



# Case Report Series

## Immediate NEVO Implant Placement and Esthetic Rehabilitation of a Maxillary Central Incisor



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“The NEVO implant supports predictable anterior esthetic outcomes through immediate placement and precise prosthetic execution”



### The Baseline Situation

#### Root resorption and inflammation



A 70-year-old patient presented with a history of porcelain veneers. The maxillary left central incisor showed internal root resorption and chronic periapical inflammation. The tooth was deemed non-restorable.

### The Treatment Strategy



#### 1 Surgical and provisional procedure

Following extraction, placement of a NEVO implant (PF 4.0 L 11 mm) on the alveolar palatal wall

Extensive grafting of socket to compensate for the bone loss associated with the chronic infection

Suturing of matrix on the surface and shaping of the patient's crown as an ovate pontic

Bonding to neighboring teeth as a short-term provisional to seal the socket and maintain esthetics

After 8 weeks of uneventful osseointegration, removal of the provisional, and performance of second-stage procedure

Intraoral scan body allowed same-day fabrication and delivery of an implant-supported provisional restoration



#### 2 Restorative procedure

Development of ideal peri-implant emergence profile after 1 month with implant provisional

Second intraoral scan to design the final prosthesis

Definitive restoration with a veneered zirconia crown delivered on implant regio #21



### The Outcome

The final restoration achieved excellent optical integration with the neighboring veneered teeth. Soft-tissue stability, papillary preservation, and harmonious esthetics were observed. Importantly, the screw channel emerged at the gingulum, highlighting the accuracy of the NEVO implant in translating the surgical plan into precise clinical positioning.

