# PRE-OPERATIVE:

CBCT

* All vital structures identified
* Sinus-Related Procedures – must confirm patency of ostium and lack of pathology

# INTRA-OPERATIVE (Implant Placement):

* Pilot Drill during placement to confirm positioning and proximity to vital structures and adjacent teeth (PA)
* Additional PA’s if necessary for angulation and positioning confirmation Final Placement with cover screw or healing abutment (PA)

# PROSTHETIC REHABILITATION:

* During Healing Period (depending on the procedure), to confirm ideal healing [PA - implant, CBCT – bone graft, sinus graft]
* PA to confirm Abutment(s) are seated properly
* PA to confirm proper seating of prosthesis / cement removal (will be baseline for future evaluation radiographs)

# POST-OPERATIVE:

* PA once annually for the first three years after implant prosthetics to monitor bone level
* Normal (acceptable) : < 0.2 mm vertical bone loss per year for first three years
* After three years, PA should be taken every two years
* During each post-op examination, the following should be evaluated;
  + - Presence of Pain
    - Suppuration
    - Implant and / or Prosthesis Mobility
    - Hyperocclusion
    - Soft Tissue Changes (bleeding, recession, hyperplasia)

\*\*In some cases, a periapical radiograph cannot be accurately obtained because of positioning issues, therefore a CBCT radiograph may be utilized