| 1 | reflecting, reflect until you see that. |
| :---: | :---: |
| 00:00:02.110 --> 00:00:07.460 |  |
| Okay, so now you have your two anterior |  |
| sites prepped with the two millimeter | 00:00:48.050 --> 00:00:50.840 |
|  | It's not going to be as distinct on the |
| 2 |  |
| 00:00:07.470 --> 00:00:08.880 | 15 |
| twist drills, right? | 00:00:50.850 --> 00:00:51.840 |
|  | live patient, right? |
| 3 |  |
| 00:00:08.910 --> 00:00:10.080 | 16 |
| We're not finishing these. | 00:00:51.970 --> 00:00:53.020 |
|  | Because you're actually going to have |
| 4 |  |
| 00:00:10.090 --> 00:00:15.720 | 17 |
| We're not finishing these preparations or | 00:00:53.030 --> 00:00:54.060 |
| placing these implants until we find the | something coming out of there. |
| 5 | 18 |
| 00:00:15.730 --> 00:00:20.140 | 00:00:54.410 --> 00:00:55.760 |
| posterior sites and find out exactly | You're not going to see a hole there. |
| where our implants are going to go in |  |
|  | 19 - |
| 6 | 00:00:55.810 --> 00:00:59.500 |
| 00:00:20.150 --> 00:00:21.440 | You're going to see like some tissue |
| these distal sites. | coming out of the mandible. |
| 7 | 20 |
| 00:00:22.070 --> 00:00:27.740 | 00:00:59.870 --> 00:01:03.740 |
| So what you want to do is reflect the | And so you'll see it around this area right here, all right? |
| 8 |  |
| 00:00:27.750 --> 00:00:30.440 |  |
| tissue back until you find the mental foramen. | 00:01:04.250 --> 00:01:10.560 |
|  | And so obviously you want to make sure |
| 9 | you avoid compressing or damaging any of |
| 00:00:31.050 --> 00:00:33.300 |  |
| Now, you can use this periosteal elevator. | 22 |
|  | 00:01:10.570 --> 00:01:11.700 |
| 10 | the stuff that's in here. |
| 00:00:33.430 --> 00:00:38.400 |  |
| I prefer to use a bigger periosteal | 23 |
| elevator just so you reduce the chance of | 00:01:12.130 --> 00:01:13.640 |
|  | And so you're going to be placing your |
| 11 |  |
| 00:00:38.410 --> 00:00:39.120 |  |
| damaging the nerve. | 00:01:13.650 --> 00:01:16.120 implant distally, right? |
| 12 俍 |  |
| 00:00:39.890 --> 00:00:42.320 | 25 |
| But you can just reflect back, just keep | 00:01:16.170 --> 00:01:19.020 <br> So it's going to be like this, okay? |
| 13 ( |  |
| 00:00:42.330 --> 00:00:47.820 |  |


| 26 | 39 |
| :---: | :---: |
| 00:01:19.690 --> 00:01:24.600 | 00:02:02.010 --> 00:02:03.540 |
| And you got to keep in mind that sometimes in the mental foramen or inside | So six millimeters anterior to this. |
|  | 40 |
| 27 | 00:02:03.590 --> 00:02:04.460 |
| 00:01:24.610 --> 00:01:27.300 <br> this area right here, there's an anterior loop. | You want to measure that out. |
|  |  |
| 28 | 00:02:04.550 --> 00:02:07.120 |
| 00:01:27.310 --> 00:01:30.720 | If you have a perioprobe, you want to use that. |
| So the nerve comes from back here and |  |
| 29 | 00:02:07.430 --> 00:02:08.780 |
| 00:01:30.730 --> 00:01:31.540 | I'm just going to use this right here. |
| exits here. | $43$ |
| 30 | 00:02:09.130 --> 00:02:11.160 |
| 00:01:31.610 --> 00:01:33.020 | So six millimeters, I can kind of eyeball it. |
| But sometimes the nerve does a little |  |
|  | 44 |
| 31 | 00:02:12.230 --> 00:02:13.640 |
| 00:01:33.030 --> 00:01:36.340 curve anterior and then it comes out. | Six millimeters is like right here. |
|  | 45 |
| 32 | 00:02:16.630 --> 00:02:18.900 |
| 00:01:36.670 --> 00:01:38.180 | And so what you can use, you can use a |
| So we want to avoid that. |  |
| 33 | 00:02:18.910 --> 00:02:21.420 |
| 00:01:38.350 --> 00:01:42.680 | pencil, you know, sterilized pencil. |
| The average anterior loop is like two and a half millimeters, something like that. |  |
|  | 00:02:21.810 --> 00:02:23.200 |
| 34 | You can use a surgical marker. |
| 00:01:42.790 --> 00:01:46.680 |  |
| So you do want to look at a cone beam | 48 |
| just to make sure what your patient's | 00:02:23.210 --> 00:02:29.040 |
|  | What I'm going to use right now because |
| 35 | I've got it and just to make it really |
| 00:01:46.690 --> 00:01:47.760 anterior loop looks like. |  |
|  |  |
|  | 00:02:29.050 --> 00:02:34.580 |
| 36 | easy for you to see is I'm going to mark |
| 00:01:48.310 --> 00:01:52.920 | with this little round burr six |
| But one rule of thumb that I use is to | $50$ |
| 37 | 00:02:34.590 --> 00:02:36.180 |
| 00:01:52.930 --> 00:01:58.360 | millimeters anterior to the foramen. |
| just place my implant so that it's kind |  |
| of pointed so that I'm aiming it six | $\begin{array}{\|l\|} 51 \\ \text { 00:02:42.510 --> 00:02:44.760 } \end{array}$ |
| 38 | All right, so I marked six millimeters anterior. |
| 00:01:58.370 --> 00:02:01.920 <br> millimeters anterior to this, all right? |  |


| 52 | 64 |
| :---: | :---: |
| 00:02:45.710 --> 00:02:51.440 | 00:03:34.610 --> 00:03:35.740 |
| And so now I know that I want to aim my distal implant towards this little | Give me just one second. |
|  | 65 |
| 53 | 00:03:40.370 --> 00:03:43.460 |
| 00:02:51.450 --> 00:02:54.040 marking, all right? | All right, so now I got my lance pilot drill. |
|  | 66 |
| 54 | 00:03:44.170 --> 00:03:46.920 |
| 00:02:54.910 --> 00:02:58.480 | And this part is, this part's very |
| And so what I like to do, if it was an |  |
| 55 | 00:03:46.930 --> 00:03:47.660 |
| 00:02:58.490 --> 00:03:05.000 <br> extraction and implant placement site, I | technique sensitive. |
| like to aim by using the extraction sites. | 68 |
|  | 00:03:47.870 --> 00:03:50.080 |
| 56 | You can use a denture guide. |
| 00:03:05.370 --> 00:03:10.380 |  |
| So I might say, okay, I'm going to place | 69 |
| it kind of through the extraction site of | 00:03:50.210 --> 00:03:53.800 |
|  | You can use a 3D printed guide. |
| 57 |  |
| 00:03:10.390 --> 00:03:14.460 | 70 |
| the canine or into the premolar and then | 00:03:54.050 --> 00:03:55.040 |
| it's going to go through the canine | I mean, use whatever you want. |
| 58 | 71 |
| 00:03:14.470 --> 00:03:16.660 | 00:03:55.050 --> 00:04:00.220 |
| extraction site towards the apical portion. | I'm just telling you what, what I do and it's working out okay for me. |
| 59 |  |
| 00:03:16.930 --> 00:03:18.480 | 72 |
| But in this case, it's a healed site. | 00:04:00.510 --> 00:04:03.980 |
|  | But yeah, I would use, I would use like a |
| 60 | clear denture guide. |
| 00:03:18.650 --> 00:03:22.660 |  |
| So I'm just going to place my implant | 73 |
| straight in here and aim it right there. | 00:04:04.050 --> 00:04:07.920 |
|  | If you're just getting started, use a |
| 61 | clear duplicate denture with a trough, a |
| 00:03:23.530 --> 00:03:28.600 |  |
| All right, and I want to be aware of this | 74 |
| angle, the angle between these two. | 00:04:07.930 --> 00:04:11.160 |
|  | lingual trough, and then you're better |
| 62 | able to approximate these things. |
| 00:03:29.150 --> 00:03:32.020 |  |
| So let's go ahead and prepare this | 75 |
| implant site right here. | 00:04:11.630 --> 00:04:14.140 |
|  | So here's my side view. |
| 63 (76 |  |
| 00:03:32.790 --> 00:03:34.220 | 76 |
| I'm going to switch off my drill. | 00:04:14.450 --> 00:04:17.060 <br> So I start it here and then I bring it up |


| 77 | 00:05:02.940 --> 00:05:04.810 |
| :---: | :---: |
| 00:04:17.070 --> 00:04:19.140 | Okay, that looks like, I don't know, it |
| here just so I kind of confirm the angle. | $91$ |
| 78 | 00:05:04.820 --> 00:05:07.050 |
| 00:04:20.990 --> 00:04:22.520 | looks like it could be like 25 degree |
| All right, if I place it like this, | angle or something. |
| 79 | 92 |
| 00:04:22.890 --> 00:04:24.760 | 00:05:07.680 --> 00:05:09.170 |
| that's like a 15 degree angle. | But I think that's looking pretty good. |
| 80 | 93 |
| 00:04:25.050 --> 00:04:25.700 | 00:05:09.260 --> 00:05:12.470 |
| I don't want that. | Let's see if we're aimed towards that marking. |
| 81 | 94 |
| 00:04:25.830 --> 00:04:27.280 | 00:05:12.660 --> 00:05:13.710 |
| I want a 30 degree angle, right? | Yeah, we're aimed towards that marking. |
| 82 | 95 |
| 00:04:27.490 --> 00:04:28.980 | 00:05:13.880 --> 00:05:15.950 |
| Because you want to get as far distally | If anything, we're just a little bit shy |
| 83 | 96 |
| 00:04:28.990 --> 00:04:29.560 | 00:05:15.960 --> 00:05:22.130 |
| as you can. | of, we're like a little bit even further from the mental frame and the nerve than |
| 84 |  |
| 00:04:32.250 --> 00:04:33.780 | 97 |
| So see right there. | 00:05:22.140 --> 00:05:22.670 we need to be. |
| 85 |  |
| 00:04:34.890 --> 00:04:36.840 | 98 |
| That looks like approximately a 30 degree angle. | 00:05:22.840 --> 00:05:24.130 <br> But it's always better to play it safe. |
| 86 |  |
| 00:04:37.090 --> 00:04:37.900 | 99 |
| I'm going to get started. | 00:05:25.500 --> 00:05:27.590 <br> All right, so l'm going to go ahead and |
| 87 | keep preparing. |
| 00:04:38.490 --> 00:04:40.880 |  |
| Remember, I'm getting started and then | 100 |
| I'm going to re -evaluate. | 00:05:28.140 --> 00:05:30.750 <br> I'm going to angle this just a little bit |
| 88 | more because our angle is just a little |
| 00:04:55.940 --> 00:04:59.670 |  |
| So now that I prepped it, I'm going to |  |
| put this back in and I'm going to re | 00:05:30.760 --> 00:05:33.250 bit conservative. |
| 89 |  |
| 00:04:59.680 --> 00:05:00.830 | 102 |
| -evaluate my angles. | 00:05:34.400 --> 00:05:39.530 <br> I find that, at least in my situation, I |
| 90 |  |


| 103 | 00:06:26.150 --> 00:06:27.420 |
| :---: | :---: |
| 00:05:39.540 --> 00:05:43.770 under -prepare the angles. | You need the twist drills. |
|  |  |
| 104 | 00:06:27.930 --> 00:06:32.160 |
| 00:05:43.960 --> 00:05:45.910 | So I'm going to take this out and put my |
| What I mean by that is, when I'm aiming | little parallel pin in there. |
| 105 | 118 |
| 00:05:45.920 --> 00:05:49.090 | 00:06:36.370 --> 00:06:42.740 |
| for like a 30 degree angle, I do like a | Okay, and now l'm going to go ahead and |
| 20 or 25 degree angle. | prepare this sight right here with a two |
| 106 | 119 |
| 00:05:51.160 --> 00:05:54.610 | 00:06:42.750 --> 00:06:43.600 |
| All right, so let's go ahead and reflect | millimeter twist drill. |
| it back so you still see your little |  |
|  | 120 |
| 107 | 00:06:55.240 --> 00:06:57.350 |
| 00:05:54.620 --> 00:05:55.230 | Trying to give you the best angle possible. |
| markings there. |  |
|  | 121 |
| 108 | 00:06:57.740 --> 00:07:00.870 |
| 00:05:57.260 --> 00:06:00.590 | We're trying to give you the best view possible. |
| And, all right, ready, let's do it. |  |
|  | 122 |
| 109 | 00:07:02.580 --> 00:07:06.400 |
| 00:06:02.640 --> 00:06:03.950 | All right, I'm going to prepare this one |
| I'm just going to take it a little bit further. |  |
|  | 123 |
| 110 | 00:07:06.410 --> 00:07:07.560 |
| 00:06:07.970 --> 00:06:10.220 | for an 11.5 as well. |
| All right, so that's looking better to me. |  |
|  | 124 |
| 111 | 00:07:27.660 --> 00:07:29.870 |
| 00:06:10.270 --> 00:06:12.600 | All right, so now you can evaluate the |
| So I'm going to take the twist drill now. |  |
|  | 125 |
| 112 | 00:07:29.880 --> 00:07:30.370 |
| 00:06:13.810 --> 00:06:15.760 | angle again. |
| And what you should probably do at this |  |
|  | 126 |
| 113 | 00:07:31.320 --> 00:07:32.390 |
| 00:06:15.770 --> 00:06:18.660 point is switch these front ones out. | What do you think about that? |
|  |  |
|  | 127 |
| 114 | 00:07:32.960 --> 00:07:34.230 |
| 00:06:20.950 --> 00:06:22.560 | Is that like a 30 degree angle? |
| Switch these front ones out to |  |
|  | 128 |
| 115 | 00:07:38.470 --> 00:07:39.560 |
| 00:06:22.570 --> 00:06:26.080 <br> paralleling pins because you need these now. | Yeah, all right. |
|  |  |
| 116 | 00:07:39.630 --> 00:07:41.960 |


| So let's move on to prepping the other side. | $\begin{array}{\|l} 143 \\ \text { 00:08:20.490 --> 00:08:22.220 } \end{array}$ |
| :---: | :---: |
| 130 | And then this tissue is going to reflect fine. |
| 00:07:43.510 --> 00:07:47.380 |  |
| So now I'm going to take my periosteal | 144 |
|  | 00:08:22.330 --> 00:08:23.180 |
| 131 | This tissue is going to reflect fine. |
| 00:07:47.390 --> 00:07:48.040 |  |
| elevator again. | 145 |
|  | 00:08:23.430 --> 00:08:26.460 |
| 132 | And then you're going to find that tissue |
| 00:07:48.390 --> 00:07:49.220 | right here, it stays kind of stuck. |
| Let me get this out of here. |  |
|  | 146 |
| 133 | 00:08:26.590 --> 00:08:31.660 |
| 00:07:49.890 --> 00:07:51.760 | And you reflect more, you'll be able to |
| And take my periosteal elevator again. | see distinctly that that tissue is stuck |
| 134 | 147 |
| 00:07:52.490 --> 00:07:54.940 | 00:08:31.670 --> 00:08:32.900 |
| And I want to reflect this tissue back | because it's coming out of the mental foramen. |
| 135 | 148 |
| 00:07:54.950 --> 00:07:57.160 | 00:08:33.770 --> 00:08:36.020 |
| until I find the mental foramen. | All right, and what did we say our rule was? |
| 136 | 149 |
| 00:08:00.570 --> 00:08:01.600 | 00:08:36.490 --> 00:08:43.560 |
| Reflecting it back. | We're placing six millimeters anterior to the mental foramen to try to avoid any |
| 137 |  |
| 00:08:02.950 --> 00:08:03.660 | 150 |
| There it is. | 00:08:43.570 --> 00:08:45.120 <br> anterior loop complications. |
| 138 |  |
| 00:08:04.550 --> 00:08:06.400 | 151 |
| It's pretty obvious on this model again, | 00:08:45.870 --> 00:08:47.300 <br> But again, I'm just going to say it again |
| 139 |  |
| 00:08:06.610 --> 00:08:10.180 | 152 |
| but like I said, in a real patient you're | 00:08:47.310 --> 00:08:50.520 |
| going to have stuff coming out of there | just because it's so important, look at your cone beam, see what the anterior |
| 140 ( |  |
| 00:08:10.190 --> 00:08:11.180 | 153 |
| and it's not going to be obvious. | 00:08:50.530 --> 00:08:51.960 |
|  | loop for your patient looks like. |
| 141 |  |
| 00:08:11.470 --> 00:08:14.680 | 154 |
| So the best way to find it is actually do | 00:08:52.310 --> 00:08:53.320 <br> An anterior loop might be three |
| 142 ( |  |
| 00:08:14.690 --> 00:08:20.180 |  |
| not reflect here, but reflect in front of it and behind it. | 00:08:53.330 --> 00:08:55.020 <br> millimeters or it might be one millimeter. |


| 156 | So in real life, you're using a |
| :---: | :---: |
| 00:08:55.510 --> 00:08:57.860 |  |
| So six millimeters, placing implant, | 170 |
|  | 00:09:32.470 --> 00:09:33.200 |
| 157 | Minnesota, right? |
| 00:08:58.370 --> 00:09:01.380 |  |
| sorry, pointing the implant six | 171 |
| millimeters anterior is a decent rule of | 00:09:33.330 --> 00:09:34.240 |
|  | A Minnesota right here. |
| 158 |  |
| 00:09:01.390 --> 00:09:02.660 | 172 |
| thumb, but it doesn't work all the time. | 00:09:34.630 --> 00:09:38.880 |
|  | And your assistant can use a periosteal |
| 159 | elevator and just kind of retract the |
| 00:09:03.970 --> 00:09:05.540 |  |
| All right, so let's go ahead and mark | 173 |
|  | 00:09:38.890 --> 00:09:41.100 |
| 160 | lingual tissue just so you can have a |
| 00:09:05.550 --> 00:09:07.240 that six millimeter point. | better view. |
|  |  |
|  | 174 |
| 161 | 00:09:44.190 --> 00:09:46.540 |
| 00:09:08.350 --> 00:09:10.740 | But yeah, so I'm using my fingers right now. |
| Remember, you should use like a pencil or | 175 |
| 162 | 00:09:47.190 --> 00:09:49.660 |
| 00:09:10.750 --> 00:09:12.280 a surgical marker. | All right, so remember, if we place it |
|  | All right, so remember, if we place it |
|  | 176 |
| 163 | 00:09:49.670 --> 00:09:55.180 |
| 00:09:13.170 --> 00:09:15.500 | straight up and down, I can aim it here, |
| I'm just going to show you by marking on | but we're not going to get any good AP spread. |
| 164 | 177 |
| 00:09:15.510 --> 00:09:15.980 | 00:09:55.190 --> 00:10:00.900 |
| the mandible. | So we're placing it back here and aiming it at 30 degrees towards that little |
| 165 |  |
| 00:09:17.310 --> 00:09:20.460 | 178 |
| All right, so let's do six millimeters anterior. | 00:10:00.910 --> 00:10:03.160 bullseye that we made. |
| 166 (179 |  |
| 00:09:23.090 --> 00:09:24.880 | 179 |
| All right, so that's six millimeters anterior. | 00:10:04.510 --> 00:10:06.520 |
|  | All right, so let's go for it. |
| 167 |  |
| 00:09:25.890 --> 00:09:28.880 | 180 |
| And so now l'm going to aim my implant at | 00:10:19.080 --> 00:10:24.130 |
|  | All right, so now I'm going to take my |
| 00:09:28.890 --> 00:09:29.460 Lance pilot drill out of the drill, out |  |
|  |  |
| that site. | 181 |
|  | 00:10:24.140 --> 00:10:24.750 |
| 169 | of the contra angle. |
| 00:09:31.230 --> 00:09:32.460 |  |


| 182 | And this one, I'm going to take a 2 mm |
| :---: | :---: |
| 00:10:25.400 --> 00:10:28.170 |  |
| I'm going to put it right here so we can | 196 |
|  | 00:11:04.510 --> 00:11:07.320 |
|  | short and put it in here. |
| 00:10:28.180 --> 00:10:29.310 |  |
| evaluate our angle. |  |
|  | 00:11:09.810 --> 00:11:11.500 |
| 184 | You might not have a long and a short in |
| 00:10:39.230 --> 00:10:40.300 |  |
| So we should look at it like that. | 198 |
|  | 00:11:11.510 --> 00:11:13.460 |
| 185 | your kit, but it's fine. |
| 00:10:40.350 --> 00:10:40.960 |  |
| How does that look to you? | 199 |
|  | 00:11:13.530 --> 00:11:14.640 |
| 186 | This one, this one actually doesn't need |
| 00:10:41.030 --> 00:10:41.920 |  |
| Does it look like 30 degrees? | 200 |
|  | 00:11:14.650 --> 00:11:15.320 |
| 187 | to be in here right now. |
| 00:10:43.170 --> 00:10:44.360 |  |
| Looks pretty close to me. | 201 |
|  | 00:11:15.370 --> 00:11:16.380 |
| 188 | You can just, you know what? |
| 00:10:46.550 --> 00:10:48.600 |  |
| And does it look like we're aimed at that sight? | 202 |
|  | 00:11:16.390 --> 00:11:18.320 |
| 189 | Why don't we just work with one drill? |
| 00:10:48.790 --> 00:10:48.900 |  |
| Yep. | 203 |
|  | 00:11:18.890 --> 00:11:20.120 |
| 190 | This one doesn't need to be in here |
| 00:10:49.750 --> 00:10:51.080 <br> Staying away from the mental foramen? |  |
|  | 204 |
|  | 00:11:20.130 --> 00:11:26.780 |
| 191 | because the angle that I care about is |
| 00:10:51.310 --> 00:10:51.520 | comparing this distal implant angle to |
| Yep. |  |
|  | 205 |
| 192 | 00:11:26.790 --> 00:11:30.440 |
| 00:10:52.490 --> 00:10:53.540 | this anterior implant angle because we |
| All right, so let's keep going. | know these two are parallel already, right? |
| 193 | 206 |
| 00:10:54.290 --> 00:10:58.560 | 00:11:36.600 --> 00:11:44.160 |
| We're going to take our 2 mm and we're going to take that one to depth. | So I'm going to put it back into the preparation and I'm looking again from |
| 194 | 207 |
| 00:10:59.510 --> 00:11:02.620 | 00:11:44.170 --> 00:11:45.940 |
| So our 2 mm long is over here. | the side, approximating 30 degrees. |
| 195 | 208 |
| 00:11:02.650 --> 00:11:04.500 | 00:11:46.350 --> 00:11:47.780 |


| And let's go ahead and take it to the | Take an intraoperative cone beam just to |
| :---: | :---: |
| 209 | 222 |
| 00:11:47.790 --> 00:11:51.060 | 00:12:43.810 --> 00:12:48.480 |
| depth for an 11.5 mm implant. | triple check where you're at and you can triple check how close to the nerve you |
| 210 |  |
| 00:12:04.810 --> 00:12:08.660 | 223 |
| All right, so now I have the two distal | 00:12:48.490 --> 00:12:49.580 <br> are in that cone beam. |
| 211 |  |
| 00:12:08.670 --> 00:12:09.280 | 224 |
| sites prepared. | 00:12:49.710 --> 00:12:50.660 |
|  | That would be really helpful. |
| 212 That |  |
| 00:12:10.230 --> 00:12:11.420 | 225 |
| I'm going to put that in there. | 00:12:53.010 --> 00:12:56.480 |
|  | You can also take a pano right now. |
| 213 |  |
| 00:12:16.840 --> 00:12:22.210 | 226 |
| The two anterior sites prepared, the two | 00:12:57.010 --> 00:12:59.280 |
| distal sites prepared, and I'm pretty | Just have the patient recover a little |
| 214 | 227 |
| 00:12:22.220 --> 00:12:22.990 | 00:12:59.290 --> 00:13:00.500 |
| happy with how it looks. | bit and walk on over to the pano. |
| 215 | 228 |
| 00:12:23.200 --> 00:12:23.770 | 00:13:01.610 --> 00:13:03.240 |
| What do you think? | That's a way to just feel really good |
| 216 | 229 |
| 00:12:25.000 --> 00:12:25.390 | 00:13:03.250 --> 00:13:06.680 |
| Yeah? | about the sites before you move forward. |
| 217 | 230 |
| 00:12:27.850 --> 00:12:30.960 | 00:13:06.690 --> 00:13:08.840 |
| All right, so now what you can do at this | Right now, things are still changeable, |
| 218 | 231 |
|  | 00:13:09.090 --> 00:13:13.560 |
| step is if you have a cone beam, you can take an intraoperative cone beam. | but once you go ahead and place the |
|  | implants, it's a lot harder to change. |
| 219 | 232 |
| 00:12:36.510 --> 00:12:40.240 | 00:13:14.150 --> 00:13:15.520 |
| I think that's a good idea, especially if you're just starting to get comfortable | Make sure you're happy right now. |
|  | 233 |
| 220 | 00:13:16.790 --> 00:13:19.720 |
| 00:12:40.250 --> 00:12:40.840 with this procedure. | Switch sides at this point to this side. |
|  | 234 |
| 221 | 00:13:20.150 --> 00:13:24.940 |
| 00:12:41.130 --> 00:12:43.800 | If you're working on the patient's left, |

switch over to the patient's right and
235
00:13:24.950 --> 00:13:26.380
check the implant angulations.
236
00:13:27.090 --> 00:13:30.620
Ask your assistants, ask your friends, so
237
00:13:30.630 --> 00:13:32.220
you can see that my angles line up pretty good.
238
00:13:33.070 --> 00:13:33.800
That's pretty great.
239
00:13:33.870 --> 00:13:34.480
I'm happy with it.
240
00:13:35.090 --> 00:13:37.820
Anyway, after some imaging, if you have
241
00:13:37.830 --> 00:13:40.780
it, then let's go on to the next step.

