

The SAC Assessment Tool



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Holland Bloorview ITI Education Week October 26, 2011

The SAC Assessment Tool

click to continue

S Straightforward

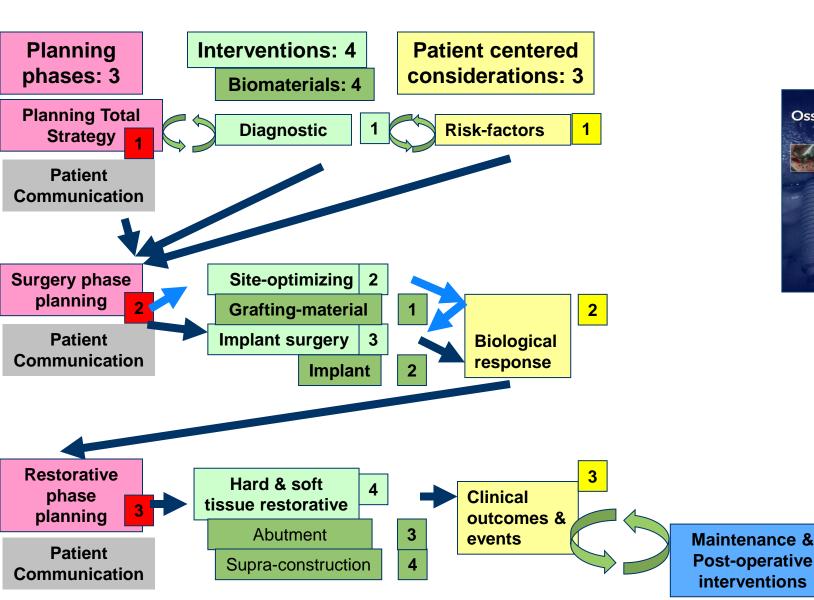
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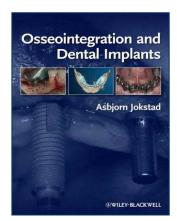
C Complex

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The 10 steps of Implant Prosthetic **Treatment**



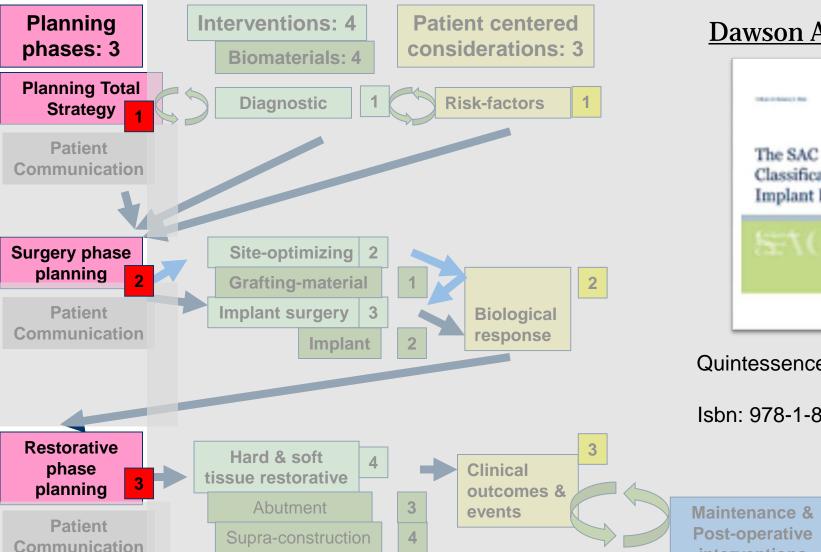




interventions

The 3 planning phases of Implant Prosthetic Treatment





Dawson A, Chen S



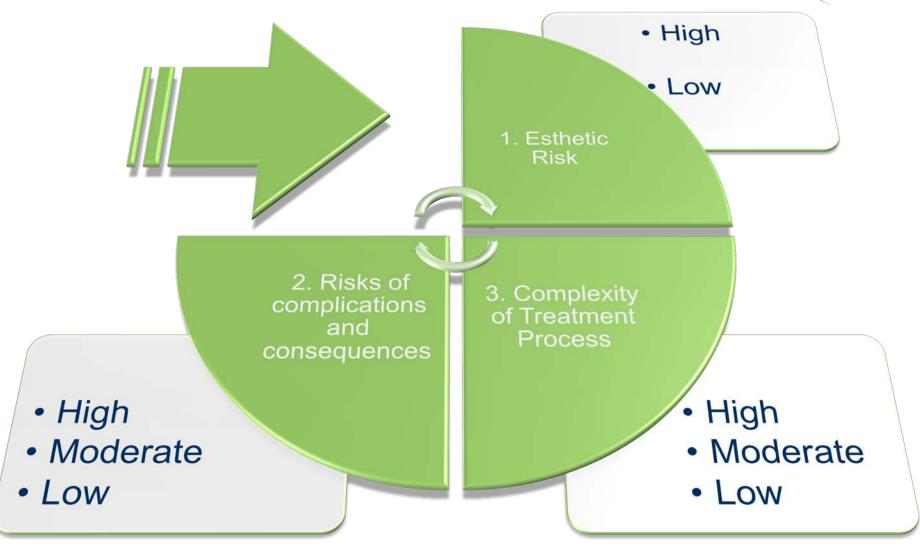
Quintessence Publishing 2009

Isbn: 978-1-85097-188-7

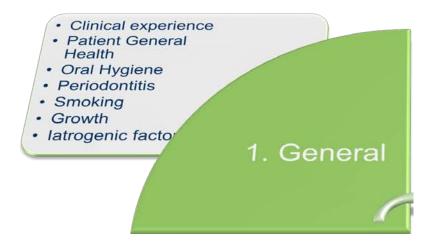
interventions

General Determinants of the **Normative** SAC classification





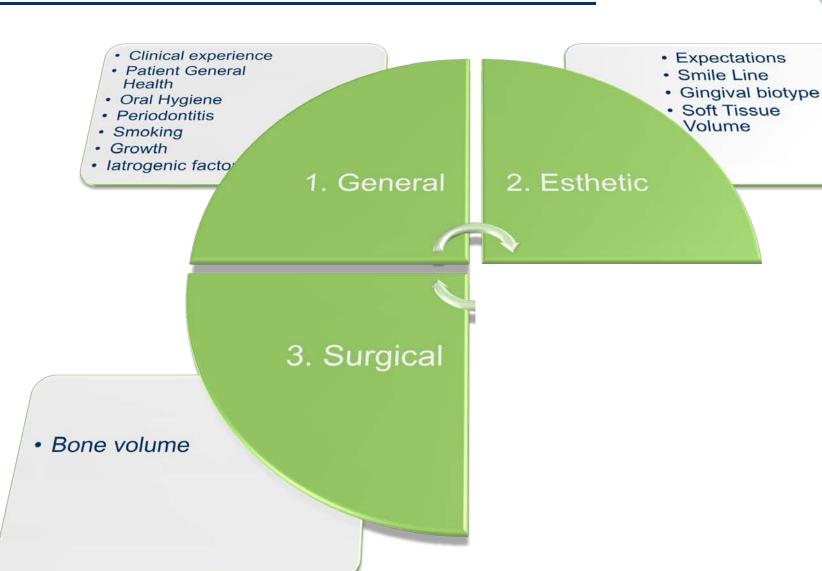
















General Modifying Factors



1.
Compromised
General or
Local health

2. Smoking Habits

3. Growth Considerations

4. latrogenic factors

<u>High Risk</u>	Reduced Immune system	Heavy Smoker (>10 cigs/day)	Ongoing	Sub-optimal preceeding outcome
<u>Moderate</u> <u>Risk</u>		Light smoker (<10 cigs/day)		Moderate / Suboptimal outcome
Low Risk	Healthy, co- operative with an intact immune system	Non-smoker	Completed	Optimal

Esthetic Modifying Factors



Patient Esthetic Expectati ons

1. Lip Line 2. Gingival biotype 3. Tooth Crown Shape 4. Implant site Infection 5.
Adjacent teeth bone level & restorativ e status

6. Width of span

7. Soft tissue anatomy

8. Bone anatomy at alveolar crest

	i <u>gh</u> isk	High	High	High scalloped, thin	Triangula r	Acute	>=7mm to contact point & Restored	>=2 teeth	Soft tissue defects	Vertical bone deficienc y
er	od ate isk	Mediu m	Medium	Medium scalloped, medium thick		Chronic	5.5-6.5mm to contact point	1 tooth (<= 7mm)		Horizontal bone deficiency
	ow isk	Low	Low	Low scalloped, thick	Rectangul ar	None	<=5mm to contact point & Virgin	1 tooth (>= 7mm)	Intact soft tissue	No bone deficiency

Surgical Modifying Factors



Bone volume

- Horizontal
- Vertical

1. Anatomic Risk

- 2. Esthetic Risk
- Zone
- Biotype
- Facial bone wall

3. Complexity of Treatment Process

adjunctive procedures

4. Risks of complications and consequences

High Risk / degree of difficulty	Deficient, requiring prior augmentation	High risk of involvement	Yes /Thin /Insufficient <1mm	Implant placement with staged procedures	High / Severely compromised outcome
Moderate Risk / degree of difficulty	Deficient, but allowing simultaneous augmentation	Moderate risk of involvement		Implant placement with simultaneous procedures	Moderate / Suboptimal outcome
Low Risk / degree of difficulty	Adequate	Minimal risk of involvement	No /Thick /Sufficient > 1mm	Implant placement without	Minimal / No adverse effect

Restorative Modifying Factors



1. Oral environment

- · a. Adjacent tooth
- · b. Tooth loss reason

2. Restorative volume

- · a. Interarch distance
- · b. Mesio-distal space
- c. Restoration span
- d. Saddle volume/character

3. Occlusion

- · a. Scheme
- · b. Bite involvement
- · c. Parafunctions

4. Provisional Restoration

- · a. During healing
- b. Development soft tissue
- · c. Loading protocol
- · d. Biomaterials
- e. Anticipated Maintenance

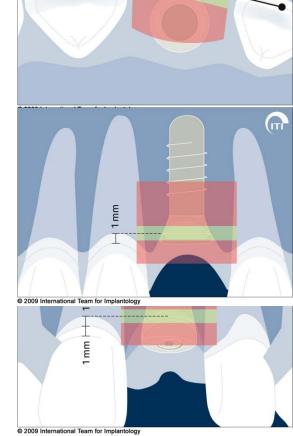
High Risk / degree of difficulty	a. Virgin / b. Periodontal disease or parafunction	a. Adjunctive therapy needed to gain sufficient space or b. to achieve satisfactory result /c. Full arch / d. Required	a. No guidance /b. Involved in guidance /c. Present	a. Fixed /b. Margin > 3mm from crest /c. Immediate /d/e. High
Moderate Risk / degree of difficulty		a. Restricted / b. some reduction required /c. Extended space		a. Removable /b. Margin <3mm from crest /c /d. PFM /e. Moderate
Low Risk / degree of difficulty	a. Restored teeth / b. Caries or Trauma	a. Adequate /b. Sufficient /c. Single tooth / d. Not required	a. Anterior guidance /b. minimal involvement /c. Absent	a. None /b. not required /c. Conventional/Early d. Resin-metal /e. Low

Examples, **General** Modifying Factors

1. Compromised General or Local health

4. latrogenic factors

Risk Factor	Remarks
Medical	 Severe bone disease causing impaired bone healing Immunological disease Medication with steroids Uncontrolled diabetes mellitus Irradiated bone Others
Periodontal	 Active periodontal disease History of refractive periodontitis Genetic predisposition
Oral Hygiene/ Compliance	 Home care measured by gingival indices Personality, intellectual aspects
Occlusion	Bruxism



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Example, Esthetic Modifying Factors ITI

Patient Esthetic

Expectati

ons

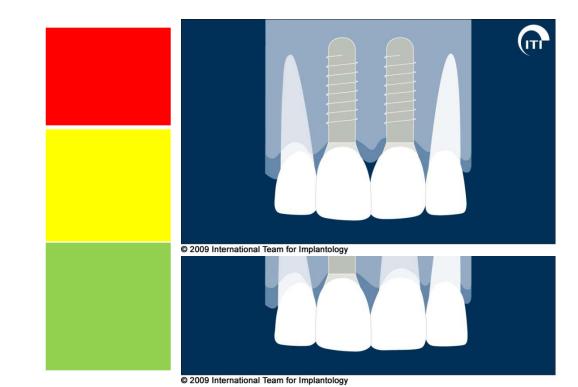
1. Lip Line 2. Gingival biotype 3. Tooth Crown Shape 4. Implant site Infection

5.
Adjacent teeth bone level & restorativ e status

6. Width of span

7. Soft tissue anatomy

8. Bone anatomy at alveolar crest



Example, Surgical Modifying Factors ITI



- Horizontal
- Vertical

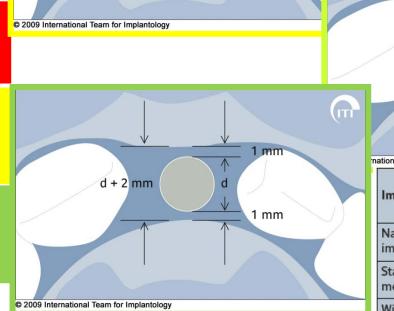
High Risk /	Deficient,
degree of	requiring prior
difficulty	augmentation

Moderate Risk / degree of difficulty

Deficient, but allowing simultaneous augmentation

Low Risk / degree of difficulty

Adequate



Implant Size	Core Diameter* Range (mm)	Minimum Horizontal Bone Dimension (mm)		
Narrow diameter implants	3.0 to 3.5	5.0 to 5.5		
Standard dia- meter implants	3.5 to 4.5	5.5 to 6.5		
Wide diameter implants	4.5 to 6.0	6.5 to 8.0		

Normative Surgical SAC classification

Areas of Low Esthetic Risk		case typ	e: Single Too	iii space			
	R	isk Assess	ment		Normative	N. A. P. L. B. L.	
Bone Volume	Anatomic Risk	Esthetic Risk	Complexity	Risk of Complications	Classification	Notes/Adjunctive Procedures that may be required	
Defining Char	acteristics:	One impla	int	*****************			
Sufficient	Low	Low	Low	Low	Straight- forward		
Deficient horizontally,						Procedures for simultaneous horizontal bone augmentatio	
allowing simultaneous augmenta-	Low	Low	Moderate	Low	Advanced	Low risk of complications for small defects, but risk may in- crease for larger defects	
tion						Donor site morbidity	
Deficient		8				Procedures for horizontal bone augmentation	
horizontally, requiring prior grafting	Low	Low	High	Moderate	Complex	Involvement of the mental foramina in the mandible	
prior granting						Donor site morbidity	
						Procedures for vertical and/or horizontal bone augmentation	
						Involvement of the mental foramina in the mandible	
Deficient vertically	High	Low	High	High	Complex	Procedures for sinus floor grafting	
						Risk to adjacent teeth with some vertical augmentation procedures	
						Donor site morbidity	



Normative Surgical SAC classification

Areas of Low Esthetic Risk		Case Typ	e: Single Too	th Space			
	R	isk Assess	ment		Marmatica	Notes/Adjunctive Procedures	
Bone Volume	Anatomic Kisk	Esthetic Risk	Complexity	Risk of Complications	Classification	that may be required	
Defining Char	acteristics:	One impla	et.		00101-0		
Sufficient	Low	Low	Low	Low	Straight- forward		
Deficient horizontally, allowing simultaneous augmenta-	Low	Low	Moderate	Low	Advanced	Procedures for simultaneous horizontal bone augmentation Low risk of complications for small defects, but risk may in- crease for larger defects	
tion						Donor site morbidity	
Deficient horizostally, requiring prior grafting	Low	Low	High	Moderate	Complex	Procedures for horizontal bone augmentation tryolvement of the mental foramina in the mandible Donor site morbidity	
Deficient vertically	High	Low	High :	High	Complex	Procedures for vertical and/or horizontal bone augmentation truolvement of the mental feramina in the mandible Procedures for sinus floor garling Risk to adjacent teeth with some vertical augmentation procedures. Donor site morbidity	

The SAC Classification in Implant Dentistry

Areas of Low Esthetic Risk		Case Typ	e: Short Eder	ntulous Space		
	Ri	isk Assessr	ment		Normative	Notes/Adjunctive Procedures
Bone Anatomic Volume Risk		Esthetic Risk	Complexity	Risk of Complications	Classification	Notes/Adjunctive Procedures that may be required
Defining Char	acteristics:	Two impla	ints and up to	3 teeth replaced	d	
Sufficient	Low	Low	Low	Low	Straight- forward	
Deficient						Procedures for simultaneous horizontal bone augmentation
horizontally, allowing simultaneous grafting	Low	Low	Moderate	Moderate	Advanced	Low risk of complications for small defects, but risk may in- crease for larger defects
grarting				ļ.,		Donor site morbidity
Deficient						Procedures for horizontal bone augmentation
horizontally, requiring pri- or grafting	Low	Low	High	Moderate	Complex	Involvement of the mental foramina in the mandible
OI granting						Donor site morbidity
						Procedures for vertical and/or horizontal bone augmentation
						Involvement of the mental foramina in the mandible
Deficient ver- tically and/or horizontally	12255	Low	High	High	Complex	Procedures for sinus floor grafting
Horizontany						Risk to adjacent teeth with some vertical augmentation procedures
	1					Donor site morbidity

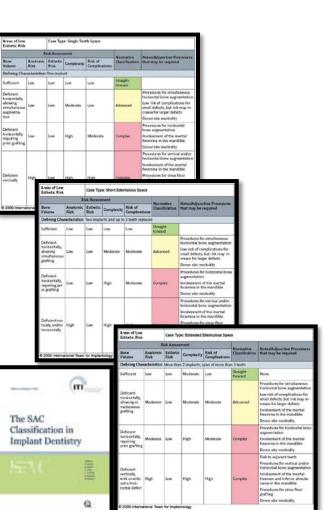
Normative Surgical SAC classification

	of Low tic Risk		Case Typ	e: Single T	ooth Space					_	
			Risk Assess	ment			Marmatica				
Bone Folurr	one Anatomic Esthetic		Complexity Risk of Complication		tions	Classificat		that may b	nctive Procedures e required		
Defini	ng Char	acteristi	ox One imple	urt.	-			_			
uffici	ent	Low	Low	Low	Low		Straight- forward				
diowi	etally, rg aneous	Low	Low	Moderate	Low		Advanced		horizontal b Low risk of small defect	for simultaneous one augmentation complications for cs, but risk may in- inger defects norbidity	
)efisi									Procedures	for horizontal	
equ eripe		of Low tic Risk		-	e: Short Ede	ntulo	us Space				
	-			sk Assess	nent			No	rmative	Notes/Adjunctive Proces	
	Bone Volum	ne	Anatomic Risk	Esthetic Risk			k of Classifications				
	Defin	ing Char	acteristics:	Two impla	nts and up to	3 tes	oth replaces	d			
Defic	Sufficient		Low	Low	Low	Low			aight- ward		
200	Deficient horizontally, allowing simultaneous grafting		Low	Low	Moderate	Mod	lerate	Ad	vanced	Procedures for simultar horizontal bone augme Low risk of complicatio small defects, but risk re crease for larger defect Donor site morbidity	entation ens for may in-
		ontally, ring pri-	Low	Low	High	Mod	lerate	Con	mplex	Procedures for horizont augmentation Involvement of the mer foramina in the mandit Donor site morbidity	ntal
	tically	ient ver- y and/or ontally	High	Low	High	High		Сон	mplex	Procedures for vertical horizontal bone augme Involvement of the me foramina in the mandit Procedures for sinus fo grafting Risk to adjacent teeth v some vertical augment procedures Donor site morbidity	entation ental ble our with



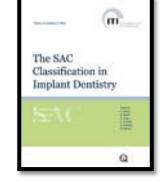
Areas of Low Esthetic Risk		Case Typ	e: Extended l	Edentulous Spac	e		
	R	isk Assess	ment		M	N. A. W. D. C.	
Bone Volume	Anatomic Risk	Esthetic Risk	Complexity	Risk of Complications	Normative Classification	Notes/Adjunctive Procedure that may be required	
Defining Char	acteristics:	More than	2 implants, s	pan of more that	n 3 teeth		
Sufficient	Low	Low	Moderate	Low	Straight- forward	None	
				-		Procedures for simultaneous horizontal bone augmentation	
Deficient horizontally, allowing si-	Moderate	Low	Moderate	Moderate	Advanced	Low risk of complications for small defects, but risk may in crease for larger defects	
multaneous grafting						Involvement of the mental foramina in the mandible	
	9	e e		3		Donor site morbidity	
Deficient						Procedures for horizontal bo augmentation	
horizontally, requiring prior grafting	Moderate	Low	High	Moderate	Complex	Involvement of the mental foramina in the mandible	
Prior Brancing						Donor site morbidity	
						Risk to adjacent teeth	
Deficient						Procedures for vertical and/o horizontal bone augmentation	
vertically, with or with- out a hori-	High	Low	High	High	Complex	Involvement of the mental foramen and inferior alveola nerve in the mandible	
zontal defect						Procedures for sinus floor grafting	
						Donor site morbidity	

Normative Surgical SAC classification



Esthetic Risk		case typ	e: Full Arch -	airaibie		
	R	isk Assess	ment		Normative	Notes/Adjunctive
Bone Volume	Anatomic Risk	Esthetic Risk	Complexity	Risk of Complications	Classification	Procedures that may be required
Defining Char	acteristics:	2 implants	s, interforamin	al region		
Sufficient	Low	Low	Low	Low	Straight- forward	None
Deficient, but allowing simultaneous bone aug- mentation	Moderate	Low	Moderate	Moderate	Advanced	Risk of perforation of lingua cortex Procedures for simultaneous horizontal bone augmenta- tion
Defining Char	acteristics:	3 or 4 imp	lants, interfor	aminal region		
Sufficient	Moderate	Low	Moderate	Moderate	Advanced	Involvement of the mental foramina
Deficient, but allowing simultaneous or prior bone augmenta- tion	Moderate	Low	High	High	Complex	Risk of mental nerve involve ment Risk of perforation of lingual cortex Procedures for simultaneous or prior horizontal bone aug mentation
Defining Char	acteristics:	> 4 implar	nts, extending	distal to interfora	minal region	
Sufficient both in vertical and horizontal dimensions	Moderate	Low	Moderate	Moderate	Advanced	Involvement of the mental foramina
Deficient, but allowing simultaneous or prior bone augmenta- tion	High	Low	High	High	Complex	Risk of mental nerve involvement Risk of perforation of lingual cortex Risk of inferior alveolar nerv involvement Procedures for simultaneous or prior horizontal bone aug mentation
Defining Char	acteristics:	4 or more	implants, imn	nediate loading		
Sufficient	Moderate	Low	High	Moderate	Complex	Coordination with restorativ practitioners and laboratory technicians

		reas of I sthetic F				Case	Туре	: Single	Too	th Spa	ace									
					R	isk As	sessm	ent					N-	math		Note-//	lingetic	. De	ne o de	
	1950	one olume		Anato Risk	mic	Esthe Risk	etic	Comple	xity	Risk Com	of plicati	ons		mative sificat		Notes/Ad that may				res
	C	efining	Chara	cteris	tics:	One ir	mplan	t						September 1						
	s	ufficient		Low		Low	ı	Low		Low		8	Stra forw	ight- ard						25
	[]	eficient	0													Procedure horizonta				70 V V
		of Low tic Risk			Cas	е Тур	e: Sho	ort Eder	ntulo	us Sp	ace									
				Ri	sk A	ssessi	nent					Nor	mati	ve .	Not	es/Adjunc	tive Pro	ced	ures	
	Bone Volum	ne	Anat Risk	tomic	Est	hetic k	Com	plexity	1000	k of nplica	tions			ation		may be r			aldráid)	
	Defin	ing Chai	acte	istics:	Two	impla	nts ar	nd up to	3 te	eth re	placed									
	Suffic	ient	Low		Low	ı	Low		Low	V		Stra forw	ight- /ard							
	Defic	ent														edures for zontal bor				n
	of Lov			Case	Туре	: Exte	nded	Edentu	lous	Spac	e								or in-	П
			R	isk Ass	essn	nent									78 J	- 41 D				П
Bone		Anato	mic	Esthe Risk	tic	Comp	lexity	Risk o		tions	Norm					unctive Properties		es	-	
Defin	ing Ch	aracteris	tics:	More t	han	2 imp	lants,	span of	mor	e thai	n 3 tee	th		93	-		_			neral
Suffic	ient	Low		Low		Mode	rate	Low			Straig			None						dical okinį
														700 70 800		s for simul bone aug			Gro	wth
Defic	ient ontally,													Low ri	isk of	complica cts, but ris	tions for		Site	e Fac
allow	ing si- aneous	Mode	rate	Low		Mode	rate	Mode	rate		Adva	nced		crease	e for	larger defe	ects	5	Bor	ne vo
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out a						0								nerve	in th	e mandib s for sinus	le		© 20	
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© 200	9 Interr	national 7	Team	for Imp	olant	ology		1						Dono	site	morbidity		-		





Normative SAC classification

- + Modifier Considerations
- → SAC Classification

General Factors	Assessment	Notes
Medical contraindications	None	
Smoking habit	None	
Growth considerations	None	
Site Factors	Assessment	Notes
Bone volume	Adequate in width	Vertical deficiency in the first and second molar sites Sinus floor augmentation required
Anatomic risk	High	Involvement of the maxillary sinus
Esthetic risk	Moderate	Posterior edentulous space Upper premolar teeth visible in the patient's smile.
Complexity	High	A staged approach is required. Technical demands associated with the sinus augmentation procedure Implants may only be placed in the molar sites following a successful outcome of the initial sinus augmentation procedure.
Risk of complications	Moderate	Risk of perioperative and postoperative complications associated with the sinus floor augmentation procedure
Loading protocol	Early	
SAC Classification	Complex	
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Application of **Surgica**l SAC classification: Single tooth space with **sufficient bone**



Non-Esthetic Zone

4. Risks of 3. Complexity 2. Esthetic 1. Anatomic complications Bone volume of Treatment Risk Risk and **Process** Sufficient consequences ·Low ·Low ·Low ·Low

Esthetic Zone

4. Risks of 3. Complexity 1. Anatomic 2. Esthetic complications Bone volume of Treatment Risk Risk and Process Sufficient consequences ·Low •High Moderate Moderate



Straightforward

Application of **Surgical** SAC classification: Single tooth space with deficient vertical bone volume



Non-Esthetic Zone

Bone volume Deficient Vertically

- 1. Anatomic Risk · High
- 2. Esthetic Risk ·Low
- 3. Complexity of Treatment **Process** ·High
- 4. Risks of complications and consequences · High

Esthetic Zone

Complex

- Bone volume Deficient vertically
- 1. Anatomic Risk · High
- 2. Esthetic Risk •High
- 3. Complexity of Treatment **Process** ·High
- complications and consequences
- · High

4. Risks of

Consistent 5 clinical parameters





6. 2. Mesio-4. 1. Angle 3. Load Provision Parafunct Esthetic distal class protocol al Risk ion space Sculpting

Anterior edentulous spaces

4. 6. 1. 3. Mesio-5. Occlusio 2. Angle Provision 8. Load Esthetic Parafunc distal Provision class n/articula protocol al Risk al type tion space Sculpting tion

Posterior Single Teeth

7. 1. 2. Mesio-5. 6. 4. Load Provision Parafunct Interarch distal 3. Access Esthetic protocol al distance Risk ion space Sculpting

Posterior edentulous spaces

7. 9. 8. 1. Inter-5. Provisio 4. Load Mesio-3. 6. Para-Screwl Esthetic Occlusio arch nal Access function distal protocol Cement distance Risk Sculptin retention space

Clinical parameters depending on intraoral location and size

Application of the **Restorative** SAC classification

Edentulous - Fixed Restorations

1. Interarch distance

2. Access

3. Load protocol 4. Esthetic Risk

5. Interim provisional

6. Parafunction 7. Occlusal scheme

Edentulous Maxilla – Removable	Notes	Straightforward	Advanced	Complex
Inter-arch distance (bar & clip retained)	Refers to the distance from the proposed implant restorative margin to the opposing occlusion.		> 10 mm	< 10 mm = not indicated
Inter-arch distance (Individual retentive elements)			> 8 mm	< 8 mm = not indicated
Loading protocol (bar & clip retained)			Early	Immediate (bar only)
Loading protocol (individual retentive elements)			Conventional/Early	
Esthetic risk	Refer for ERA (Treat- ment Guide 1)		Low	Moderate/high (unreal- istic expectations)
Interim restorations during healing			Removable	
Occlusal para-function	Risk of complication is to the restoration, not to implant survival		Absent	Present
Occlusal scheme/issues (fixed opposing arch)	ē		Anterior guidance	No anterior guidance
Occlusal Scheme/Issues (Complete denture in opposing arch)			Balanced	Balanced occlusion not possible
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Edentulous Mandible – Removable	Notes	Straightforward	Advanced	Complex
Inter-arch distance (bar & clip retained)	Refers to the distance from proposed implant restorative margin to opposing occlusion.		> 10 mm	< 10 mm = not indicated
Inter-arch distance (individual retentive elements)		> 8 mm		< 8 mm = not indicated
Number of implants	8	2	3 or more	
Loading protocol		Conventional/ early		Immediate
Esthetic risk	Refer for ERA (Treatment Guide 1)	Low	Moderate/high (unre- alistic expectations)	
Interim restorations during healing		Removable		
Occlusal para-function	Risk of complication is to the restoration, not im- plant survival		Absent	Present
Occlusal scheme/issues (fixed opposing arch)			Anterior guidance	No anterior guidance
Occlusal scheme/issues (complete denture in opposing arch)			Balanced	Balanced occlusion not possible
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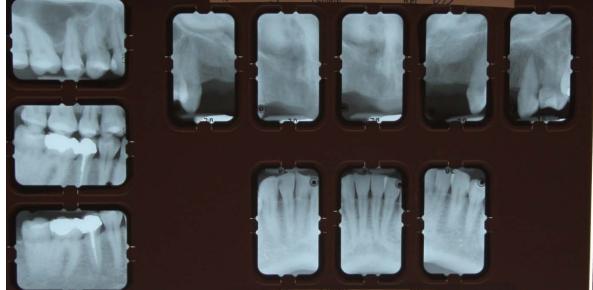




















Level of Risk						
Low	n. Red Light smoker (< 10 cigs/day) (> 1 Medium High Medium scalloped, medium thick Tria Chronic Acu 5.5 to 6.5 mm to contact point ≥ 7 Res	High				
Healthy, co-operative patient with an intact immune system.		Reduced immune system				
Non-smoker		Heavy smoker (> 10 cigs/day)				
Low	Medium	High				
Low	Medium	High				
Low scalloped, thick		High scalloped, thin				
Rectangular	T _E	Triangular				
None	Chronic	Acute				
≤ 5 mm to contact point		≥ 7 mm to contact point				
Virgin		Restored				
1 tooth (≥ 7 mm)	1 tooth (≤ 7mm)	2 teeth or more				
Intact soft tissue		Soft tissue defects				
Alveolar crest without bone deficiency	Horizontal bone deficiency	Vertical bone deficiency				
	Healthy, co-operative patient with an intact immune system. Non-smoker Low Low Low scalloped, thick Rectangular None ≤ 5 mm to contact point Virgin 1 tooth (≥ 7 mm) Intact soft tissue Alveolar crest without bone	Low Moderate Healthy, co-operative patient with an intact immune system. Light smoker (< 10 cigs/day)				



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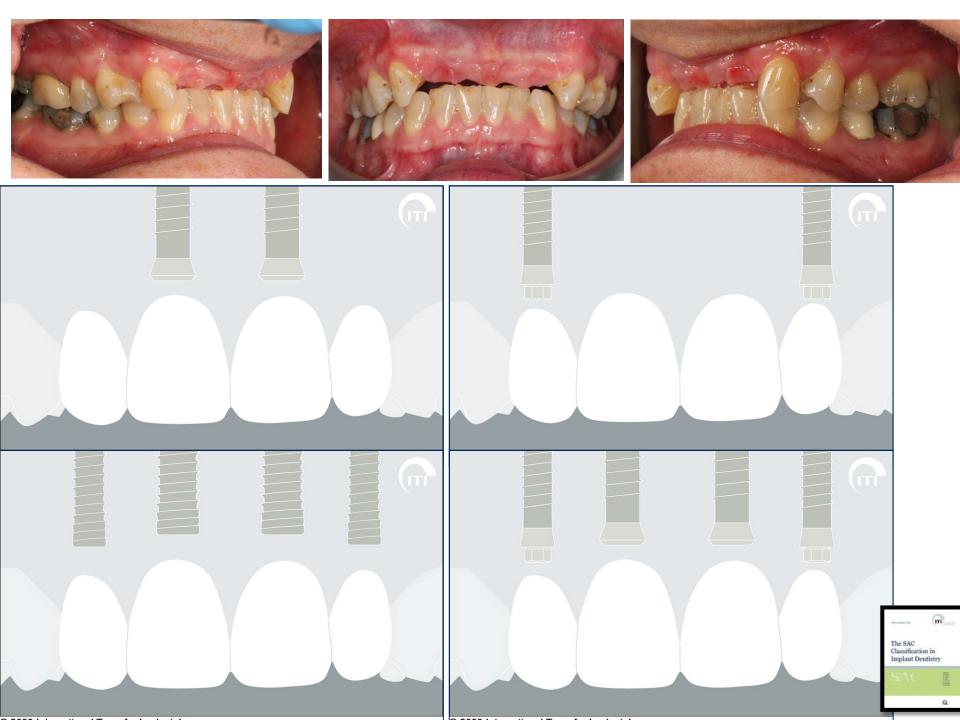
Issue		Degree of Difficulty		
13346	Low	Moderate	High	
Oral Environment			2	
General Oral Health	No active disease		Active disease	The state of the state of
Condition of adjacent teeth	Restored Teeth		Virgin teeth	
Reason for tooth loss	Caries/Trauma		Periodontal Disease, or occlusal parafunction	
Restorative Volume				
Inter-arch distance	Adequate for planned restoration.	Restricted space, but can be managed.	Adjunctive therapy will be necessary to gain sufficient space for planned restora- tion.	
Mesio-distal space	Sufficient to fit replacements for missing teeth	Some reduction in size, or number of teeth will be necessary	Adjunctive therapy will be needed to achieve a satisfactory result.	
Span of restoration	Single tooth	Extended edentulous space	Full arch	
Volume and characteristics of the edentulous saddle	No prosthetic soft-tissue re- placement will be necessary		Prosthetic replacement of soft tissue will be needed for esthetics or phonetics	
Occlusion			8.	
Occlusal Scheme	Anterior guidance		No guidance	
Involvement in occlusion	Minimal involvement		Implant restoration is involved in guidance.	
Occlusal para-function	Absent		Present	
Provisional Restorations				
During implant healing	None required	Removable	Fixed	
Implant supported provi- sionals needed	Not required.	Restorative margin <3mm apical to mucosal crest	Restorative margin > 3mm apical to mucosal crest	
Loading Protocol	Conventional or early loading		Immediate loading	The SAC Classification in Implant Dentistry
Materials/Manufacture	Resin based materials ± metal reinforcement	Porcelain fused to metal.		SEVC I
Maintenance Needs	Low	Moderate	High	Q







General Factors	Assessment	Notes	
Medical contraindications	None		7
Smoking habit	None		1
Growth considerations	None		
Site Factors	Assessment	Notes	
Bone volume	Deficient	Horizontal bone augmentation in a staged approachrequired using autologous cortico-cancellous bone block	8
Anatomic risk	Low		
Esthetic risk	High	As determined by the ERA	
Complexity	High	Immediate placement and flapless approach increases treatment complexity.	
Risk of complications	High	Implant placement with staged procedures High risk of surgical complications with the bone graft, and donor site morbidity. Complications may significantly affect treatment outcomes	
Loading protocol	Conventional or Early	Cla	e SAC assification aplant Denti
SAC Classification	Complex	li si	=7C



<u>Assumptions – SAC Tool</u>

The SAC Classification assumes that appropriate training, preparation and care are devoted to the planning and implementation of treatment plans. No classification can adequately address cases or outcomes that deviate significantly from the norm. In addition, it is assumed that clinicians will be practicing within the bounds of their clinical competence and abilities. Thus, within each classification, the following general and specific assumptions are implied:

General:

- Treatment will be provided in an appropriately equipped operatory with an appropriate aseptic technique.
- Adequate clinical and laboratory support is available.
- · Recommended protocols are followed.

Patients:

- · Patients' medical conditions are not compromised or are appropriately addressed.
- Patients have realistic expectations with respect to the outcomes of their treatment.

Specific:

- The type, dimensions and number of implants to be placed are appropriate for the site(s).
- · The implants are correctly positioned and adequately spaced.
- Restorative materials that are used are appropriate to the task.

This SAC Assessment Tool provides normative feedback. In this context, "normative" relates to the classification that conforms to the norm, or standard, for a given clinical situation in implant dentistry and thus to the most likely classification of a case. The normative classification may alter as a result of modifying factors and/or complications.

http://www.iti.org/var/external/sac-tool/default-1000.htm



Assessment of Surgical Cases

Assessment of

Restorative Cases

This tool is based on a book entitled "The SAC Classification in Implant Dentistry" jointly published by the ITI and the Quintessence Publishing Group. It comprises the proceedings of a consensus conference organized by the ITI in 2007 with the aim of providing normative guidelines for various types of restorative and surgical cases based on a system referred to as the SAC (Straightforward, Advanced and Complex) Classification system.

Please note that certain assumptions have been made in the establishment of this SAC Classification. To review them, click on "Assumptions" in the menu bar below.