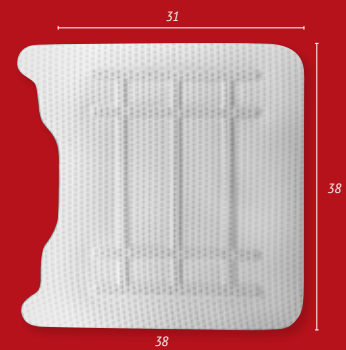
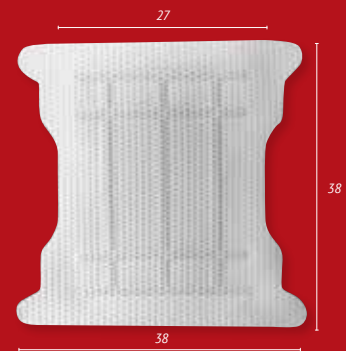
Cytoplast™ Titanium-Reinforced

Titanium-reinforced, high-density PTFE membrane

Dimensional measurements shown in mm.
Width measurements noted at widest point
and narrowest point. Shown actual size.

INTERPROXIMAL SHAPES

These configurations are designed
to fit between existing teeth.



Ti-250 (250 µm thick)	Ti-150 (150 µm thick)
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AS

14 mm x 24 mm

Ti250AS-1	Ti150AS-1	(1 per box)
Ti250AS-2	Ti150AS-2	(2 per box)

Designed for single-tooth extraction sites, especially
where one or more bony walls are missing

ATC

24 mm x 38 mm

Ti250ATC-1	Ti150ATC-1	(1 per box)
Ti250ATC-2	Ti150ATC-2	(2 per box)

Designed for large extraction sites, including ridge
augmentation

PTC

38 mm x 38 mm

Ti250PTC-1	Ti150PTC-1	(1 per box)
Ti250PTC-2	Ti150PTC-2	(2 per box)

Designed for large bony defects, including ridge
augmentation

PD

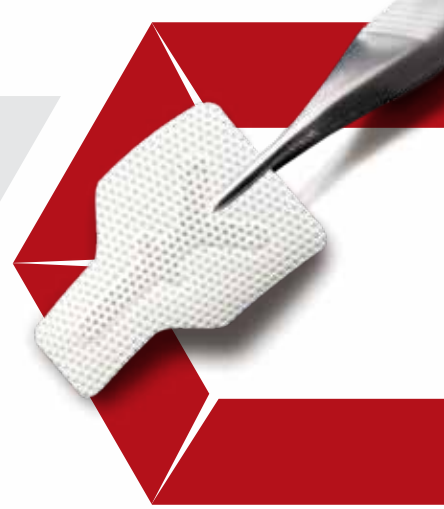
38 mm x 38 mm

Ti250PD-1	Ti150PD-1	(1 per box)
Ti250PD-2	Ti150PD-2	(2 per box)

Designed for large bony defects, including distal
extension of the posterior ridge

Cytoplast™ Titanium-Reinforced

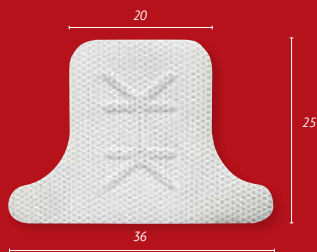
Titanium-reinforced, high-density PTFE membrane



Dimensional measurements shown in mm.
Width measurements noted at widest point
and narrowest point. Shown actual size.

SHAPES WITH FIXATION POINTS

These configurations are designed with
fixation points outside of the defect area.



Ti-250 (250 µm thick)	Ti-150 (150 µm thick)
--------------------------	--------------------------

BL

17 mm x 25 mm

Ti250BL-1	Ti150BL-1	(1 per box)
Ti250BL-2	Ti150BL-2	(2 per box)

Designed for large buccal defects

BLL

17 mm x 30 mm

Ti250BLL-1	Ti150BLL-1	(1 per box)
Ti250BLL-2	Ti150BLL-2	(2 per box)

Designed for large buccal defects

PST

36 mm x 25 mm

Ti250PST-1	Ti150PST-1	(1 per box)
Ti250PST-2	Ti150PST-2	(2 per box)

*Designed for large extraction sites and limited ridge
augmentation in the anterior maxilla*

PLT

41 mm x 30 mm

Ti250PLT-1	Ti150PLT-1	(1 per box)
Ti250PLT-2	Ti150PLT-2	(2 per box)

*Designed for large bony defects, including ridge
augmentation in the anterior maxilla*



CIRCULAR MACROPORES

Allow direct contact between the bone graft and periosteum, allowing naturally occurring revascularization and infiltration of cells into the bone graft

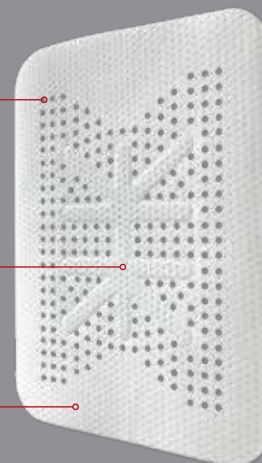
TITANIUM FRAME

Maintains space essential for horizontal and vertical ridge augmentation

PTFE MESH

Easily conforms to tissue contours

Hybrid Approach: Adaptability of a membrane with the porosity of a mesh



PS

20 mm x 25 mm

| RPM200PS (1 per box)

Designed for large extraction sites and limited ridge augmentation

PL

25 mm x 30 mm

| RPM200PL (1 per box)

Designed for large bony defects, including ridge augmentation

XLK

30 mm x 40 mm

| RPM200XLK (1 per box)

Designed for very large bony defects, including ridge augmentation

XLKM (mandible)

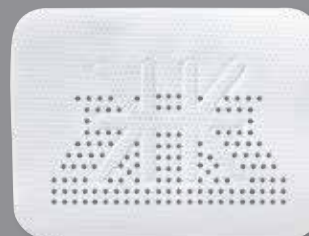
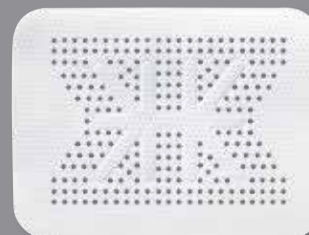
30 mm x 40 mm

| RPM200XLKM (1 per box)

Designed for very large bony defects, including mandibular ridge augmentation NOTE: Non-perforated region is designed for lingual aspect

VERSATILE RECTANGULAR SHAPES

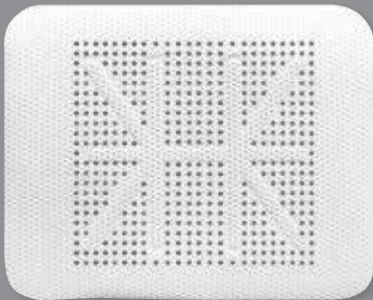
These configurations can be trimmed to fit a variety of defects. Shown actual size.



RPM™

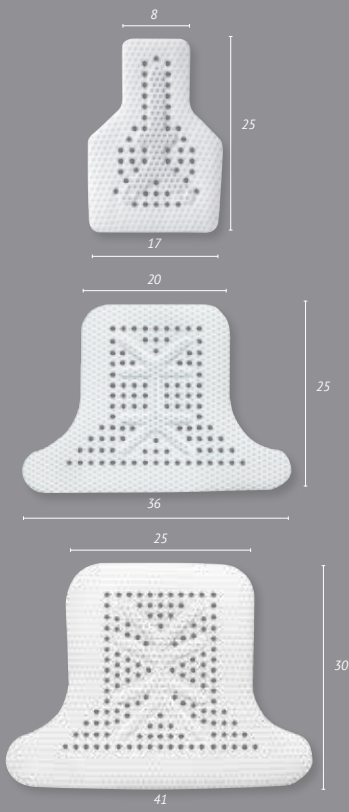
Reinforced PTFE mesh

Dimensional measurements shown in mm.
Width measurements noted at widest point
and narrowest point. Shown actual size.



SHAPES WITH FIXATION POINTS

These configurations are designed with
fixation points outside of the defect area.



XL

30 mm x 40 mm

| RPM200XL (1 per box)

*Designed for very large bony defects, including ridge
augmentation*

K2

40 mm x 50 mm

| RPM200K2 (1 per box)

*Designed for the largest bony defects, including ridge
augmentation*

BL

17 mm x 25 mm

| RPM200BL (1 per box)

Designed for large buccal defects

PST

36 mm x 25 mm

| RPM200PST (1 per box)

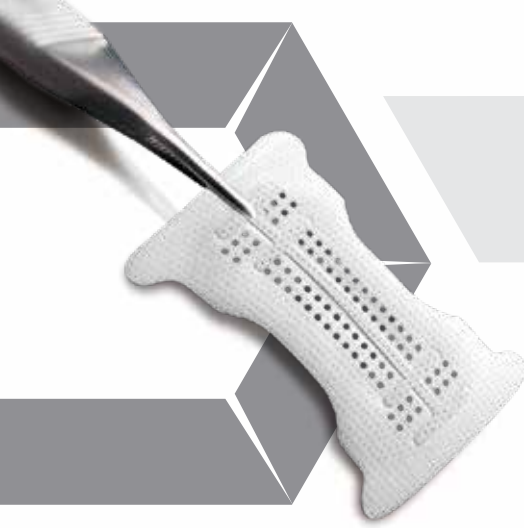
*Designed for large extraction sites and limited ridge
augmentation in the anterior maxilla*

PLT

41 mm x 30 mm

| RPM200PLT (1 per box)

*Designed for large bony defects, including ridge
augmentation in the anterior maxilla*



ATC

24 mm x 38 mm

| RPM200ATC (1 per box)

Designed for large extraction sites, including ridge augmentation

ATCM (mandible)

24 mm x 38 mm

| RPM200ATCM (1 per box)

Designed for large extraction sites, including mandibular ridge augmentation NOTE: Non-perforated region is designed for lingual aspect

PTC

38 mm x 38 mm

| RPM200PTC (1 per box)

Designed for large bony defects, including ridge augmentation

PTCM (mandible)

38 mm x 38 mm

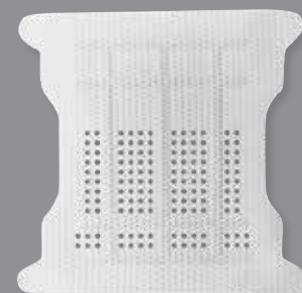
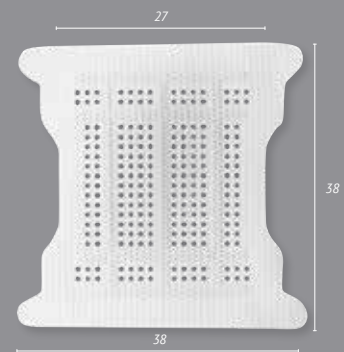
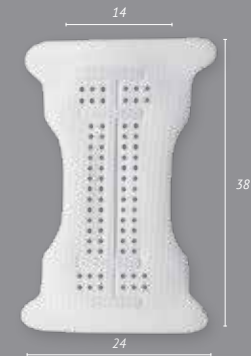
| RPM200PTCM (1 per box)

Designed for large bony defects, including mandibular ridge augmentation NOTE: Non-perforated region is designed for lingual aspect

Dimensional measurements shown in mm. Width measurements noted at widest point and narrowest point. Shown actual size.

INTERPROXIMAL SHAPES

These configurations are designed to fit between existing teeth.



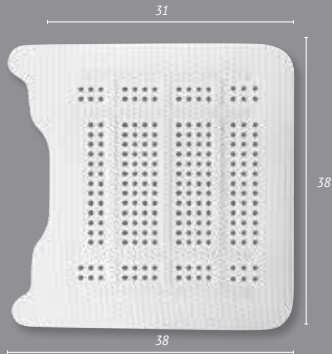
RPM™

Reinforced PTFE mesh

Dimensional measurements shown in mm.
Width measurements noted at widest point
and narrowest point. Shown actual size.

INTERPROXIMAL SHAPES

These configurations are designed
to fit between existing teeth.



PD

38 mm x 38 mm

| RPM200PD

(1 per box)

Designed for large bony defects, including distal extension of the posterior ridge

PDMR (mandible right)

38 mm x 38 mm

| RPM200PDMR

(1 per box)

Designed for large bony defects, including distal extension of the right posterior mandibular ridge
NOTE: Non-perforated region is designed for lingual aspect

PDML (mandible left)

38 mm x 38 mm

| RPM200PDML

(1 per box)

Designed for large bony defects, including distal extension of the left posterior mandibular ridge
NOTE: Non-perforated region is designed for lingual aspect

Cytoplast™ PTFE Suture

The soft monofilament suture



All Cytoplast™ Sutures are 12 per box

18" Undyed 28" Undyed	Precision RC 19 mm	2/0 USP	CS0418 CS0428
18" Undyed 28" Undyed	Precision RC 16 mm	3/0 USP	CS0518 CS0528
18" Undyed 28" Undyed	Precision RC 19 mm	3/0 USP	CS051819 CS052819
18" Undyed 28" Undyed	RC 16 mm black needle	3/0 USP	CS0518BK CS0528BK
18" Undyed 28" Undyed	RC 19 mm black needle	3/0 USP	CS051819BK CS052819BK
18" Undyed 28" Undyed	TP 13 mm	4/0 USP	CS0618PERIO CS0628PERIO
18" Undyed 28" Undyed	Precision RC 13 mm	4/0 USP	CS0618PREM CS0628PREM
18" Undyed 28" Undyed	Precision RC 16 mm	4/0 USP	CS0618RC CS0628RC
18" Undyed 28" Undyed	Precision RC 13 mm	5/0 USP	CS071813 CS072813
18" Undyed 28" Undyed	Precision RC 16 mm	5/0 USP	CS071816 CS072816



300 SERIES STAINLESS STEEL NEEDLES

All Cytoplast™ PTFE Sutures now have 300 series stainless steel needles, the gold standard material for suture needles. Tests comparing the new needles to previous needles show a substantial increase in needle strength, initial needle sharpness, and sustained needle sharpness. Tests show that the new 300 series needles are less likely to bend, require less force to penetrate, and maintain sharpness longer. Additionally, all silver needles now have longer and geometrically finer precision cutting edges. Data on file

NEEDLE CODE DETAIL

RC 3/8 CIRCLE REVERSE CUTTING



TP 1/2 CIRCLE ROUND-BODIED

100% MEDICAL GRADE PTFE

Biologically inert

MONOFILAMENT

Doesn't wick bacteria

SOFT (NOT STIFF)

Comfortable for patients

LITTLE TO NO PACKAGE MEMORY

Excellent handling, knots securely

NON-RESORBABLE

Keeps the surgical site reliably closed

Pro-Fix™ Membrane Fixation

Precision Fixation System

Pro-fix™ Membrane Fixation Screws are designed as an attractive alternative to using tacks for membrane stabilization. Easy pick-up, solid stability of the screw during transfer to the surgical site, and easy placement make membrane fixation fast and easy.



Tray and organizer dial are designed to store all Pro-fix™ components including up to 100 membrane fixation, tenting, and bone fixation screws. Blades are designed to work universally with all Pro-fix™ membrane fixation, tenting, and bone fixation screws.



Membrane Fixation Kit

| PFMK20

Autoclavable Tecapro™ storage tray w/ screw organizer dial

Stainless steel driver handle

76 mm cruciform driver blade

56 mm cruciform driver blade

(20) 1.5 x 3 mm self-drilling membrane fixation screws

Self-Drilling Membrane Fixation Screws

1.5 mm x 3 mm

| PFMF-5 (5 per box)

| PFMF-10 (10 per box)

| PFMF-20 (20 per box)



actual size



Individual Components

Stainless Steel Driver Handle | PFDH

76 mm Cruciform Driver Blade | PFDH

56 mm Cruciform Driver Blade | PFDH56

24 mm Contra Angle Blade (10 mm exposed distal length) | PFDHCA

1.2 mm diam. Latch Type Pilot Drill | PFPD

Autoclavable Tecapro™ storage tray | PFT

Pro-Fix™ Tenting

Precision Fixation System



Pro-fix™ Tenting Screws are designed with a self-drilling tip, polished neck, and broader head to maintain space under resorbable and non-resorbable membranes in horizontal and vertical bone regeneration procedures.

Tenting Kit

| PFTK12

Autoclavable Tecapro™ storage tray w/ screw organizer dial

Stainless steel driver handle

76 mm cruciform driver blade

56 mm cruciform driver blade

(4) 1.5 x 3 mm self-drilling tenting screws (7 mm total length)

(4) 1.5 x 4 mm self-drilling tenting screws (8 mm total length)

(4) 1.5 x 5 mm self-drilling tenting screws (9 mm total length)

For individual Pro-Fix™ driver and container components, see opposite page.



Self-Drilling Tenting Screws

1.5 mm x 3 mm polished neck
+ 4 mm threaded portion = 7 mm total

| PFT3 (1 per box)

| PFT3-5 (5 per box)

1.5 mm x 4 mm polished neck
+ 4 mm threaded portion = 8 mm total

| PFT4 (1 per box)

| PFT4-5 (5 per box)

1.5 mm x 5 mm polished neck
+ 4 mm threaded portion = 9 mm total

| PFT5 (1 per box)

| PFT5-5 (5 per box)

Fully Threaded Self-Drilling Tenting Screws

1.5 mm x 8 mm

| PFT8 (1 per box)

1.5 mm x 10 mm

| PFT10 (1 per box)



actual size

actual size

actual size



actual size

actual size

Pro-Fix™ Bone Fixation

Precision Fixation System

Pro-fix™ Bone Fixation Screws are designed with finer pitched, self-tapping threads that give the screws greater clamping force while using less driver torque. The screws' threads are equipped with a cutting flute that allows for easier insertion into harder bone. The screws are placed into a 1.2 mm pre-drilled pilot hole.



Bone Fixation Kit

| PFBK12

Autoclavable Tecapro™ storage tray w/ screw organizer dial

Stainless steel driver handle

76 mm cruciform driver blade

56 mm cruciform driver blade

1.2 mm diameter latch type pilot drill

(2) 1.5 x 8 mm bone fixation screws

(4) 1.5 x 10 mm bone fixation screws

(4) 1.5 x 12 mm bone fixation screws

(2) 1.5 x 14 mm bone fixation screws

For individual Pro-Fix™ driver and container components, see page 32.

Self-Tapping Bone Fixation Screws

1.5 mm x 8 mm

| PFB8 (1 per box)

| PFB8-5 (5 per box)



actual size

1.5 mm x 10 mm

| PFB10 (1 per box)

| PFB10-5 (5 per box)

actual size

1.5 mm x 12 mm

| PFB12 (1 per box)

| PFB12-5 (5 per box)

actual size

1.5 mm x 14 mm

| PFB14 (1 per box)

| PFB14-5 (5 per box)

actual size



INTERNATIONAL +1 806.796.1923
EMAIL sales@osteogenics.com
WEBSITE www.osteogenics.com
ADDRESS Osteogenics Biomedical, Inc.
4620 71st Street | Building 78-79
Lubbock, TX 79424

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