



DIGITALL

ECOSYSTEM



Speed, Precision, Esthetics

from Single Tooth to Full Arch Restorations
with MODE • DIGITALL ECOSYSTEM

modeimplant.com

Provo-S



DIGITAL IMPRESSION TRANSFERS



Provo-S
Digital Analog



Provo-S
Digital Coping
Engaged



Provo-S
Digital Coping
Non-Engaged



NEW
PRODUCTS

Provo-S Reverse
Scanbody



Provo-S
Scanbody



COMING
SOON

Provo-S Scanbody
Alignment Bar

Provo-C

Ø3.0



H: 8 mm H: 10 mm H: 12 mm H: 15 mm

Ø3.5



H: 8 mm H: 10 mm H: 12 mm H: 15 mm

Ø4.0



H: 8 mm H: 10 mm H: 12 mm H: 15 mm

Ø4.5



H: 8 mm H: 10 mm H: 12 mm H: 15 mm

DIGITAL IMPRESSION TRANSFERS

COMING
SOON



Provo-C
Digital Analog

COMING
SOON



Provo-C
Scanbody

Provo-S

Fusion Peak Design

- The blasted part of the implant must be placed 0,5 mm subcrestal.
- Insertion torque value should not exceed 40 - 45 Ncm
- Torque should be reduced by pre-compression with bone tap.
- The head of bendable PROVO-T/C/S can be bent into the desired position after insertion with the adaptor and ratchet
- Bendind should not exceed 30°
- One bending, one direction!

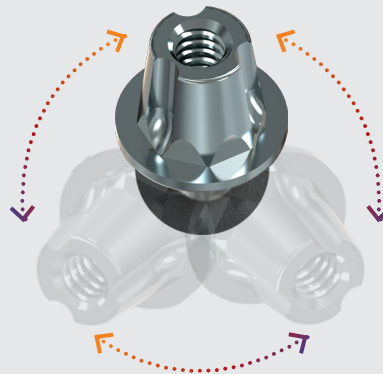
Screw Retained

Bendable One-Piece
Implant System



- **Screw retained upper part**
- **Immediate loading**
- **Allow placement in height and width deficient bones**
- **Prosthetic alignment up to 30°**
- **Excellent protection from inflammation around the implant**
- **Can be placed with an open flap or flapless technique**
- **Can be used to create multiple unit restorations**
- **Placement in socket extraction**
- **Suitable for the upper and lower jaws**
- **Time saving for patient and dentist**

Bend to the best spot
within 360° range

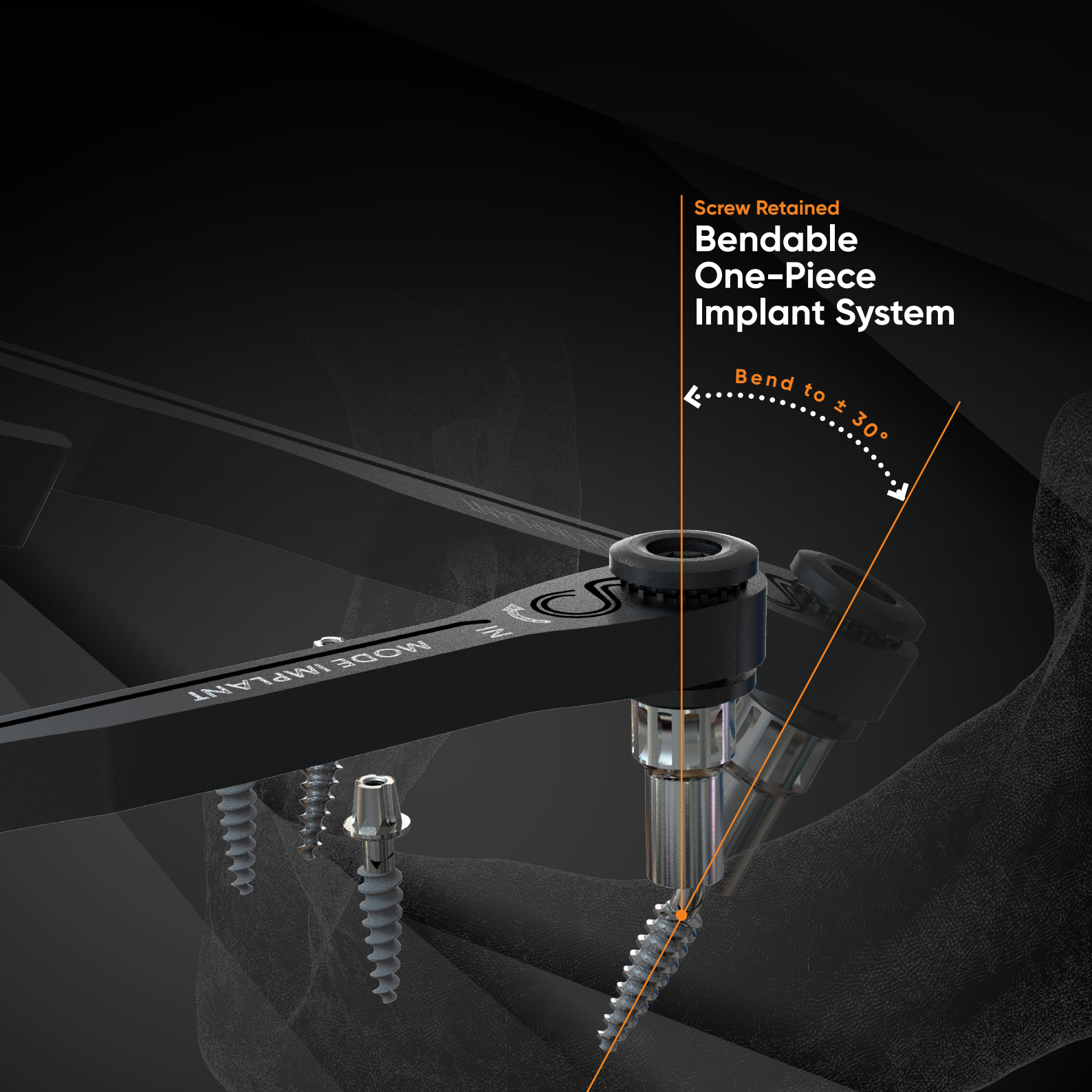


PROVO-S
Screw Retained

Screw Retained

Bendable One-Piece Implant System

Bend to $\pm 30^\circ$



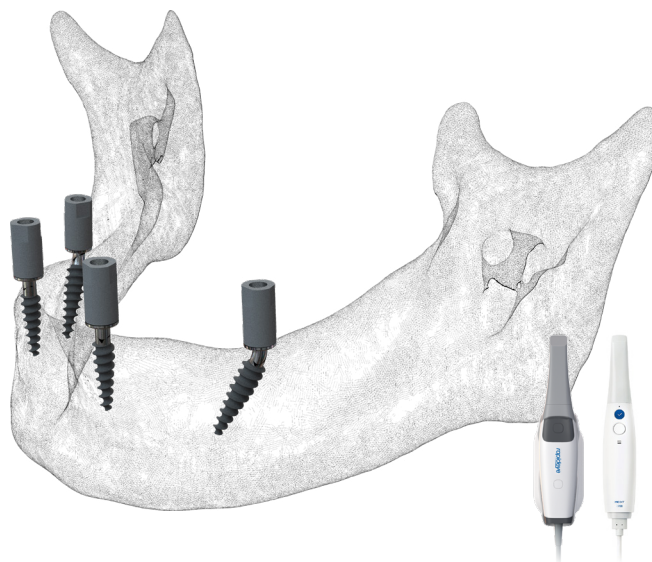
The image shows a detailed view of a dental implant system. A black, curved implant body is shown with a silver-colored screw mechanism at its base. The implant is designed to be bent, as indicated by the curved arrow and the text 'Bend to $\pm 30^\circ$ '. The implant is shown in a cross-section view, revealing the internal structure and the screw mechanism. The background is dark and textured, suggesting a clinical or laboratory setting. The text 'MODE IMPLANT' is visible on the side of the implant body.

Provo-S Scanbody

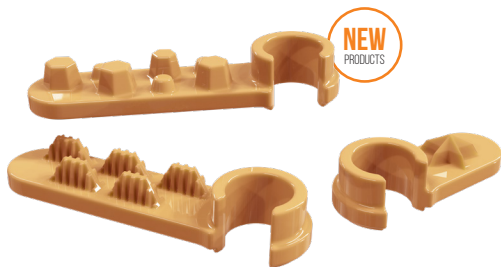


Provo-S
Scanbody

Provo-S Scanbody has been developed to provide high-precision digital impression capture for Provo-S implants within the digital workflow.

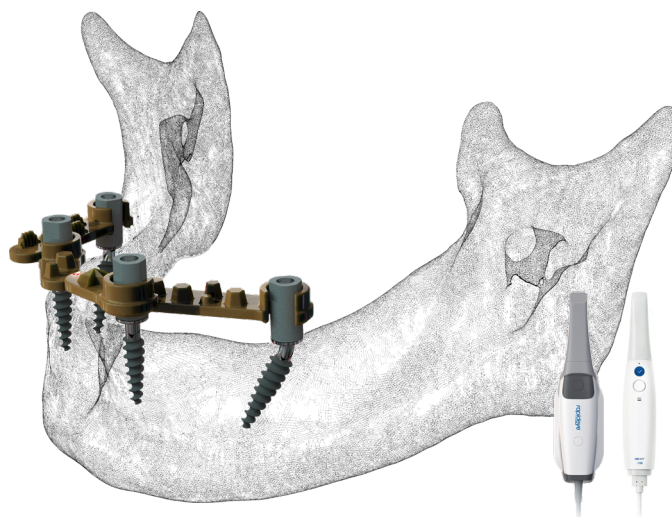


Provo-S Scanbody Alignment Bar



Provo-S Scanbody
Alignment Bar

Provo-S Scanbody Alignment Bar is designed as an accessory to be attached to the Scanbodies, assisting scanners in accurately stitching the scanned data points together between two or more Scanbodies.



Provo-S Reverse Scanbody



Provo-S Reverse Scanbody

MODE Provo-S Reverse Scan Body is designed based on the reverse scanning principle for edentulous cases, enabling highly accurate digital transfer of implant positions through temporary restorations.



Provo Surgical Kit

With its ergonomic and minimalist design, it provides quick access and controlled handling during surgery.

Its lightweight structure ensures a smooth and comfortable surgical experience.





- 1 After completion of the surgical drilling procedure, the loading phase begins, and the Provo-S monoblock implant is removed from its sterile tube using the adapter and ratchet and placed into the surgical site.



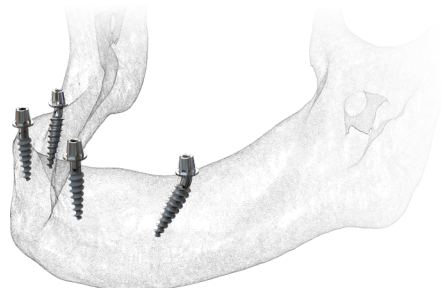
- 2 The implant is inserted with a controlled torque of 35–45 Ncm to achieve optimal primary stability.



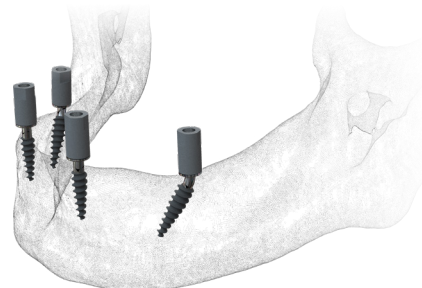
- 3 Based on the patient's bone anatomy and clinical case requirements, the prosthetic connection (head) of the angled monoblock implant is positioned toward the occlusal plane.



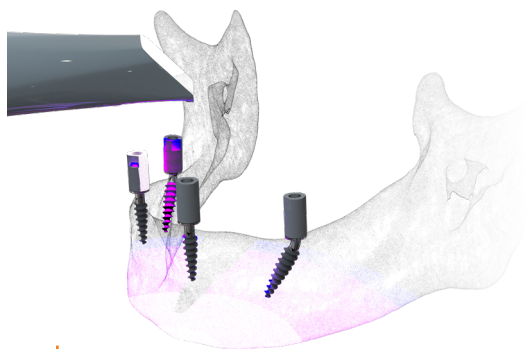
- 4 The prosthetic connection is carefully bent in a controlled direction, within a maximum range of 0° to 30°, to achieve ideal prosthetic alignment.



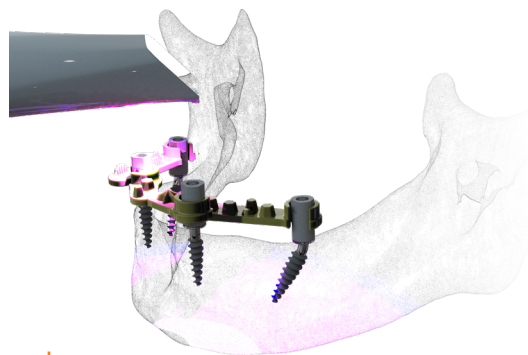
- 5 All implants are successfully inserted in the planned positions, and the required angular adjustments are completed.



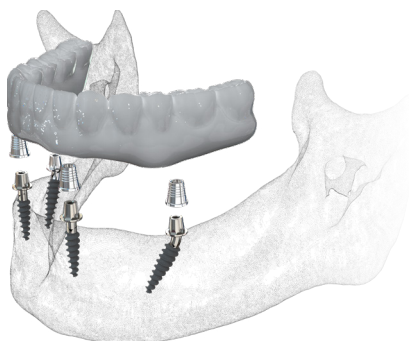
- 6 Scan bodies are placed onto the implants to enable digital impression taking.



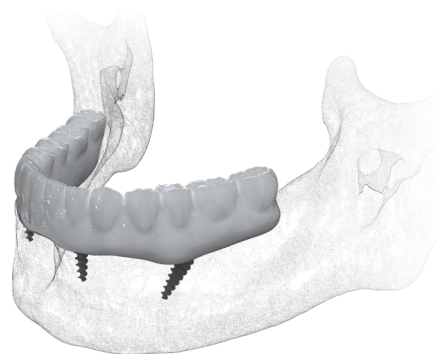
7 Digital scanning is performed using the placed standard scan bodies.



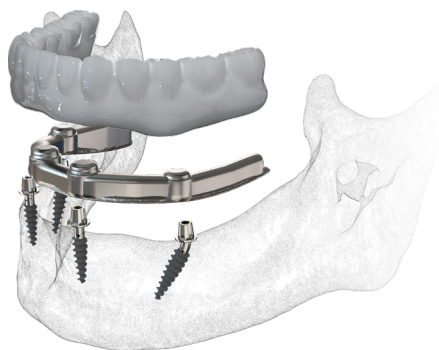
8 Optionally, a horizontal scanning flag can be attached to preserve the arch form during scanning and minimize deviations in the digital impression.



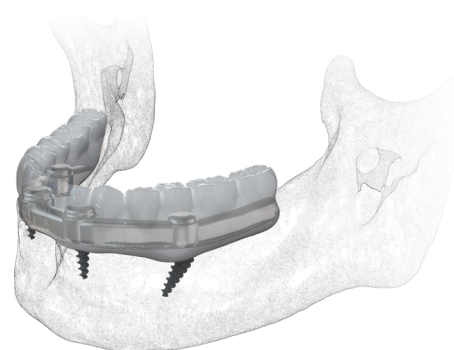
9 Following the digital impression, a coping-connected zirconia restoration is designed and fabricated.



10 The zirconia restoration is connected to the implant and its fit is verified.



11 In cases where no coping is used, the restoration is directly connected to the implant using a metal bar.



12 The final superstructure is seated, and the prosthetic procedure is completed.

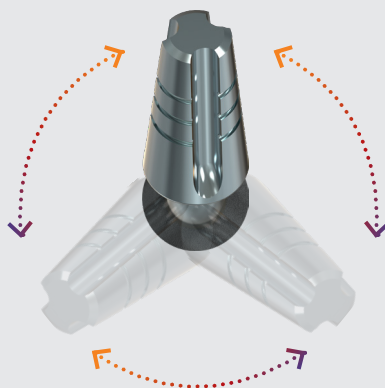
Provo-C

Pure Flow Design

- Immediate loading
- Special compressive thread design
- Prosthetic alignment up to 30°
- Excellent primary stability
- Ideal for resorbed ridges
- Placement in socket extraction
- Can be placed with open flap or flapless technique
- Can be used to create multiple unit restorations
- Suitable for the upper and lower jaws
- Practical, time saving

**Provo-C
Digital Scan Body:
Geometrically
Optimized for Easy
Scanning**

**Bend to the best spot
within 360° range**



PROVO-C
Cement Retained

Cement Retained
Bendable One-Piece
Implant System





Slim Neck Geometry for Narrow Ridges

The slim implant geometry combined with a compression-enhancing body design provides superior adaptation, controlled placement, and high primary stability in narrow ridge cases.

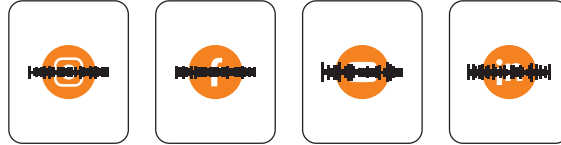
Smart Geometry For The Mandibular Canal

The specialized implant geometry bypasses the mandibular canal containing the inferior alveolar nerve, reducing anatomical risks and enabling safe and predictable implantation. The bendable neck design allows the implant head to be positioned in an ideal prosthetic orientation along the occlusal axis, while maintaining a safe distance from the nerve. As a result, minimal invasive and controlled surgery can be performed without the need for bone augmentation.



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