A Clinician's Guide to
Digital Conversions

Smart Implant Mapping - SIM Device

NavaGation™
Synergy
SMART IMPLANT MAPPING
EZ Load
Patent Pending

CONTENTS | EZ LOAD SIM 2.0

WHAT IS | EZ LOAD SIM 2.0

Dear Doctor,

As the NavaGation team continues to expand under the leadership of Brian and Matt, innovation remains the department's foundational pillar - particularly in the evolution of their diagnostically driven Synergy solution. The ongoing pursuit of reducing chair time without compromising clinical integrity remains their foremost challenge.

EZ Load represents Absolute's latest proprietary advancement for efficient, same-day temporization during implant surgery. Centered around the SIM 2.0 (Smart Implant Mapping) device, this versatile system accommodates non-stackable guided, stackable guided, and even freehand surgical protocols.

The EZ Load process begins with a collaborative, diagnostically driven treatment plan. The digitally approved diagnostic wax-up serves as the foundation. During surgery, the SIM 2.0 device links the final implant positions to the pre-approved plan, enabling rapid adaptation of the wax-up to the actual implant placement.

Depending on clinician preference, the adapted design can either be printed in-house the same day or finalized at the lab and shipped overnight.

Each SIM 2.0 device is custom fabricated to match the patient's anatomy and can operate independently or as part of a stackable guide system. The EZ Load workflow is fully customizable—delivering speed, precision, and adaptability to meet any clinical scenario.

This innovation would not have been possible without the continued trust and support of the clinicians who share in NavaGation's vision. Special thanks go to Dr. Christian Yaste and Dr. Holger Meiser for their invaluable time and contributions during the development of this workflow. Much of the photography featured in this manual originates from their clinical cases. Their belief in the NavaGation team is deeply appreciated and never taken for granted.

The team now invites clinicians to begin integrating the EZ Load workflow into their own practices.

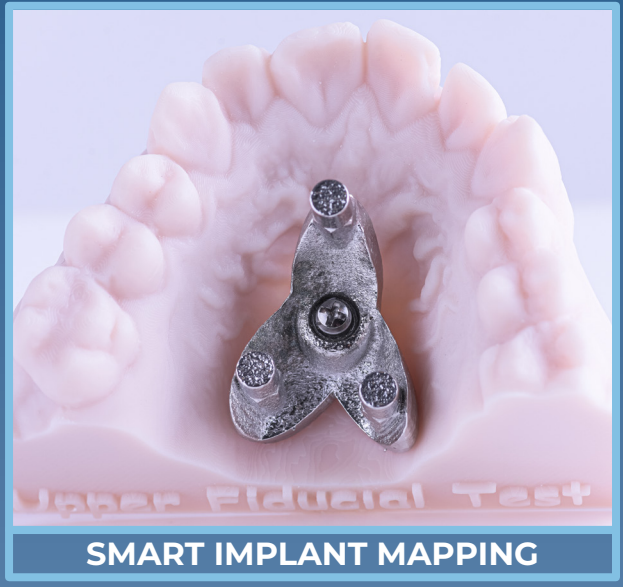
Your NavaGation Team, led by Brian and Matt

Left to right:
Conrad Rensburg,
Brian Lee,
Matt Vrhovac,
Louis Costanzo

EZ LOAD COMPONENT LIST

- Fixation Pilot Guide
- SIM 2 Device
- Guided SIM 2 Device
- Guides
- Rescue Denture

FIXATION PILOT GUIDE



SMART IMPLANT MAPPING

SYNERGY SIM 2 DEVICE

SURGICAL GUIDES

The lab will *always* supply a *rescue* denture

forever denture

TIME LINE | GUIDE DESIGN

Production Timelines
after case review
& approval:*

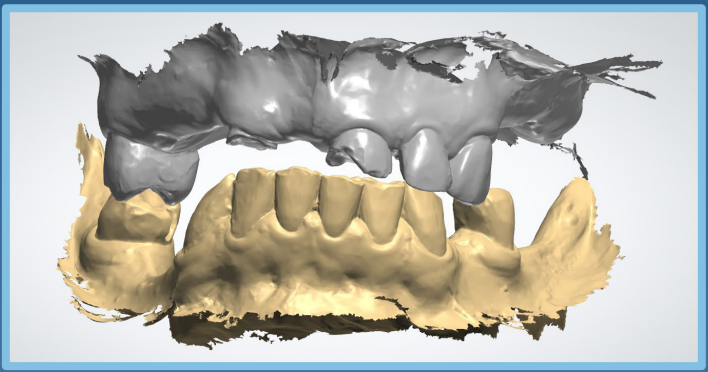
Non-Guided
2 WEEKS
Production + Shipping
Included

Synergy Guided
4 WEEKS
Production + Shipping
Included

Freehand Cases
Incorporating EZ Load and SIM 2 must be submitted 2 weeks prior to surgery

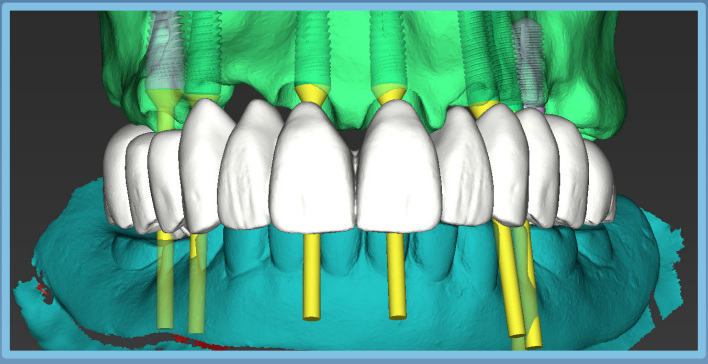
**The timelines will vary based on the quality of records and scans*

DAY 1:
STL FILE SUBMISSION



DAY 2:
DIAGNOSTIC DESIGN

DAYS 3-4:
PLAN & REVIEW



DAY 5:
PRODUCTION

WORK FLOW

NON GUIDED

ADVISE LAB OF SURGERY TIME AND DATE

- Refrain from sending scans through your scanner to avoid delays
- Quality scans = quality results
- Notify the lab that the scan has been submitted via the Same Day Design phone number: 1-984-317-1889

FIXATION GUIDE

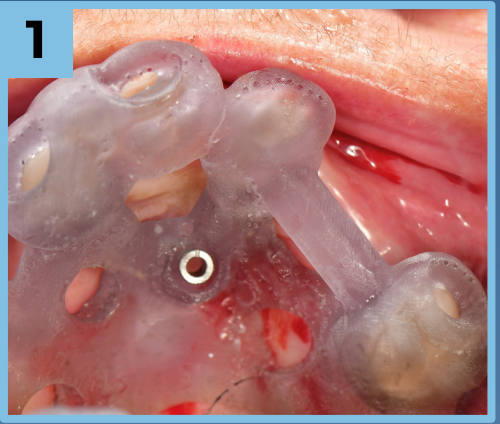
Semi-guided or freehand cases:

- Seat tooth borne fixation guide

- Drill pilot hole(s) to accomodate the SIM 2 device

Using the tooth or mucosal borne guide, drill the pilot hole for the SIM 2 device

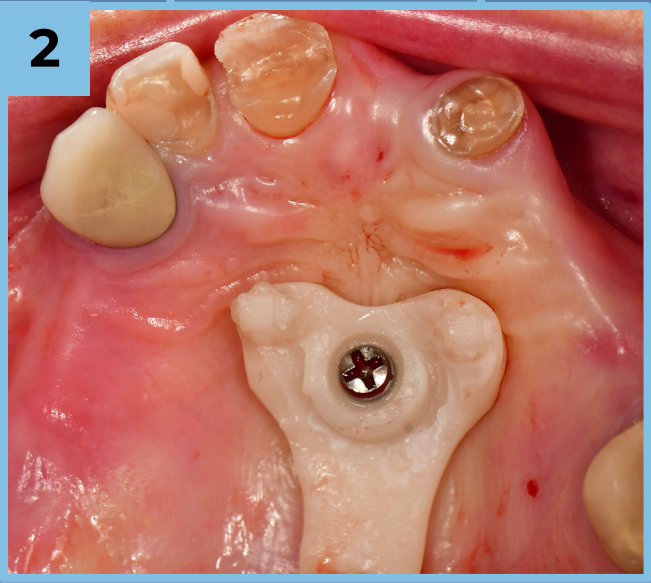
1



DELIVER SIM 2 DEVICE → SCAN

Fixate the SIM 2 device

2



Scan SIM device & anatomy

3

SUBMIT SCAN DIRECTLY THROUGH THE ABSOLUTE DENTAL CASE PORTAL: ABSOLUTEDENTALLAB.COM

WORK FLOW

NON GUIDED

FAQ

- EZ Load utilizes titanium interface free connections into the MUAs
- Use only approve ti-base free IO scan flags to index implant positions
- DESS Design FLAT SEAT - Powerball system - DIRECTscan by Implant Direct - Rosen Screw - Badger Screw
- Call your NavaGation specialist for more IO scan flag options

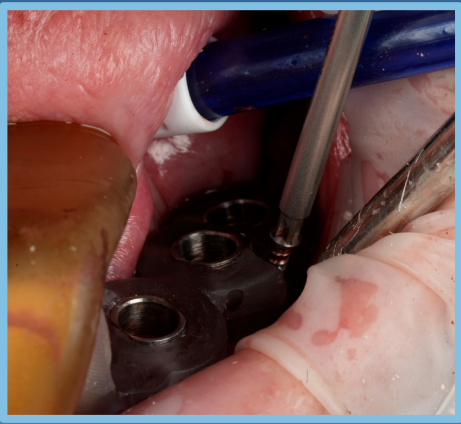
SURGERY (FREEHAND OR PARTIALLY-GUIDED)

Partially guided or freehand cases:

- After placement of the SIM 2 device perform the surgery as planned

- It is imperative that the SIM 2 device remain fixated during this process

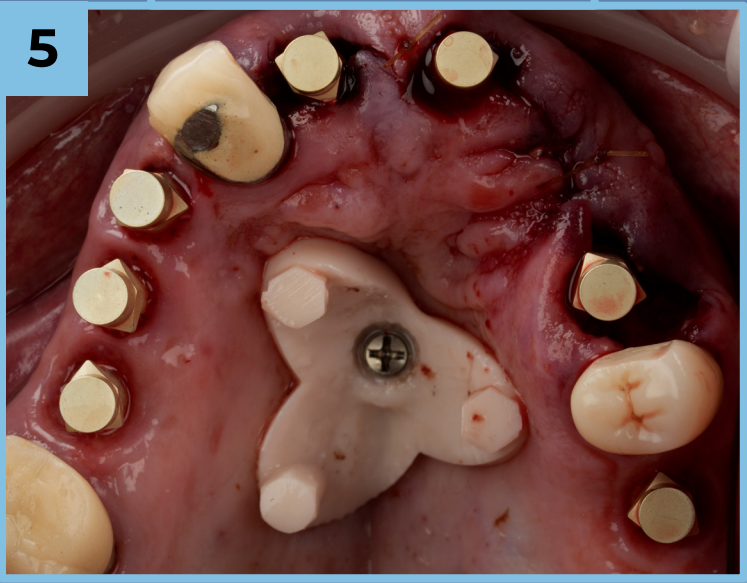
4



DELIVER SIM 2 DEVICE → SCAN

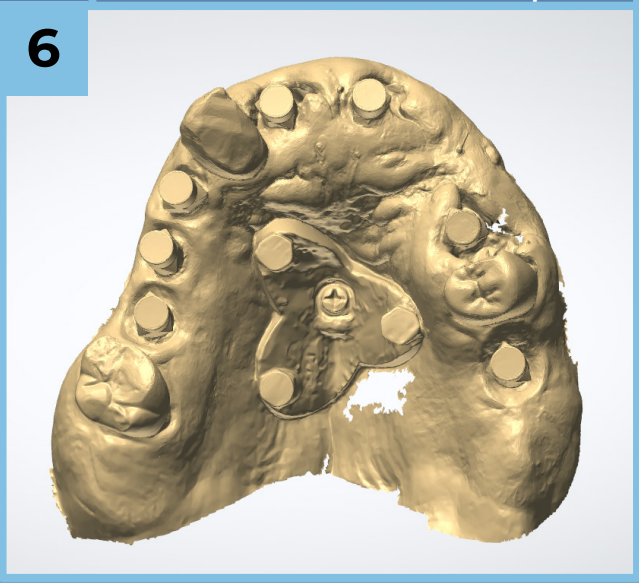
Scan bodies are BRAND SPECIFIC

5



If the implants are avoiding certain teeth, leave them in as further reference points

6



SUBMIT SCAN DIRECTLY THROUGH THE ABSOLUTE DENTAL CASE PORTAL: ABSOLUTEDENTALLAB.COM

WORK FLOW

LATCHED/ GUIDED

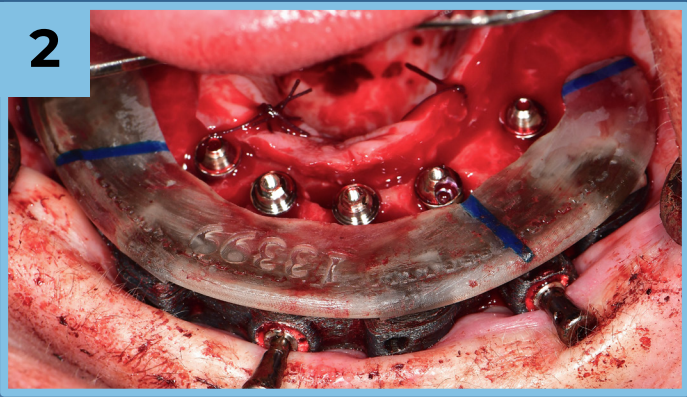
SURGERY

1

DELIVER MUAS

ATTACH SCAN BODIES

2



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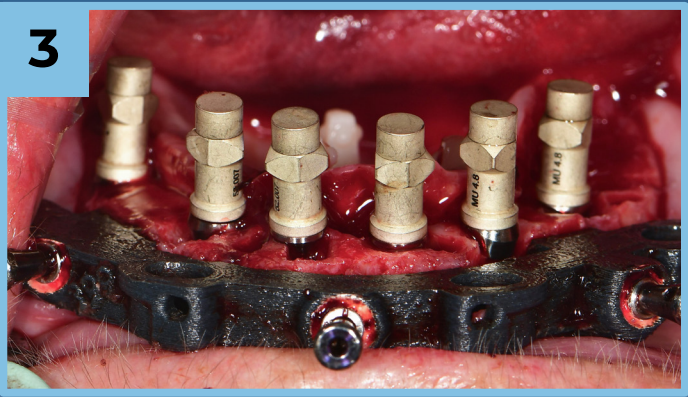
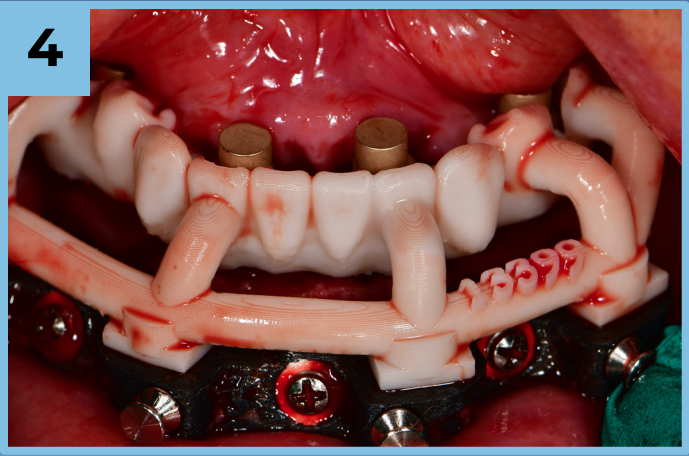


STACK SIM 2 DEVICE

SCAN

4



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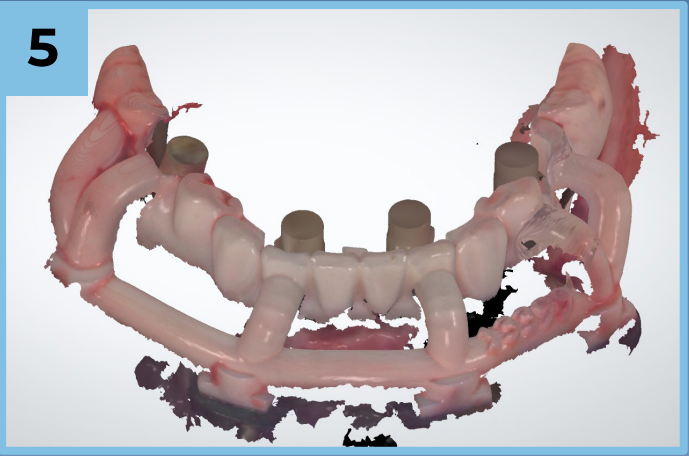


SUBMIT SCAN DIRECTLY THROUGH THE ABSOLUTE DENTAL CASE PORTAL: ABSOLUTEDENTALLAB.COM

AT THE LAB

WORK FLOW

The laboratory will utilize the pre-approved wax-up created during the initial diagnostic workup. By referencing the surgical scans, the lab correlates the post-operative implant positions with the pre-operative plan and designs a new temporary restoration accordingly.

Same-Day (In-Office) Printable STL:

- FP1 Approx. 30-40 minutes
- FP2 & 3 Approx. 45-55 minutes

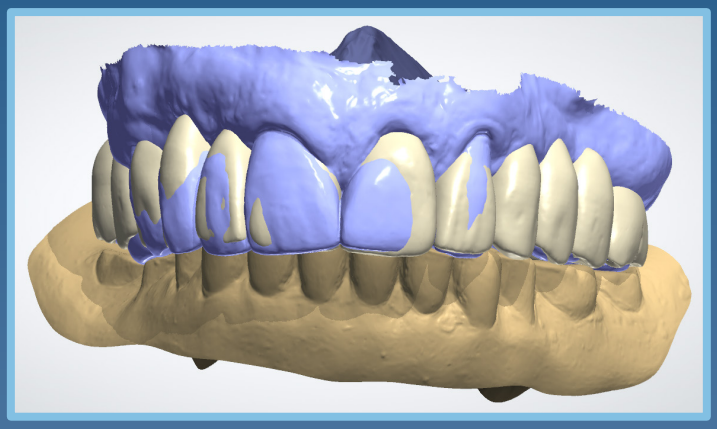
*Lab must be notified by phone, and file must be submitted directly through the Absolute Dental Portal (not through the IO scanner data transfer)

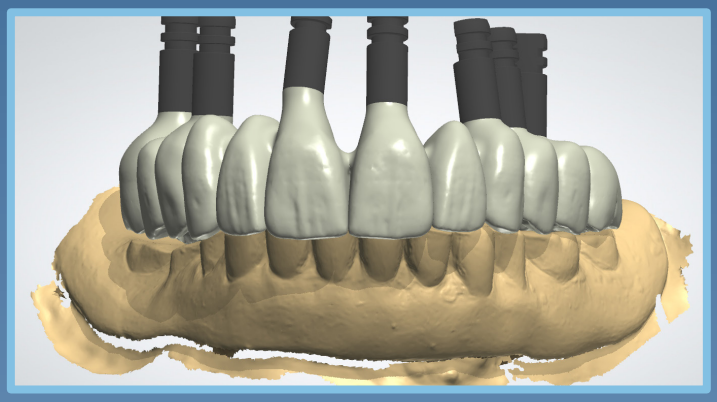
Next-Day (Lab Fabricated) Prosthesis:

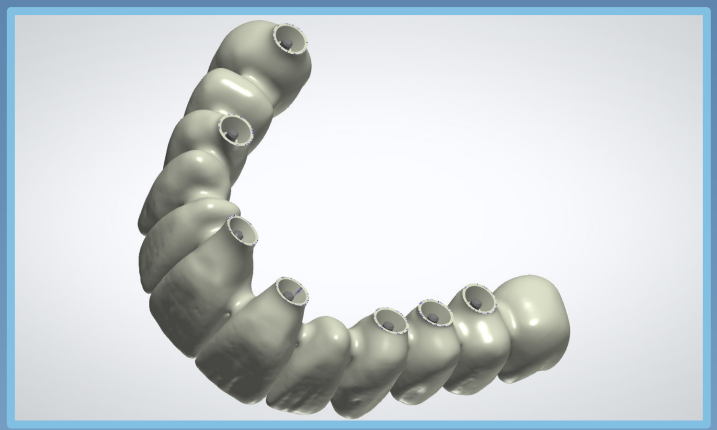
- Delivered within 24 hours

Both digital STL file and lab-fabricated temporaries are designed to seat directly onto the multi-unit abutments (MUAs).

*Design times may be influenced by quality of scan data provided and case complexity.







WHAT WE NEED | CBCT

General Instructions

- Work with the CBCT manufacturer to ensure the machine is calibrated and up to date
- A stitch in the scan indicates that the machine needs calibration
- Scan the sinuses, nasal floor, zygomas (if placing zygomatic implants), mental foramina, and nerve canals
- Separate scans of each arch are acceptable

Dentate

- Out of occlusion
- Use the bite stick, posterior cotton rolls, and chin rest to stabilize and scan
- Retractors separating the cheeks and lips

Edentulous

- The patient must have a well-fitting denture. If not, follow the Bite Rim & Setup Try-in procol
- Attach fiduciary markers to the denture (avoid the intaglio and occlusal surfaces) for lab reference
- Remove the bite-stick, have the patient rest on chin rest, and ***bite into occlusion*** to secure the denture
- Take a second scan of the denture using CBCT or an intraoral scanner, ensuring the markers remain in place

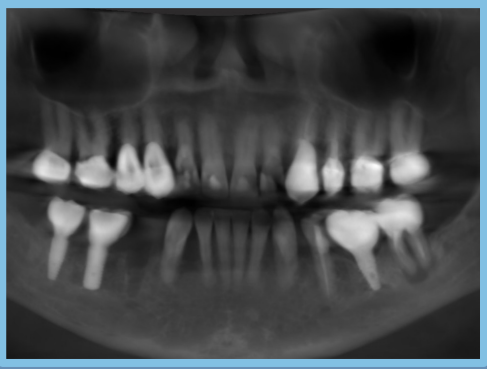
Partially Edentulous

- If the patient's partial has a metal framework, it can't be used as a scan appliance, and the lab must relate the model without the partial to the bone
- If the patient has only 2-3 remaining teeth, there aren't enough landmarks to relate the pre-op back to the bone
- If the partial is acrylic, it can be used as a scan appliance, but cross-mounting is still required

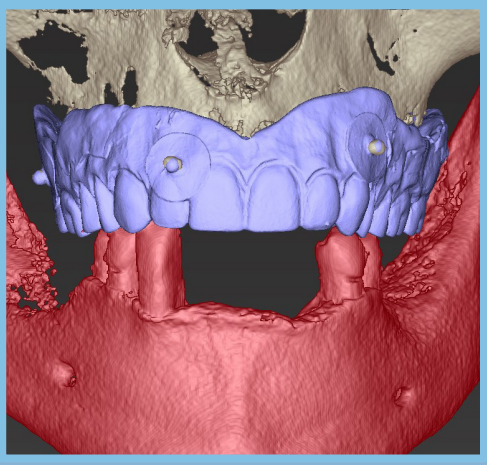
Partially edentulous cases are complex. Depending on the pre-operative status, the Bite Rim & Setup Tryin protocol may be needed.

DENTATE = RETRACTED

DENTATE = OUT OF OCCLUSION



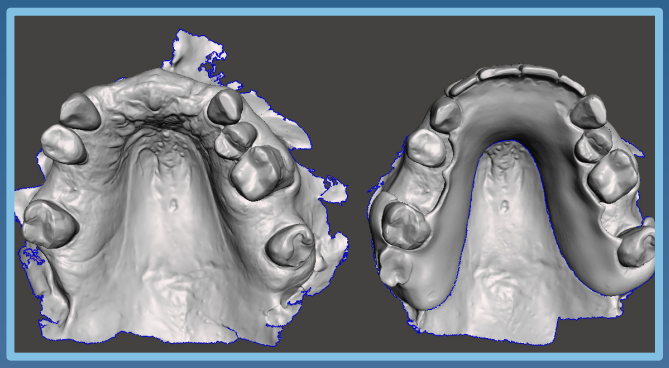
EDENTULOUS/PARTIAL = IN OCCLUSION



WHAT WE NEED | MODELS

General Instructions

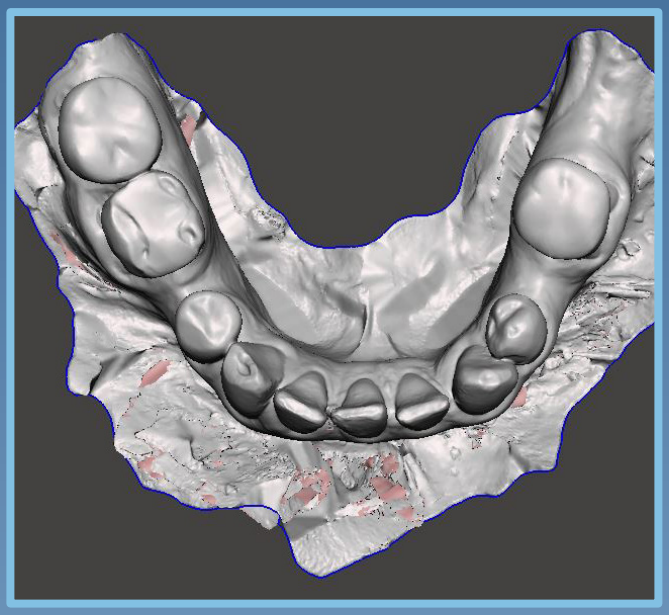
- Treat all cases as *denture cases*
- Every case includes a rescue denture
- Capture all significant anatomical landmarks
- Models can be digital or analog - use what you're best at
- Begin with a repeatable centric relation (CR) bite - this improves predictability



Dentate

Maxilla:
- Frenum attachments
- Full Palate
- Hamular notches
- Buccal & labial vestibules

Mandible:
- External oblique ridges
- Retromolar pads
- Frenum attachments
- Sublingual space
- Disto-lingual region
- Buccal & labial vestibules

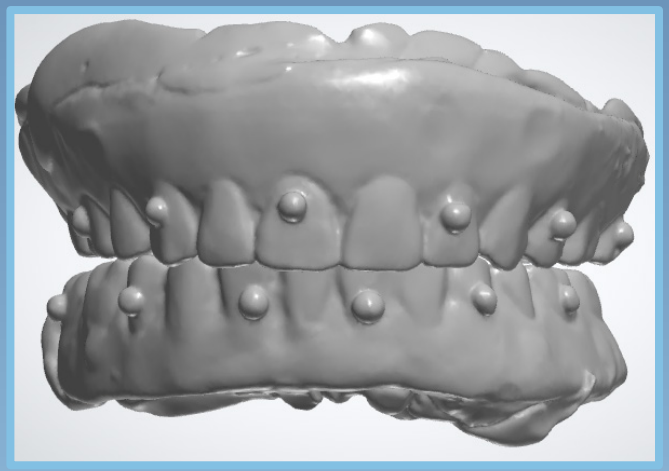


Edentulous

Capture all 360° of the denture using:
- Intra-oral scanner or
- CBCT (Cone Beam CT)

If CBCT is used:
- Provide intraoral scan or impression of the denture's occlusal surface
- Submit the bite and opposing arch

If digital scanner is used:
- Scan the bite and opposing arch



Partially Edentulous

- Capture enough anatomy to allow cross-mounting
- Record bite with partial denture in place

WHAT WE NEED | PHOTOS

FULL FACE SMILE PHOTO
FULL FACE RETRACTED PHOTO
Lateral bite photos
Repose
Profile
Smart phones are perfectly acceptable
Refrain from using fancy cameras

STRAIGHT ON

FULL FACE

FULL FACE

NavaGation™ Synergy EZ Load

SMART IMPLANT MAPPING

Patent Pending

NavaGation PRECISION GUIDANCE®

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Utilizing CHROME GuidedSMILE Pat.# 11,173,016 and# 11,576,755

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