

Some of my comments on Mandibular Anatomy

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Keep at least 2mm safety distance away from the IA! For implant placement at molar sites, I only use local infiltrations with septocaine w epi.

Always feel for the “lingual concavity” with your finger during your initial exam. You can clearly see it in a cone beam as well.

Sometimes we err on the side of placing the implant too lingual because the buccal bone slopes at an angle and makes us nervous. Be careful because you might traumatize vasculature at the apex.

