



# PRODUCT PORTFOLIO

[WWW.BIOVOXEL.TECH](http://WWW.BIOVOXEL.TECH)

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# BRINGING INNOVATION TO MEDICAL EDUCATION VIA 3D PRINTING

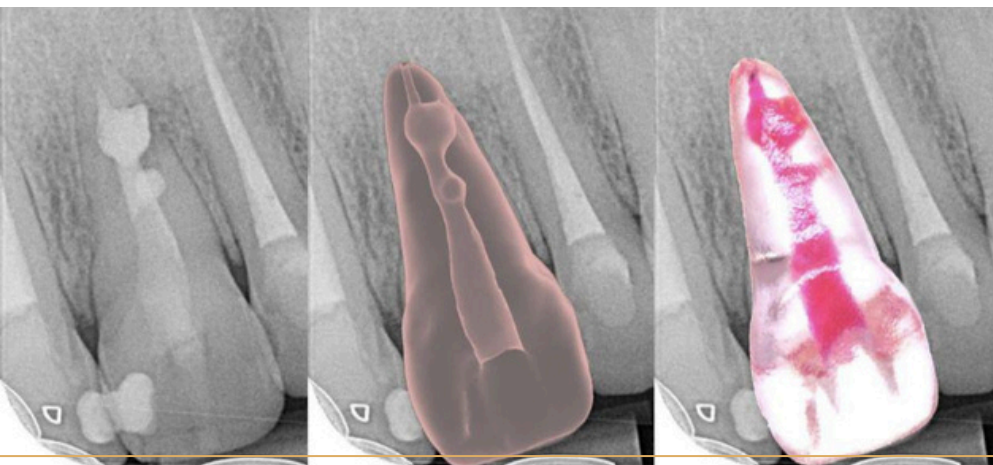


## About Us

Biovoxel Technologies s.r.o. specializes in producing **highly realistic, top-quality training models** using advanced 3D printing technology.

Founded with a passion for innovation and education, our team consists of experts in dental science, engineering, and technology.

By integrating innovation with education, we strive **to bridge the gap between theoretical knowledge and hands-on practice** for dental professionals worldwide, ultimately contributing to **improved patient care**.



We also provide custom-made models tailored to meet our customers' needs.



# WHY CHOOSE US

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## REALISTIC DESIGN

Our models are designed with precise anatomical details to replicate real-life scenarios, helping you build confidence and refine your skills.



## INNOVATION AT THE CORE

We are constantly exploring new ways to enhance dental education through technological innovation. With cutting-edge 3D printing technology, we deliver consistent quality, accuracy, and versatility in all our products.



## EXPERTISE AND EXPERIENCE

Our team consists of experienced professionals from dentistry and technology, ensuring a comprehensive approach to our solutions.



## CUSTOMER-CENTRED APPROACH

Your success is our priority, and we offer ongoing support to help you maximize the benefits of our training models.



## COMMITMENT TO EDUCATION

We're passionate about bridging the gap between theoretical knowledge and hands-on practice, empowering the next generation of dental experts.



# TRAINING MODELS AND TOOLS

## ENDOTOOTH

### REPLICAS OF REAL TEETH FOR TRAINING IN ENDODONTICS

Utilization of high-end 3D printing technologies and microCT imaging

Transparent material with dentin hardness

Great variety available

Custom-made replicas on demand

### Practical Training

EndoTooth replicas are practical part of professional hands-on workshops, courses, congresses and curricula of universities.



## ENDOTOOTH 11 UPPER INCISOR



- **Standard first upper incisor (11 ISO notation)**
- **Intact / Accessed**
- **With pulp / Without pulp tissue**
- **Difficulty 2/5**

First upper incisor – standard, uncomplicated model. Pulp chamber is of regular size, root canal is quite wide, unobliterated and straight. Canal continually narrows until its 0.13mm apical diameter. 2 lateral canals in the apical third are of interest. The replica is available in 3 variants (accessed with or without pulp tissue and intact with pulp tissue).



## ENDOTOOTH 11 INCOMPLETE ROOT FORMATION



- **Upper incisor (11 ISO notation) with incomplete root formation**
- **Accessed**
- **With pulp / Without pulp tissue**

Upper incisor with extra wide apical opening due to incomplete root formation with its diameter of 1,3 mm. It makes the model perfect for practice of a bioceramic apical plug placement.



## ENDOTOOTH 14 UPPER PREMOLAR



- **Challenging upper premolar (14 ISO notation) with 3 root canals**
- **Intact / Accessed**
- **With pulp / Without pulpal tissue**
- **Difficulty level: 4,5/5**

Pulp chamber is slightly contracted with 2 canal entrances on the floor. Buccal canal bifurcates after 5mm into two canals, each with their own portal of exit. This bifurcation copies the outer buccal root configuration. Because of the bifurcation and significant curvature at the apical third, shaping of the buccal root canals presents a challenge. Buccal root canals have apical diameters 0,13 mm and 0,12 mm. Palatal root canal has a slight curve buccally and is 0,11 mm wide at the apex. The apical thirds of the canals are very narrow and their negotiation is difficult.



## ENDOTOOTH 14 UPPER PREMOLAR - MESIO-OCCLUSAL ACCESS



- **Upper premolar (14 ISO notation) with 2 root canals**
- **Accessed**
- **With pulp / Without pulpal tissue**
- **Difficulty level: 4/5**

Tooth is accessed, with wide mesio-occlusal access cavity. This situation represents ideal conditions not only for endodontic training but also for approximal composite build-up. Pulp chamber is slightly contracted with 2 canal entrances on the floor. Each canal entrance proceeds into its respective canal - buccal and palatal. The canals are very narrow in the middle and apical 1/3 and are very challenging to negotiate and gain patency.





## ENDOTOOTH 16 UPPER MOLAR (Less Complex)



- Upper Molar (16 ISO notation) with 4 root canals (less complex variant)
- Intact / Accessed
- With pulp / Without pulpal tissue
- Difficulty: 3/5



Pulp chamber and root canal system are without significant calcifications and obliterations. Root canals of the replica are quite narrow and need to be negotiated patiently. All canals have relatively straight, only very slightly bend course.

MB1 and MB2 are quite thin at their apical diameters – both diameters are 0.10mm. Distal canal has 0.11mm apical diameter. Palatal canal is relatively wider in its course and narrows down to 0.15mm apical diameter.



## ENDOTOOTH 16 UPPER MOLAR (More Complex)



- More challenging upper molar (16 ISO notation) with 4 root canals
- Intact / Accessed
- With pulp / Without pulpal tissue
- Difficulty: 3,5/5



Pulp chamber and root canal system are without significant calcifications and obliterations, except the MB2 and narrow canal entrances to mesiobuccal canals. MB2 root canal presents a challenge – after 4 mm long common course with MB1 it separates and continues as a narrow, slightly S curved canal. 2 mm prior to terminus there is a communication through isthmus between the two mesiobuccal canals.

Apical diameter of MB1 and MB2 is 0,10 mm. Distal root canal forms a bifurcation in apical third and reaches apical diameter of 0,18 mm. Palatal canal curves slightly buccally in its course, is quite wide and narrows to 0,10 mm at the apical diameter.



## ENDOTOOTH 21 INTERNAL RESORPTION



- Upper incisor (21 ISO notation) with internal resorption
- Intact / Accessed
- With pulp / Without pulpal tissue
- Difficulty: 4/5

Upper incisor with one root canal and specific pathology – excessive internal resorption. In the middle third of the canal there is a middle-sized resorption cavity that does not perforate the outer surface of the tooth. In the apical third there is a more extensive resorption cavity that perforates the root and communicates with periodontium. The root canal itself is relatively wide and oval on the cross-section. The apical diameter is 0,4 mm.



## ENDOTOOTH 24 UPPER PREMOLAR



- Upper premolar (24 iso notation) with two root canals
- Intact (non-accessed)
- Difficulty: 2,5/5

Pulp chamber is standard sized, with two canal entrances into palatal and buccal root canal on the floor. Both canals have relatively uncomplicated, straight course. Palatal canal divides into two equal ramifications 1,5mm in apical delta before its end. Buccal canal has apical diameter of 0,13 mm. Palatal canal ramifications have diameters of 0,13 and 0,14mm.





## ENDOTOOTH 36 LOWER MOLAR (Less Complex)



- Lower molar (36 ISO notation) with 4 root canals
- Intact / Accessed
- Less complex anatomy
- Difficulty: 2,5/5

Pulp chamber is standard sized, the endodontic system continues into 3 canal entrances (2 mesial-buccal and oral and 1 distal) which lead to relatively straightforward and uncomplicated course of respective canals. Distal canal is ribbon shaped. Apical diameters of canals vary from 0,1 to 0,18 mm.



## ENDOTOOTH 37 LOWER MOLAR (More Complex)



- Lower molar (37 ISO notation) with 3 root canals
- Intact / Accessed
- With pulp / Without pulpal tissue
- Difficulty: 3/5

Pulp chamber is slightly contracted. Mesial canals have one common canal entrance. In the first third of mesial root they form one ribbon shaped canal before it divides into typical mesiobuccal and mesiolingual canal. Both of them are curved in the apical third. MB canal curvature is severe. Apical diameter of MB canal is 0,16 and 0,12 mm of ML canal.

Distal canal is wide and ribbon shaped. It is formed by distobuccal and distolingual canal connected with isthmus what can be seen on the cross-section. Between the middle and the apical third the isthmus narrows down until it disappears for 3 mm distance. The only portal of exit is placed slightly laterally and the apical diameter of the distal canal is 0,15mm.



## ENDOTOOTH 43 LOWER CANINE



- Lower canine (43 ISO notation) with one root canal
- Intact / Accessed
- With / Without Pulpal Tissue
- Difficulty: 2,5/5

Lower canine with typical pulp chamber and one mesiodistally flattened root canal. The course of the canal is relatively uncomplicated until its apical delta, where it divides into two equivalent ramifications placed in vestibular and lingual direction. Both of them have apical diameter 0,13 mm.



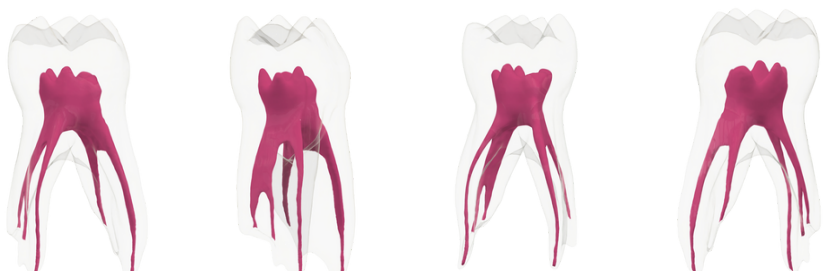
## DECIDUOUS TEETH

### ENDOTOOTH 84 DECIDUOUS MOLAR



- Lower deciduous molar (84 ISO notation) with 2 mesial and 3 distal root canals
- Intact (non-accessed)
- Difficulty: 3,5/5

Apical diameters are 3x 0,11 mm, 0,19 mm and 0,14 mm. Model is designed to practice pulpotomy, pulpectomy and endodontic treatment on deciduous teeth.



# ENDOTOOTH OVERVIEW

TRANSPARENCY	TRANSPARENT			OPAQUE			
TOOTH ACCESS	INTACT + PULP	ACCESSED - PULP	ACCESSED + PULP	INTACT + PULP	ACCESSED - PULP	ACCESSED + PULP	DIFFICULTY
ENDOTOOTH 11 UPPER INCISOR	●	●	●	●	●	●	2/5
ENDOTOOTH 11 INCOMPLETE ROOT FORMATION		●	●		●	●	2/5
ENDOTOOTH 14 UPPER PREMOLAR	●	●	●	●	●		4,5/5
ENDOTOOTH 14 UPPER PREMOLAR (Less Complex)	●	●	●	●	●		3/5
ENDOTOOTH 16 UPPER MOLAR (Less Complex)	●	●	●	●	●		3/5
ENDOTOOTH 16 UPPER MOLAR (More Complex)	●	●	●	●	●		3,5/5
ENDOTOOTH 21 INTERNAL RESORPTION	●	●	●	●	●	●	4/5
ENDOTOOTH 24 UPPER PREMOLAR	●			●			2,5/5
ENDOTOOTH 36 LOWER MOLAR (Less Complex)	●	●	●	●	●		2,5/5
ENDOTOOTH 37 LOWER MOLAR (More Complex)	●	●	●	●	●		3/5
ENDOTOOTH 43 LOWER CANINE	●	●	●	●	●	●	2,5/5
ENDOTOOTH 84 DECIDUOUS MOLAR	●			●			3,5/5

\*If you need a model designed for your specific needs, don't hesitate to reach out to us.





## BIOVOXEL TYPODONT

EndoTooth replicas compatible with Biovoxel Jaw and phantom heads

### ENDOTOOTH 11 UPPER INCISOR FOR INTERNAL BLEACH TRAINING (Biovoxel Typodont)



- First upper incisor (11 ISO notation)
- Accessed with prepared cavity, canal size ISO 50/04
- Transparent / Opaque
- Compatible with Biovoxel Typodont Jaws



## EndoTooth 11 Upper Incisor (Biovoxel Typodont)



- **Standard first upper incisor (11 ISO notation)**
- **Intact / Accessed**
- **Transparent / Opaque**
- **With pulp / Without pulpal tissue**
- **Difficulty 2/5**

The first upper incisor – standard, uncomplicated model. The pulp chamber is of regular size, and the root canal is quite wide, unobliterated, and straight. The canal continuously narrows until it reaches a 0.16mm apical diameter. In the apical portion, there is one lateral canal present. The replica is available in three variants (accessed with or without pulpal tissue and intact with pulpal tissue). The working length from the palatal access to the tooth apex is 22-23mm.



## EndoTooth 16 Upper Molar (Biovoxel Typodont)



- **First Molar (16 ISO notation)**
- **Intact / Accessed**
- **Transparent / Opaque**
- **With pulp / Without pulpal tissue**
- **Difficulty: 3,5/5**

Pulp chamber and root canal system of this first molar are without significant calcifications and obliterations. Canals are quite long - ranging approx 23-25mm measured from respective cusps. MB2 root canal presents a challenge – after 4 mm long common course with MB1 it separates in the deeper portion of the canal's first third and continues as a narrow, slightly S curved canal. 2 mm prior to terminus there is a communication through isthmus between the two mesiobuccal canals. Apical diameters of respective canals are in range from 0.15 to 0.3mm. Fits the Biovoxel typodont.



## EndoTooth 16 Upper First Molar for pulpotomy (Biovoxel Typodont)



- First Molar (16 ISO notation) with simulated deep occlusal caries at the D4 stage
- Realistic endodontic system
- Intact with pulp

This first molar model with simulated deep occlusal caries at the D4 stage, complete with a realistic endodontic system, including pulp and four canals. Ideal for training in pulp capping, pulpotomy, pulpectomy, or other endodontic procedures. Designed to fit the Biovoxel typodont jaw.



## Re-EndoTooth 26 (Biovoxel Typodont)



- First Molar (26 ISO notation)
- An advanced molar model for re-endo training.

The Biovoxel Re-EndoTooth is an advanced molar model for re-endo training. The tooth **features a separated instrument** in the MB1 canal, **an untreated MB2** which can be found 3mm deeper from the common canal course with MB1, an **FRC post** in the palatal canal, and **gutta-percha filling** in the D and partially MB canals.

The tooth has a composite-filled access cavity. It can be held in hand, in one of the Biovoxel holders, or inserted into a Biovoxel Typodont.







## KaVo ANALOG

EndoTooth replicas compatible with KaVo jaws and phantom heads

### ENDOTOOTH 11 CENTRAL INCISOR (KaVo Analog)

- Upper central incisor (11 ISO notation)
- Standard, uncomplicated model
- Difficulty 1,5/5

Pulp chamber is standard sized, root canal is quite wide, unobliterated and straight. Canal continually narrows until 0,1 mm and is ended blindly inside the model (model has no apical foramen).



## ENDOTOOTH 14 UPPER MOLAR (KaVo Analog)



- **Challenging upper premolar (14 ISO notation) with 3 root canals**
- **Intact / Accessed**
- **Difficulty: 4/5**

Pulp chamber is slightly contracted with 2 canal entrances on the floor. Buccal canal bifurcates after 5mm into two canals, each with their own portal of exit. This bifurcation copies the outer buccal root configuration. Because of the bifurcation and significant curvature at the apical third, shaping of the buccal root canals presents a challenge.

Buccal root canals have apical diameters 0,13 mm and 0,12 mm. Palatal root canal has a slight curve buccally and is ended blindly inside the model (model has no apical foramen.).



## ENDOTOOTH 16 UPPER MOLAR (KaVo Analog)



- **Upper Molar (16 ISO notation) with 4 root canals (less complex variant)**
- **Intact / Accessed**
- **Difficulty: 3/5**

Pulp chamber and root canal system are without significant calcifications and obliterations. Root canals of the replica are quite narrow and need to be negotiated patiently. All canal have relatively straight, only very slightly bend course. MB1 and MB2 are quite thin at the apical diameters – they are ended blindly inside the model (model has no apical foramen.).



## ENDOTOOTH 24 UPPER PREMOLAR (KaVo Analog)



- Upper premolar (24 ISO notation) with two root canals
- Intact (non-accessed)
- Difficulty: 2,5/5

Pulp chamber is standard sized, with two canal entrances into palatal and buccal root canal on the floor. Both canals have relatively uncomplicated, straight course. Palatal canal divides into two equal ramifications 1,5mm in apical delta before its end. Buccal canal has apical diameter of 0,13 mm. Palatal canal ramifications have diameters of 0,13 and 0,14mm.



## ENDOTOOTH 36 LOWER MOLAR (KaVo Analog)



- Lower molar (36 ISO notation) with four root canals
- Intact (non-accessed)
- Difficulty: 2,5/5

Endotooth is designed to fit KaVo Typodonts. Pulp chamber is standard sized, the endodontic system continues into 3 canal entrances (2 mesial-buccal and oral and 1 distal) which lead to relatively straightforward and uncomplicated course of respective canals. Distal canal is ribbon shaped. Canals are ended blindly.



## ENDOTOOTH 43 LOWER CANINE (KaVo Analog)



- Lower canine (43 ISO notation) with one root canal
- Intact (non-accessed)
- Difficulty: 2,5/5

Lower canine with typical pulp chamber and one mesiodistally flattened root canal. The course of the canal is relatively uncomplicated until its apical delta, where it divides into two equivalent ramifications placed in vestibular and lingual direction. Both of them are ended blindly inside the model (model has no apical foramen).



## ENDOTOOTH KaVo ANALOG OVERVIEW

TRANSPARENCY	TRANSPARENT			OPAQUE		
TOOTH ACCESS	INTACT + PULP	ACCESSED - PULP	ACCESSED + PULP	INTACT + PULP	ACCESSED - PULP	ACCESSED + PULP
ENDOTOOTH 11 (KaVo Analog)	●			●		
ENDOTOOTH 14 (KaVo Analog)	●			●		
ENDOTOOTH 16 (KaVo Analog)	●			●		
ENDOTOOTH 24 (KaVo Analog)	●			●		
ENDOTOOTH 36 (KaVo Analog)	●			●		
ENDOTOOTH 43 (KaVo Analog)	●			●		





# CARIESTOOTH

## THE MOST REAL CARIES TREATMENT EXPERIENCE

Replicas for training in conservative dentistry  
Simulating true anatomy visually and tactilely  
Darkened soft excavable caries  
Enamel shell covering dentin core

Custom-made on demand  
Phantom-head specific fit

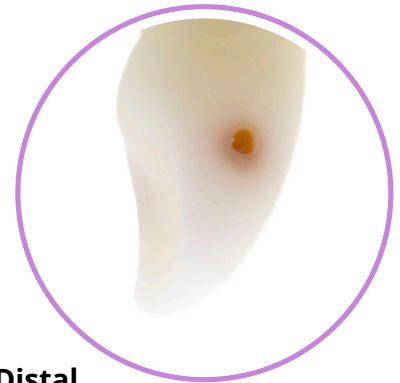


## CARIESTOOTH 11 (KaVo Analog)



- **Upper incisor (11) with simulated caries mesially and distally**
- **Compatible with KaVo phantom heads**
- **Simulated enamel shell, dentin core and soft, excavable caries**

Teeth replicas for restorative dentistry training. Caries is simulated visually and tactilely. Caries is in D3 stage and can be dyed with caries marker. Tooth replica is shaped to fit KaVo phantom models.



**Caries: Mesio- Distal**

## CARIESTOOTH 14 (KaVo Analog)



- **Upper premolar (14) with simulated caries occlusally**
- **Compatible with KaVo phantom heads**
- **Simulated enamel shell, dentin core and soft, excavable caries**

Teeth replicas for restorative dentistry training. Caries is simulated visually and tactilely. Caries is in D3 stage and can be dyed with caries marker. Tooth replica is shaped to fit KaVo phantom models.



**Caries: Occlusal**

## CARIESTOOTH 16 (KaVo Analog)

- Upper molar with simulated mesio occlusal caries
- Compatible with KaVo phantom heads
- Simulated enamel shell, dentin core and soft, excavable caries



Teeth replicas for restorative dentistry training. Caries is simulated visually and tactilely. Caries is in D3 stage and can be dyed with caries marker. Tooth replica is shaped to fit KaVo phantom models.



**Caries: Mesio- Occlusal**

## CARIESTOOTH 26 (KaVo Analog)

- Upper molar with simulated mesio-occluso-distal caries
- Compatible with KaVo phantom heads
- Simulated enamel shell, dentin core and soft, excavable caries



Teeth replicas for restorative dentistry training. Caries is simulated visually and tactilely. Caries is in D3 stage and can be dyed with caries marker.

Tooth replica is shaped to fit KaVo phantom models.

**Caries: Mesio - Occluso - Distal**



## CARIESTOOTH 36 (KaVo Analog)



- Lower molar with simulated caries
- Compatible with KaVo phantom heads, DO and MOD variant
- Simulated enamel shell, dentin core and soft, excavable caries

Teeth replicas for restorative dentistry training. Caries is simulated visually and tactilely. Caries is in D3 stage and can be dyed with caries marker.

Tooth replica is shaped to fit KaVo phantom models.



**Caries: Disto- Occlusal**



**Caries: Mesio - Occluso - Distal**



**Caries: Undermined Cusp**



## CARIESTOOTH 46 PRE ENDO (KAVO ANALOG)



- **Lower molar with simulated mesio-occluso-distal caries**
- **Compatible with KaVo phantom heads**
- **Simulated enamel shell, dentin core and soft, excavable caries**

Lower molar with simulated mesio-occluso-distal caries at the D4 stage, penetrating into the pulp. The simulated carious matter is differentiated from the pulp by color. The pulp chamber and canal entrances can be cleaned of artificial pulp (see the transparent tooth picture). After removing the carious lesion, a significant amount of tooth structure is missing, making it an ideal model for pre-endo build-up training.



**Caries: Mesio - Occluso - Distal**

## CARIESTOOTH 47 (KaVo Analog)



- **Lower molar with simulated mesio-occluso-distal caries**
- **Compatible with KaVo phantom heads**
- **Simulated enamel shell, dentin core and soft, excavable caries**

Teeth replicas for restorative dentistry training. Caries is simulated visually and tactilely. Caries is in D3 stage and can be dyed with caries marker.

Tooth replica is shaped to fit KaVo phantom models. If you are interested in different type of fit, please use our contact form.



**Mesio - Occluso - Distal**

# MONOMATERIAL TOOTH

**Monomaterial teeth compatible with Biovoxel Typodont phantom heads/jaws for dental training.**

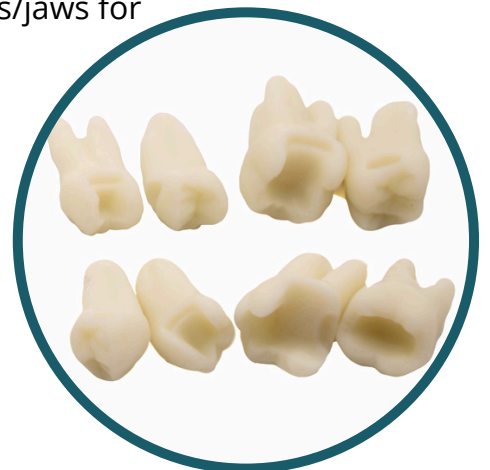


## **MONOMATERIAL TEETH (BIOVOXEL TYPODONT)**

Monomaterial teeth compatible with Biovoxel Typodont phantom heads/jaws for dental training.

## **BIOVOXEL TEETH WITH CAVITIES**

Monomaterial teeth with cavities compatible with Biovoxel Typodont phantom heads/jaws for dental training.



## **MONOMATERIAL TEETH (KAVO)**

Monomaterial teeth compatible with KaVo phantom heads/jaws for dental training.

- ✓ Simple monomaterial teeth
- ✓ Custom made on demand
- ✓ Dentin hardness
- ✓ Phantom-head specific fit
- ✓ Tooth colored shade

# BIOVOXEL TYPODONT JAW

BioVoxel Dental Models for Phantom Head



**REPLACEABLE TEETH**



**REAL ANATOMY  
(ALSO ROOTS)**



**TEETH ARE FIXED AND  
RELEASED WITH SCREWS**



**SOFT, REMOVABLE GUMS**



**FIXABLE IN BIOVOXEL/ KAVO/ FRASACO/ NISSIN  
PHANTOMS**





## THE MODEL INCLUDES:

- 1 set of teeth
- (1x Upper Jaw + 1x Lower Jaw)
- Interchangeable gingiva
- (1x Maxilla + 1x Mandible)

(It can also be ordered separately-  
only maxilla or mandible)





# BIOVOXEL PHANTOM HEAD

## BioVoxel Dental Models for Phantom Head

Phantom head attachable to a dental unit or table.

- **Freely adjustable** – allows for any ergonomic position of the doctor
- The phantom head includes a **pair of typodont jaws (upper and lower)**
- The head has a **soft, replaceable silicone face**
- It is possible to connect it to suction







# ANATOMICAL MODELS

Dental Anatomy models with beautiful morphology



## MANDIBULAR ANESTHESIA MODEL

**Mandible for mandibular anesthesia training. Practice your inferior alveolar nerve block and local or intraligamentary anesthesia techniques.**

The soft tissues are in real anatomical position - after inserting the needle it is possible to check the needle position at the dorsal bony portion of our model. The silicone soft tissues are heavy duty and withstand hundreds of needle insertions. Model is compatible with our Biovoxel phantom head.

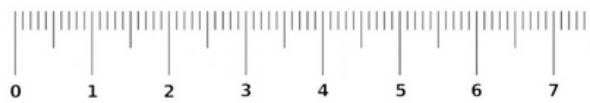


## ESSENTIAL DENTAL ANATOMY MODELS



- **Distal Teeth Anatomy Models (1x Upper 1x Lower)**
- **Real Size or Enlarged (Width of one enlarged model approx. 7cm)**
- **Nicely visualized occlusal morphology**

Beautifully shaped distal anatomy teeth models. Suitable as an aid for modelation. Models modelled from scratch by us, with professional help from Peter Pintes and inspired by beautiful (and functional) anatomy of János Makó.



## OCCLUTOOTH



- Two models of distal teeth (1x Upper Jaw + 1x Lower Jaw)
- Models with occlusal Black I. cavities
- Real size (1:1 ratio to real teeth)
- Ideal for occlusal morphology modeling training
- Recommended to be used with BioVoxel's Essential Dental Anatomy Models
- One package contains 2 models, as seen on the primary product picture

## CAVITOOTH



Simple models of distal segment of a lower jaw with simulated cavities. Gingival sulcus allows for a matrix placement. Please see the pictures for a detailed view of the extent and type of cavities. Recommended to be used with BioVoxel's Essential Dental Anatomy Models.



## INNERVATED MANDIBLE

**A model of transparent mandible with visualized positions of the neurovascular bundles**



A model of transparent mandible with visualized positions of the neurovascular bundles - n. mandibularis (alveolaris inferior), n. buccalis, n. lingualis. For teaching, demonstrating anatomy or as a decorative addition to your dental office.

## POST-ENDO MODEL

- **Post-Endo model created for Dr. Černý's hands on courses.**
- **5 different teeth with different tissue loss.**



Ideal for FRC post and tooth build up training - perfect for challenging approximal wall restoration. The gum is retractable by cord or teflon. Canals are ended blindly - with apical stop, ready for FRC insertion. Can be used together with EndoPan Pro or Tableclamp Basic holders allowing you to position the model at any angle needed, facilitating both direct and indirect work.



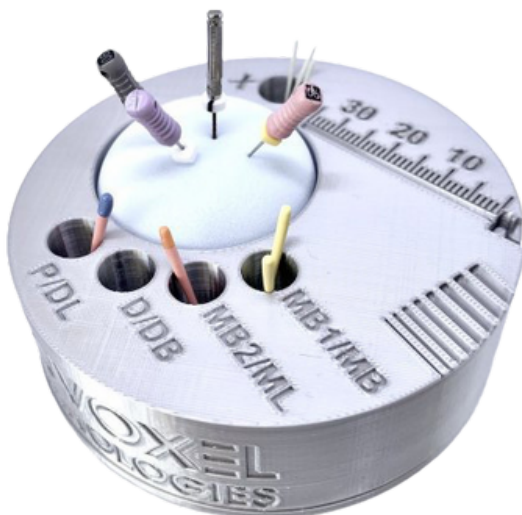
# ACCESSORIES



## ENDO ORGANIZER

### Includes:

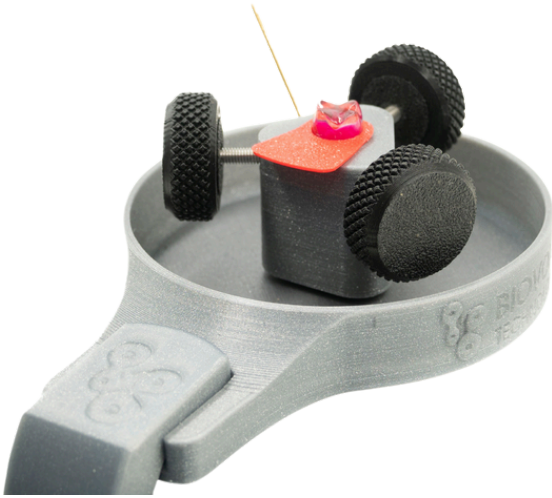
- Endo sponge with endo ruler
- Cone organizer
- Notches for loading MTA or similar material onto the tool



This organizer is for training purposes only as it is not autoclavable, only chemically sanitizable.

The package includes an organizer and 3 replaceable sponges.

## ENDO PAN BASIC



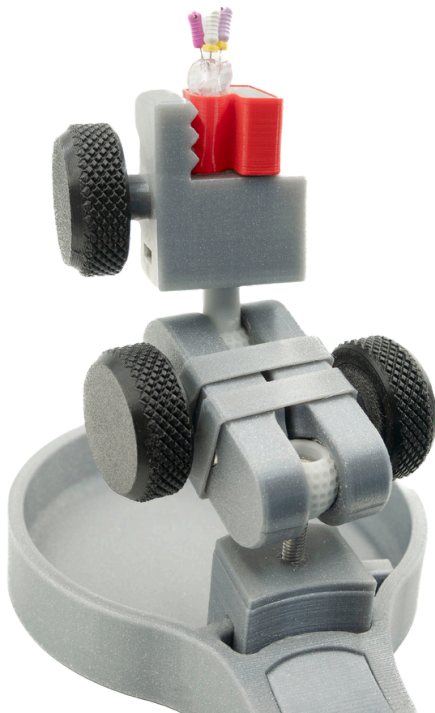
**Practical and simple table holder for fixing any training tooth.**

- Fixes the tooth firmly, allows connection of the apexlocator, includes a collection container for the rinsing solution.
- The endopan is fixed against the table with a solid table vise
- The table vise allows fixation on tables in thickness from 0.5cm-4cm

## ENDO PAN PRO

### Advanced Tooth Fixation Solution

The EndoPan Pro is the upgraded version of our EndoPan Basic



- **Firm Tooth Fixation:** Securely holds the tooth in place for stable treatment.
- **Apex Locator Connection:** Easily connect an apex locator for accurate measurements.
- **Rinsing Solution Container**

- **Adjustable Angles:** Position the tooth in any angle – work in direct or indirect view, as needed.
- **Versatile Clamp:** The end clamp can be unscrewed and replaced with a Biovoxel Typodont Jaw for more options.
- **Solid Table Vise:** Fixes the EndoPan Pro firmly to your work surface, compatible with table thicknesses from 0.5 cm to 4 cm.



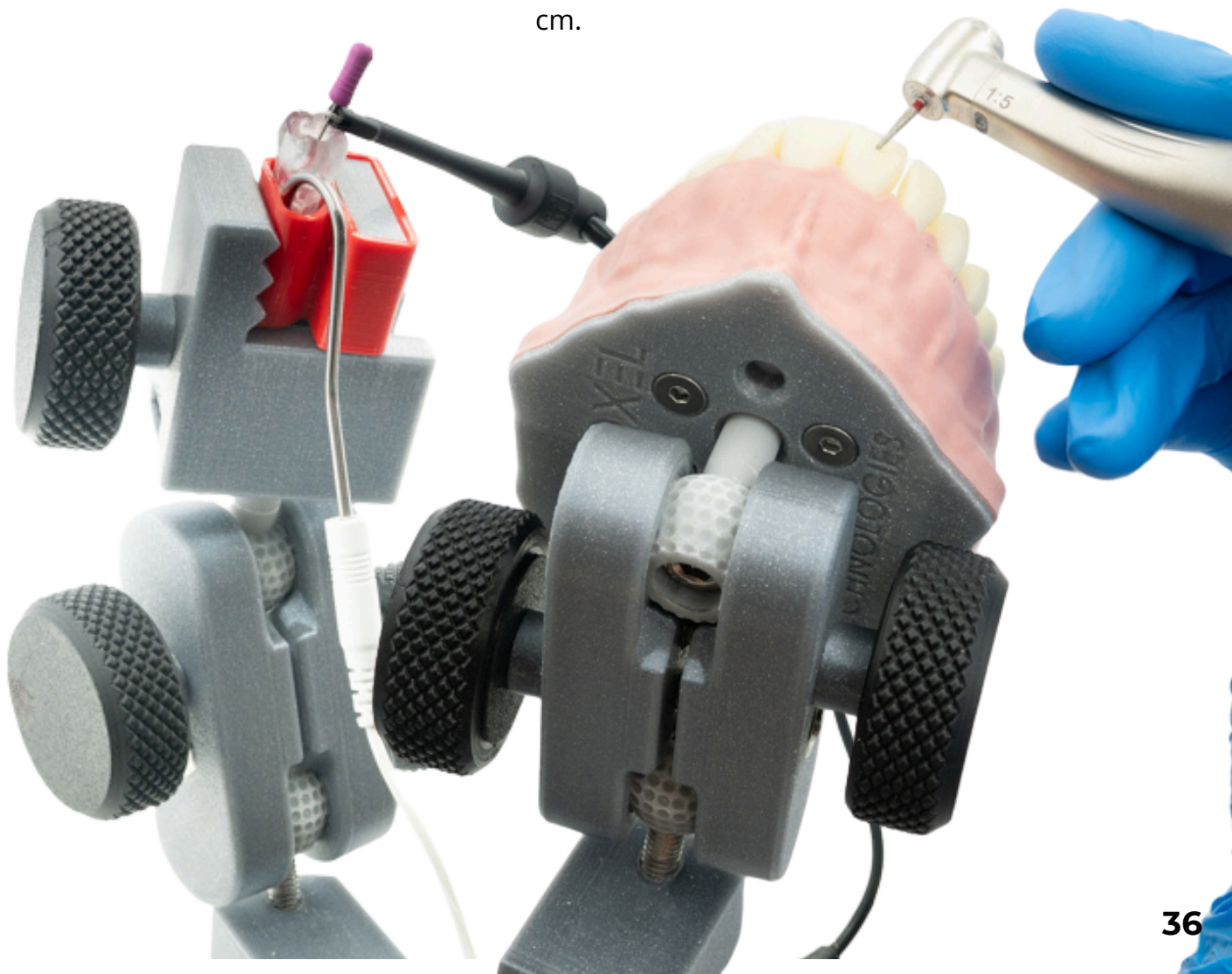


## TABLECLAMP

The TableClamp Basic is a practical table holder which allows you to fix the tooth in various angles.



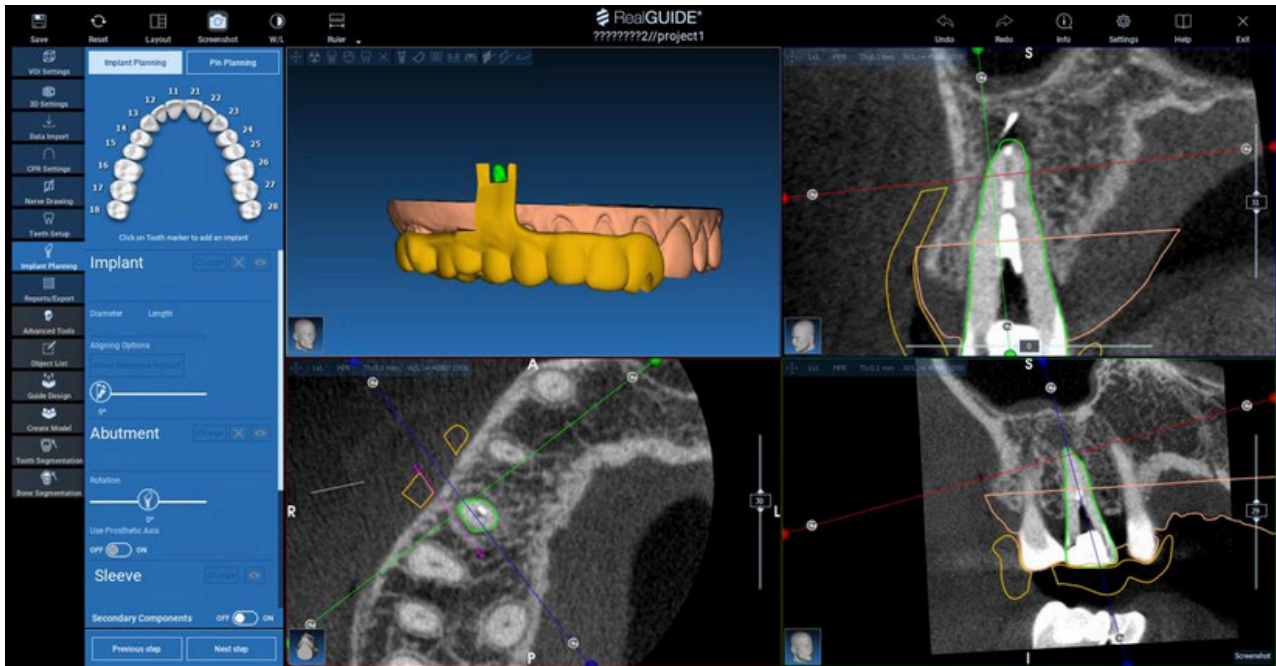
- **Firm Tooth Fixation:** Securely holds the tooth in place for stable treatment.
- **Apex Locator Connection:** Easily connect an apex locator for accurate measurements.
- **Adjustable Angles:** Position the tooth in any angle – work in direct or indirect view, as needed.
- **Versatile Clamp:** The end clamp can be unscrewed and replaced with a Biovoxel Typodont Jaw for more options.
- **Solid Table Vise:** Fixes the EndoPan Pro firmly to your work surface, compatible with table thicknesses from 0.5 cm to 4 cm.





# SURGICAL GUIDES + 3D PRINTING

Precise planning and the use of guides during procedures result in greater efficiency and more predictable outcomes.

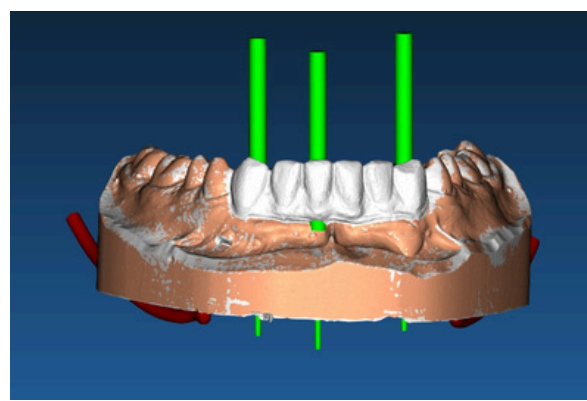
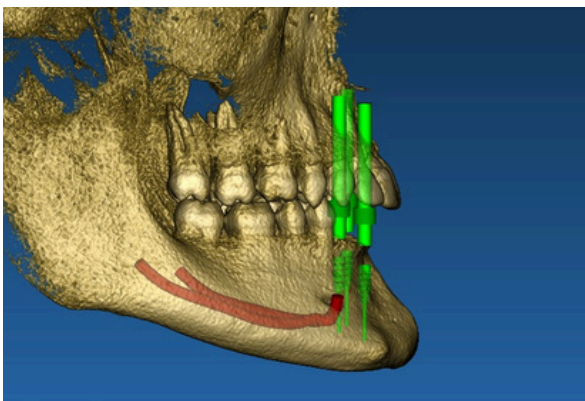


## PRECISION & INNOVATION IN SURGICAL PROCEDURES

Many complex surgical procedures require advanced software analysis for accuracy and efficiency.

Biovoxel provides cutting-edge technological support, **assisting in treatment planning and the production of precise surgical guides**. These guides ensure controlled drilling on hard tissues at the **exact location, depth, and angle** required for implant placement and various other surgical applications.

This enhances success rates, reduces surgical time, and improves patient outcomes. Our cutting-edge solutions make surgical procedures safer, faster, and more predictable.



# ADVANTAGES OF SURGICAL GUIDES



## HIGH PRECISION & ACCURACY

Ensures exact implant and surgical tool placement with optimal depth, angulation, and position.



## REDUCED SURGERY TIME

Streamlines procedures, minimizing chair time and improving workflow.



## IMPROVED SAFETY

Lowers the risk of complications by avoiding critical anatomical structures.



## BETTER PATIENT EXPERIENCE

Less invasive procedures result in reduced pain, swelling, and post-operative discomfort.



## PREDICTABLE OUTCOMES

Enhances treatment planning for consistent and reliable surgical results.



## MINIMIZED TRAUMA

Reduces damage to surrounding tissues, leading to faster healing and improved recovery.



## COST-EFFECTIVE

Saves time, streamlines operations, provides peace of mind, and reduces subsequent material expenses (for tissue reconstruction or prosthetics).



## ENHANCED WORKFLOW FOR DENTISTS

Simplifies complex procedures, increasing efficiency and confidence in surgical execution.



## OUR VALUED PARTNERS



Univerzita Palackého  
v Olomouci

happyendo  
...endo se šťastným koncem



1. LÉKAŘSKÁ  
FAKULTA  
Univerzita Karlova





1. LÉKAŘSKÁ  
FAKULTA  
Univerzita Karlova



**EUDENT**

CHYZANOWSKI  
dental care



**Envista**



**Endodonti  
AKADEMIN**



**MUNI  
LÉKAŘSKÁ  
FAKULTA**



**SLOVENSKÁ  
ZDRAVOTNICKÁ  
UNIVERZITA**



**Dentamec**

**curaden**

better health for you



**PETRAMED**  
U DOBRÝCH ZUBÁROV



**DR. VOLOM  
DENTAL**

**ňandel**  
elite dental center

**ENDOSEVILLA**  
clínica dental



**DENTAL TOPICS**



**LÉKAŘSKÁ FAKULTA  
V HRADCI KRÁLOVÉ**  
Univerzita Karlova



# MEET OUR TEAM



**MDDR. MAROŠ ČIŽMÁR**  
CEO



**MDDR. MARIETTA**  
**ČIŽMÁROVÁ**



**DR. OLEXANDR**  
**PAKHOMOV**



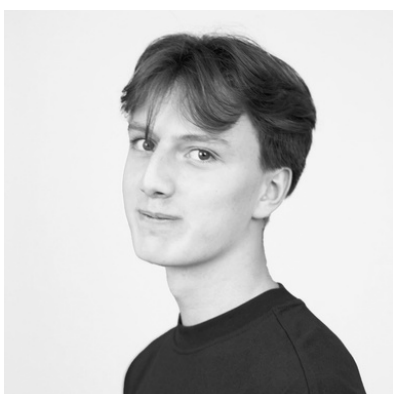
**KARINA MAŇOVÁ, BSBA**



**PATRIK KRISTL**



**ATTILA SÁRKÁNY**



**RICHARD POSPÍŠIL**



**DEVÍN - HOME OF BIOVOXEL TECHNOLOGIES**

## SPARE PARTS

If you need to order spare parts, please contact us at [sales@biovoxel.tech](mailto:sales@biovoxel.tech) or visit our website.

## FEEDBACK

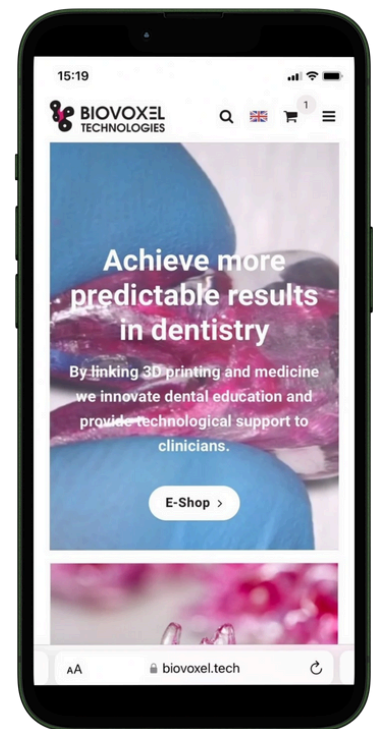
We Value Your Feedback!

If you have any questions or feedback towards further improvements of the models, please do not hesitate to contact us at [info@biovoxel.tech](mailto:info@biovoxel.tech) or whatsapp.



We wish you many high-quality training sessions!

*BioVoxel Technologies Team*







[WWW.BIOVOXEL.TECH](http://WWW.BIOVOXEL.TECH)