



TISSUE LEVEL IMPLANT LINE



PRODUCT CATALOGUE
www.dentaltechworldwide.com

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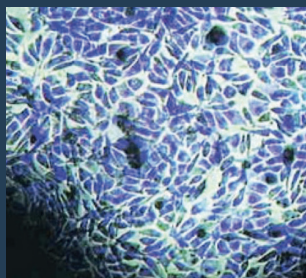
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BWS®

IMPLANT SURFACE

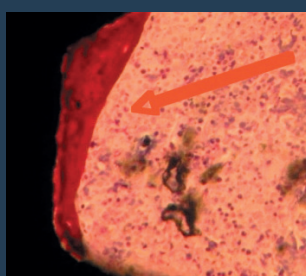
Osseointegration with over 30 years of history

OPTIMAL ROUGHNESS VALUE SANDBLASTING AND ACID ETCHING

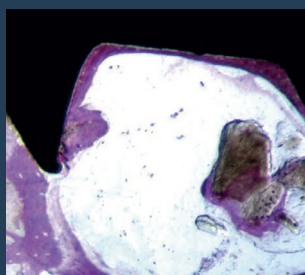


Sandblasting and etching processes of the implant surface allow to obtain optimal roughness values that make the adhesion of fibrin to the surface more tenacious and facilitate the bone healing process, significantly reducing the time.

CONTACT OSSEOINTEGRATION FIBRIN ADHERENCE

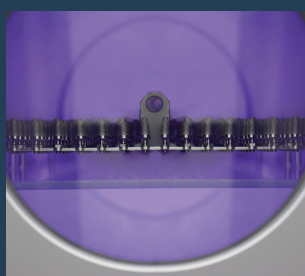


The capacity of BWS® to retain fibrin, lets osteoblasts migrate from the bone to the implant surface and reproduce there, generating new bone in direct contact with the titanium (contact Osseointegration).



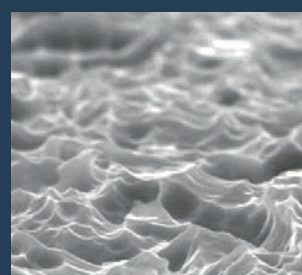
SEM CONTROL THE IMPLEMENTED PROTOCOL PROVIDES VERIFICATION OF EACH BATCH OF PRODUCTION

After the surface treatment and the classic washings, Dental Tech Implants are additionally cleaned with Argon Cold Plasma to minimize carbon contamination. Subsequently, minute controls are performed on the fixture with scanning electron microscopes (SEM).



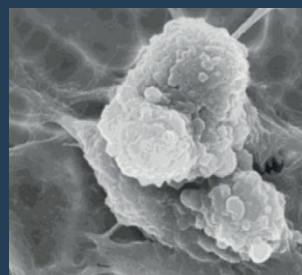
Argon Cold Plasma Treatment

Packaging takes place in controlled environments (Clean Room ISO 7) with packaging impermeable to micro organisms. A gamma-ray sterilisation process guarantees the destruction of all contaminants.



20 µm

SEM HV: 20.00 kV
SEM MAG: 4.82 kx
WD: 10.6470 mm
Det: SE Detector
View field: 62.05 µm
VEGA\\TESCAN DentalTech



2µm

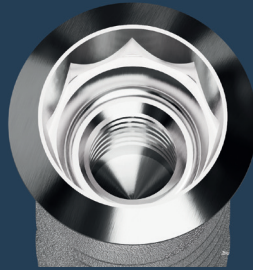
EHT = 18.00 kV
WD = 13 mm
Mag = 6.50 KX
Photo No. = 6159
Detector = SE1

BWS® surface is made by a sandblasting and acid etching process. This double process allow to obtain an extremely clean surface with a uniform and homogeneous roughness that promotes cell adhesion.

TISSUE LEVEL IMPLANT LINE

Internal design: cone with anti-rotational octagon. Combines the benefits of the conical seal with those of internal anti-rotational structures, conveying both biological and mechanical stability to the prosthetic components without complicating the prosthetist and dental technician's work.

Conical sealing and octagon connection
8° morse taper locking

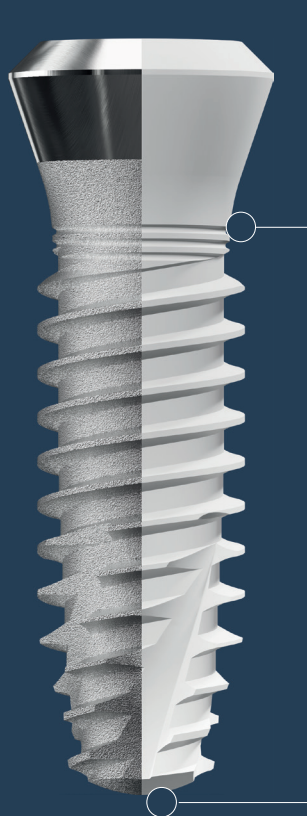


POLISHED CROWN PORTION

The 1,5 mm polished transmucosal portion allows to better manage the transgingival path.

MICRO-GROOVES

Micro-grooves to limit bone resorption.
The implant's screwing axis can be adjusted.



BETTER PENETRATION

Spiral profile with hybrid progress: flat and radiating towards the root, triangular-shaped externally, for greater penetration into incompletely prepared sites.

APICAL

With helicoidal progress to enhance stable penetration.

DIAMETER - Ø 3.75 mm

Cover screw included

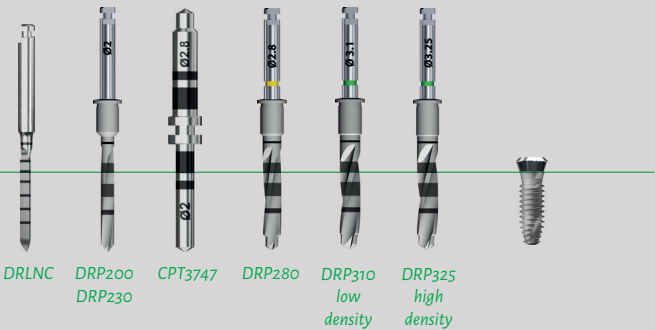
Warning! All DRP drills are 0.8 mm longer than the implant. In the planning stage and while drilling in proximity to vital anatomical structures, this added length must be considered.

*It is recommended if the cortical bone is very persistent



Length (L) mm	REF
8	TRT3708/S
10	TRT3710/S
11,5	TRT3711/S
13	TRT3713/S

Recommended surgical sequence

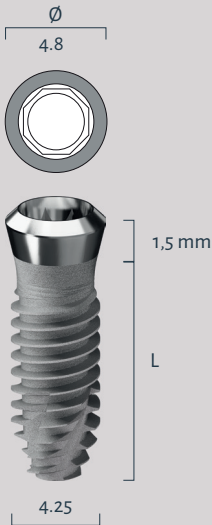


DIAMETER - Ø 4.25 mm

Cover screw included

Warning! All DRP drills are 0.8 mm longer than the implant. In the planning stage and while drilling in proximity to vital anatomical structures, this added length must be considered.

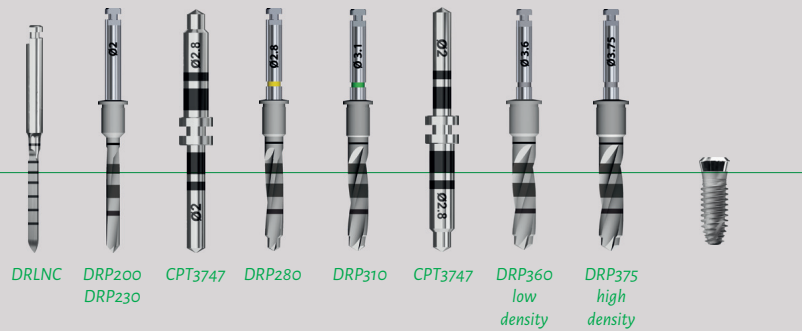
*It is recommended if the cortical bone is very persistent



Length (L) mm	REF
6	TRT4206/S
8	TRT4208/S
10	TRT4210/S
11,5	TRT4211/S
13	TRT4213/S



Recommended surgical sequence



DIAMETER - Ø 4.75 mm

Cover screw included

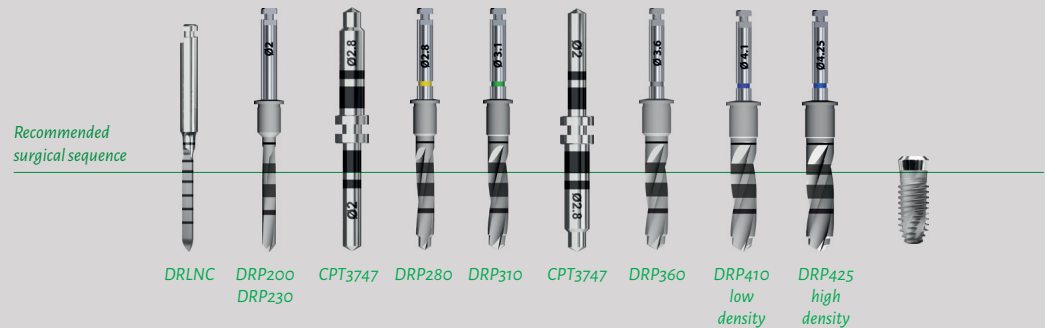
Warning!

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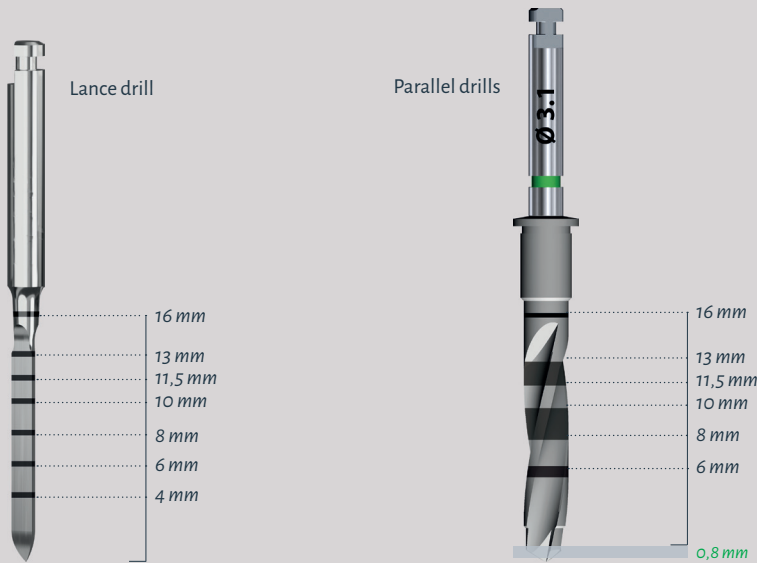


Length (L) mm	REF
6	TRT4706/S
8	TRT4708/S
10	TRT4710/S
11,5	TRT4711/S



Drills - Reading depth notches and sharp drills

Lance drill - Parallel drills



STOP Ø 4.5 mm Material: Ti5

Length (L) mm	REF
6	STC2506
8	STC2508
10	STC2510
11,5	STC2511
13	STC2513
16	STC2516

Drill Stop



Parallel drill L 23 mm Material: Inox

Diameter (Ø) mm	REF
2.0	DRP200
2.3	DRP230
2.8	DRP280
3.1	DRP310
3.25	DRP325

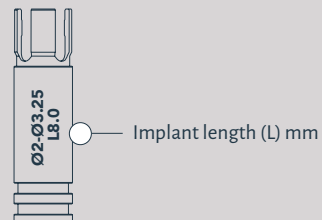
STOP Ø 5.5 mm Material: Ti5

Length (L) mm	REF
6	STC3406
8	STC3408
10	STC3410
11,5	STC3411
13	STC3413
16	STC3416



Parallel drill L 23 mm Material: Inox

Diameter (Ø) mm	REF
3.6	DRP360
3.75	DRP375
4.1	DRP410
4.25	DRP425



Drill Stop - Stop insertion and removal procedure

STOP insertion

Hold the drill on the stalk side and insert the stop, with the retentions facing the drill, until the point of contact with the metallic stop located on the drill itself. (Fig. 1 - 2 - 3).

STOP removal

Hold the stop and remove the drill by pulling on the stalk side.

Depth STOP for different lengths. The advantages:

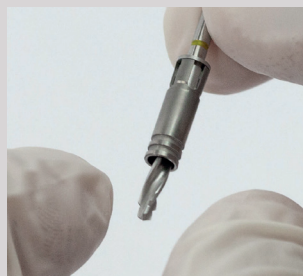
- » Optimal check-depth during preparation of the surgical site, even in conditions of poor visibility of the operating field;
- » Reduction of surgical risk;
- » Reduction of operator stress;
- » Greater safety for the patient;
- » Easy Stop insertion and removal from the drills and greater safety in the surgical phase for the doctor and assistant.



1



2

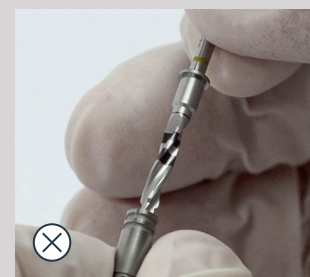


3



Warning WRONG insertion STOP

Stop insertion with the retentions facing the tip of the drill is incorrect. (fig. 4 - 5).



4



5

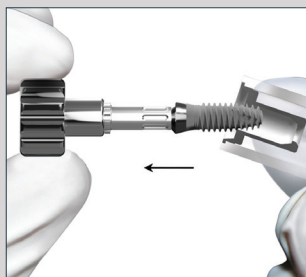
Recommended surgical sequence and drill speed

Ø		IMPLANT	3.75	4.25	4.75
R.P.M. 600/900 max	DRILL				
	2.0/2.3		✓	✓	✓
	2.8		✓	✓	✓
	3.1		S	✓	✓
	3.25		R-D		
	3.6			S	✓
	3.75			R-D	
	4.1				S
	4.25				R-D
LEGEND					
REQUIRED			✓		
OPTIONAL			⊙		
Bone texture:					
REGULAR BONE			R		
DENSE BONE			D		
SOFT BONE			S		

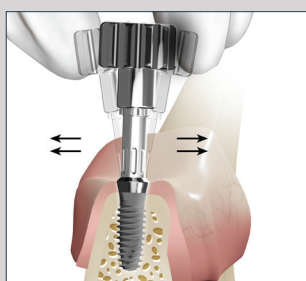
Warning! In the table “Recommended surgical sequence and drill speed” parameters should be considered as general indications; the clinical evaluation should always be subjected to careful analysis by the practitioner in each specific case.

Based on the clinical features and bone consistency detected at the time of implant surgery, the choice of the available instrumentation will be made by the practitioner.

Screwdrivers - Implants insertion procedure



6



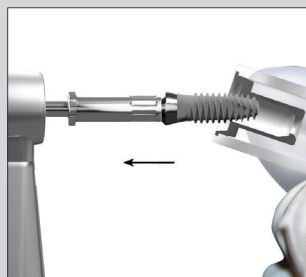
7

With manual screwdriver

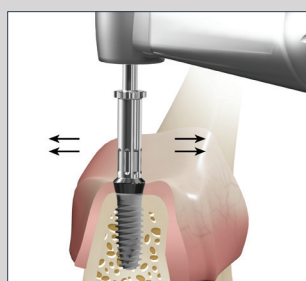
Insert the screwdriver (REF 001145 - 001146), connected to the handwheel (REF AMCo16), into the implant making a slight rotation to allow good matching of the two octagons (implant - screwdriver) and remove the implant (Fig. 6).

Begin insertion of the implant in the alveolar surgical site using the manual screwdriver. Where bone density permits, it is possible complete insertion of the implant using the manual wrenches (Fig. 7).

To remove, exercise a slight lateral movement, right and left, in order to free the matching (Fig. 7).



8



9

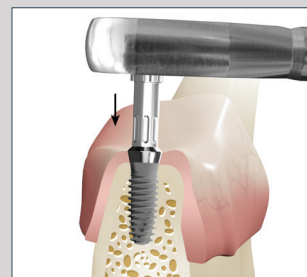
With direct contra-angle screwdriver

Insert the direct manual contra-angle screwdriver (REF RDC3727 - RDC3732) into the implant with a slight rotating motion to allow the correct coupling of the two octagons (implant - screwdriver) and remove the implant (Fig. 8).

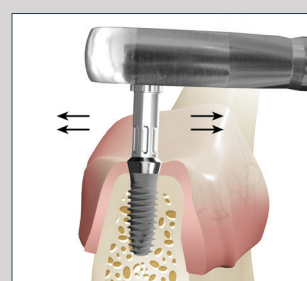
Begin insertion of the implant in the alveolar surgery (Fig. 9) after having set the following parameters on the surgical unit:

- » RPM 15-20. Torque max. 35-40 Ncm.

If a surgical unit with good torque control is available, both in quantity and quality, it is possible to terminate insertion of the implant with the contra-angle; if the opposite is true, insert the device in the alveolar surgery as long as the power of the machine permits (Torque max. 35-40 Ncm) and complete the insertion manually proceeding as follows →



10



11

To remove, exercise a slight lateral movement, right and left, in order to free the matching (Fig. 9).

Final screwdriver

Ensure that the tool is inserted in the position suitable for screwing and turn until the implant reaches the desired position (Fig. 10).

Complete the insertion of the implant using the dynamometric wrench connected to the direct screwdriver of the ratchets (REF 001145 - 001146). At times it is necessary to use the extensions, (REF 110026) to connect to the tools described above (Fig. 11).

To remove, exercise a slight lateral movement, right and left, in order to free the matching (Fig. 11).

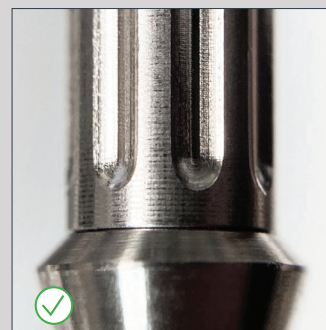


Warning
picking up the implant from
ampoule

Fig. 12 is INCORRECT
Fig. 13 is CORRECT



12



13

Components for cemented/screwed prosthesis

Healing abutment - Ø 5.5

Material: Ti5

8/10Ncm Lock manually



H mm	REF
1,5	112202
3	112203
5	112204



Pick up impression copy

Material: Ti5

Fastening screw included

REF VTPR108

8/10Ncm Lock manually

REF

TPR108



Implant analog

Material: Ti5

REF

ACT128



Fastening screw included and available as a replacement (pack. 2 pcs.)

REF VDT608*

on one piece abutment

One piece abutment

Material: Ti5



H mm	REF
4 yellow	112210
5,5 green	112211
7 violet	112212

One piece abutment analog

Material: Ti5



H mm	REF
4 yellow	AMD400
5,5 green	AMD550
7 violet	AMD700



Straight abutment*

Material: Ti5

20Ncm Torque adapter

REF TW0001

REF

MTD608



Angled abutment*

Material: Ti5

20Ncm Torque adapter

REF TW0001

REF

15°	MPT158
25°	MPT258



Cylinder abutment*

Material: Ti5

20Ncm Torque adapter

REF TW0001

REF

PTI008	○
PTR180	○



Castable abutment

Material: Pmma

Fastening screw included

REF 112218VP

20Ncm Torque adapter REF TW0001

REF

112219	○
112218	○

Prosthetic components for digital flow



WARNING
DO NOT orient
the Scan Abutment
in other unsuitable
positions.



Always match the
smaller portion of
the Scan Abutment,
which is oriented on
the hexagon side of
the connection, with
the milling on the
cylindrical portion of
the digital analog
body.



REF

SCANHX35

Scan abutment

Material: Ti5

Fastening screw included and available as
a replacement (pack. 2 pcs.)

VDT608

8/10Ncm Lock manually

Digital CAD-CAM intraoral scan and
laboratory scan. For single cemented and
screwed elements. For multiple cemented
elements.



REF

112235

Digital analog

Material: Ti5

Analog for digital models, specific for
applications through the manufacture
of models made with 3D printing/
prototyping. The characteristic shape with
rounded edges, allows easy insertion into
the model seat, without interference and
friction with the resinous material of the
models.

The apical screw allows to always obtain
a total working stability. *This prosthetic
component must be used through the Dental
Tech Libraries.*

also available
ONLY digital file
H 3,5mm



REF

112223 ○

Bonding base

Material: Ti5

Fastening screw included and
available as a replacement (pack.
2 pcs.) VDT608

20Ncm Torque adapter

REF TW0001

Digital CAD-CAM intraoral scan
and laboratory scan. For single
cemented and screwed elements.
For multiple cemented elements.

also available
ONLY digital file
H 3,5mm



REF

112224 ○

Bonding base

Material: Ti5

Fastening screw included and
available as a replacement (pack. 2
pcs.) VDT608

20Ncm Torque adapter

REF TW0001

Digital CAD-CAM intraoral scan
and laboratory scan. For single
cemented and screwed elements.
For multiple cemented elements.

Cutting line for
use in digital
environment

10,05mm
7,95mm
5,95mm
3,95mm
1,95mm



Cylinder abutment

Material: Ti5

20Ncm Torque adapter

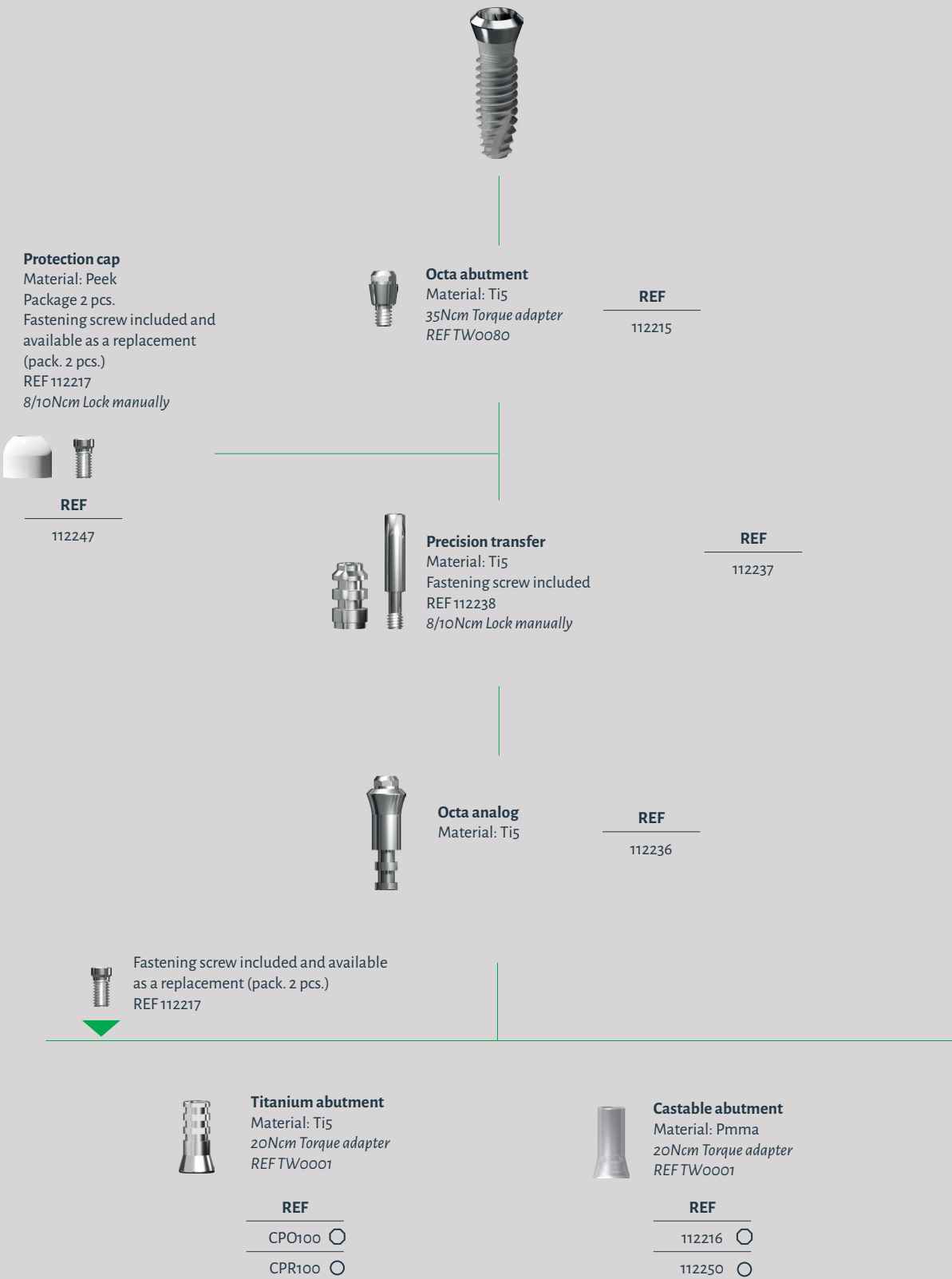
REF TW0001

REF

PT1008 ○

PTR180 ○

Components for OCTA connections prosthesis



Prosthetic components for digital flow - Connection on OCTA



REF

TPW110

Scan abutment

Material: Ti5

Fastening screw included and available as a replacement (pack. 2 pcs.)

REF112217

8/10Ncm Serrare manualmente

Ncm Lock manually

Suitable for digital CAD-CAM technique for intraoral and laboratory scans. For multiple screw-retained elements.



REF

ANW658

Digital analog

Material: Ti5

Analog for digital models, specific for applications through the manufacture of models made with 3D printing/prototyping. The characteristic shape with rounded edges, allows easy insertion into the model seat, without interference and friction with the resinous material of the models. The apical screw allows to always obtain a total working stability.

This prosthetic component must be used through the Dental Tech Libraries.

*Cutting line for
use in digital
environment*

10mm
8,3mm
6,4mm
4,5mm



Titanium abutment

Material: Ti5

20Ncm Torque adapter

REF TW0001

REF

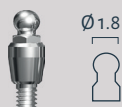
CPO100 ○

CPR100 ○

Overdenture prosthetic components



Sphere abutment
MICRO Ø1.8 mm
Materiale: Ti5
20Ncm Torque adapter
REF TW265



H	REF
0	112230

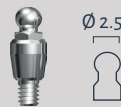
Retention compatible with
RHEIN 83®

Sphere abutment
NORMAL NARROW Ø 2.2 mm
Materiale: Ti5
20Ncm Torque adapter
REF RDS225



H	REF
0	AST050
1,5	AST150

Sphere abutment
NORMAL Ø 2.5 mm
Materiale: Ti5
20Ncm Torque adapter
REF TW265



H	REF
0	112231
1	112232
2,5	112233

Retention compatible with
RHEIN 83®



Analog
Material: Ti5

REF
AAF225



Transfer
Materiale: Peek

REF
TAF225

O-ring

Material: Ti5

Pack 10 pcs.



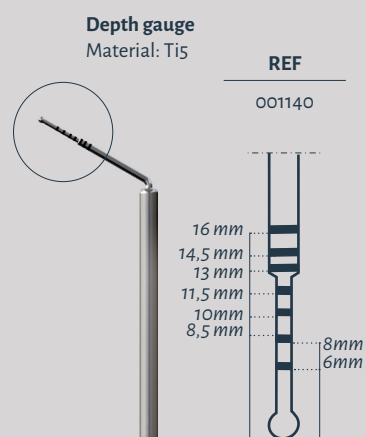
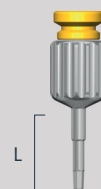
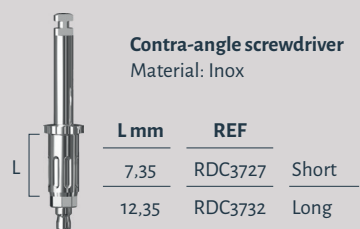
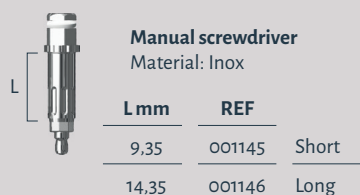
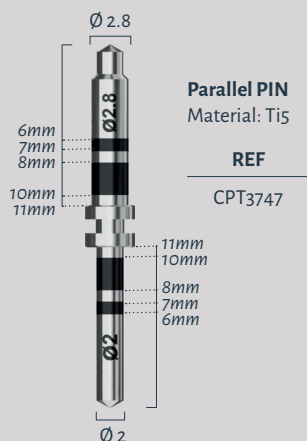
REF
POR225



REF
ORG225

Retention compatible with
RHEIN 83®

Instruments



Instruments



Dynamometric ratchet

REF

CCD070



OCTA abutment adaptor

Material: Inox

REF

TW0080



Screwdrivers adaptor

Material: Inox

REF

TW0001C

Corto

TW0001L

Lungo



Adaptor for dynamometric ratchet

Material: Inox

L mm

REF

7

ISO370



Hex screwdriver for dynamometric ratchet bonding bases for angled screw channel (T-Base)

Material: Inox

L mm

REF

16

TW0015C



Hex screwdriver for contra-angle bonding bases for angled screw channel

Material: Inox

Deformation limit is 30 Ncm

L mm

REF

16

200011

Short

21

200012

Long



Hex screwdriver

Material: Inox

L mm

REF

8

CCG0024

Short

14

CCG0030

Long



Adaptor for sphere abutment Ø 2.25

Material: Inox

REF

RDS225



Adaptor for sphere abutment Ø 1.8 e 2.5

Material: Inox

REF

TW265



Adaptor for overdenture abutment

Material: Ti5

REF

ADL150



One piece abutment adaptor

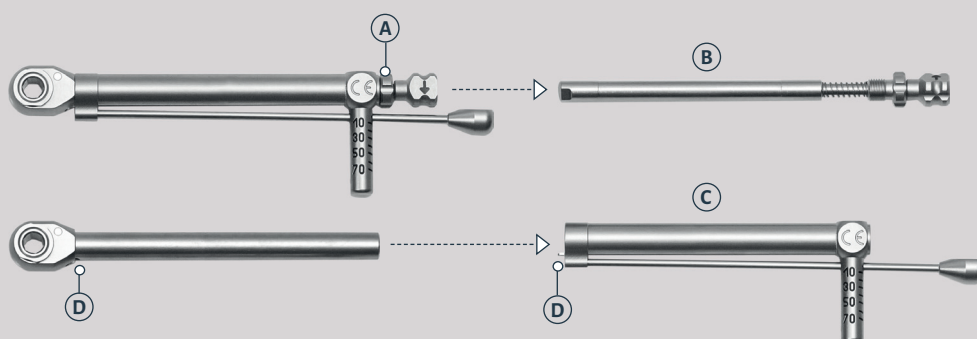
Material: Ti5

REF

TW0006

Dynamometric ratchet cleaning and maintenance

CCD070



The dynamometric ratchet, after each use, must be disassembled for cleaning. This maintenance operation does not require any tools. Completely unscrew the screw (A), remove the whole pawl (B) and then the flexible dynamometric bar (C). Once disassembled, clean according to the instructions for use

and maintenance attached to the device, brush with non-metallic rigid bristles, even in hollow areas with pipe cleaner for a complete removal of biological residues. Once the cleaning and disinfection phase has been completed, reassemble the ratchet using the reverse disassembly procedure,

making sure to match the pin (D) in the housing dedicated.

Preliminary indications for surgical instrument use

PREVENTION

Besides correct and continuous long-term maintenance, wear and tear of the instruments can also be prevented and slowed down. In the first place every instrument must only be used for the envisaged and indicated use.

The instruments used must be cleaned immediately after the end of surgery. Remove residue and encrustations only with soft brushes and NOT with metal brushes.

When envisaged, disassemble the instruments and deeply clean the cavity. The devices must be fully immersed in the most appropriate detergents or disinfectants for the material, and left to rest for a period of time that never exceeds the manufacturer's instructions. After disinfecting them, rinse thoroughly with water and dry the devices with a clean and dry cloth. Complete with a jet of compressed air.

PACKAGING AND STERILITY

- » Dental Tech tools are supplied as non sterile in heat-sealed Pouches in containing the leaflet.
- » Dental Tech tools can be used again and therefore it has to be washed and sterilised prior to their usage.

Dental Tech validated the following cleansing and disinfection method:

MANUAL CLEANING

- » Just after the use of Dental Tech equipment, place the equipment into a container with a peracetic acid based solution at concentration of 2% (NO GLUTARALDEHYDE OR SODIUM HYPOCHLORITE), as long as 18 minutes.
- » After-ward rinse carefully.

MANUAL DISINFECTION

- » Place the equipment into a container with a peracetic acid based solution at concentration of 4% (NO GLUTARALDEHYDE OR SODIUM HYPOCHLORITE), as long as 15 minutes.
- » Rinse generously
- » Examine the equipment and make sure there are no organic remains. Carefully scrub the outer parts with a non-metal bristled brush.

MANUAL RINSE

- » Place the equipment into ultrasound bath, and wash it for approx. 18 minute and then rinse carefully.

DRY

- » Perfectly dry the equipment, seal it individually with material suitable for moist heat sterilisation.

STERILIZATION

- » Dental Tech validated the following Autoclave moist heat sterilization cycle: 3 minutes - 134 °C
- » Since Dental Tech tools are manufactured in different materials, they shall be washed and sterilized one by one.

CHECK

After the cleaning phases, check that none of the instruments presents signs of corrosion, contamination or damage. Especially use a magnifying lens to check the most concealed areas, the joints and the handles.

If any contamination is detected, repeat the cleaning procedure.

In case of damage, dispose of the instrument as established by the laws in force for waste management.

Warning *The use of suitable protection during cleaning and sterilisation of contaminated instruments enhances personal safety during these phases.*

PRESERVATION

After the sterilisation phase, the instruments must be preserved in the sterilised package in a dry, dust-free place, far from heat sources. The bags must only be opened before use. The storage period of sterilised items must not exceed the period recommended and indicated on the bag.

DISPOSAL PROCEDURES

At the end of its life the medical device must be disposed of according to the methods established by national laws in force for waste management.

INSTRUMENT FOR SURGERY

The surgical instrumentation of the Dental Tech Implant System is simple and essential, responding to every clinical need and treatment protocol. All drills and components are laser marked, to allow preparation of the implant site correctly to the established depth, and a predictable and safe positioning of the implant. The instruments are available individually or in sets with different types of surgical kit.

HOW TO USE THE SURGICAL INSTRUMENTS

So as not to cause mechanical and/or thermal damage to bone tissue in the zone in which the implant is to be inserted, and to obtain a congruous surgical site (indispensable to achieving good osseointegration of the implant) some fundamental rules must be respected:

- » Use drills with gradual diameter progression: the same instruments must not be used for more than 25 osteotomies;
- » Do not exceed 800 RPM during the osteotomy;
- » Do not exceed 20 RPM in the event of tapping with the contra-angle;
- » Ensure, during the osteotomy, that the instruments work in axis;
- » Do not exert lateral pressure during the osteotomy and tapping;
- » The osteotomy must be performed exercising light pressure and back and forth movements on the axis of the instrument;
- » Use generous irrigation with physiological solution, both during drilling and tapping of the surgical site;
- » Ensure that during the intervention the irrigation canals of the instruments are clear;
- » Avoid categorically, during surgery, the cooling of instruments and the implant site with the air-water syringes tips.
- » For taps, during preparation of the site with the drills, don't set forces greater than 55N/cm with micromotors equipped with the control-TORQUE device.

NON-ROTATING INSTRUMENT

The non-rotating instrument is compatible with all Dental Tech implant systems.

Bibliography

BIBLIOGRAPHY

Abrahamsson I, Zitzmann NU, Berglund T, Wennerberg A, Lindhe J. Bone and soft tissue integration to titanium implants with different surface topography: an experimental study in the dog. *Int J Oral Maxillofac Implants* 2001; 16(3):323-32.

Abrahamsson I, Zitzmann NU, Berglund T, Linder E, Wennerberg A, Lindhe J. The mucosal attachment to titanium implants with different surface characteristics: an experimental study in dogs. *J Clin Periodontol* 2002; 29(5): 448-55.

The Role of Surface Topography
Herman, J Perio 1997;68:1117-1130.

Micro-threads eliminate bone loss due to crestal disuse atrophy Hansson, Clin Oral Imp Res, 1999.

Topografia della neoformazione ossea perimplantare: studio sperimentale G. Petrone, G. Iezzi, M. Piattelli, A. Scarano Dipartimento di scienze Odontostomatologiche, Università "G. D'Annunzio" Chieti- Pescara.

Surface Chemistry Effects of topographic Modification of Titanium Dental Implant Surfaces: 1. Surface Analysis M. Morra, dr. chem / C. Cassinelli, dr. Biol / G. Bruzzone, MD / A. Capri, MD / G. Di Santi, MD / R. Giardino, MD / M. Fini, MD. *Int JOMI* 2003; 18:40-45

Surface Chemistry Effects of topographic Modification of Titanium Dental Implant Surfaces: 2. In Vitro Experiments M. Morra, dr. chem / C. Cassinelli, dr. Biol / G. Bruzzone, MD / A. Capri, MD / G. Di Santi, MD / R. Giardino, MD / M. Fini, MD. *Int JOMI* 2003; 18:46-52

Valutazione della precisione della connessione tra moncone ed impianto Benedicenti S.* / Balboni C.** / Maspero F.* / Benedicenti A.* *Quintessence International* 3/4 bis 2001

Adesione cellulare epiteliale su superfici di titanio sabbiato e acidificate: studio in vitro I. Vozza / A. Scarano* / S. Rossi / M. Quaranta Supplemento n.1 a Doctor OS anno XIV n.1 gennaio 2003

Valutazione istologica della risposta ossea a una nuova superficie implantare sabbiata e mordenzata: uno studio sperimentale sul coniglio Antonio Scarano / Giovanna Iezzi* / Alessandro Quaranta** / Adriano Piattelli*

Implantologia orale numero 2 marzo 2007

Dentista moderno ottobre 2011
Progettazione e realizzazione di una superficie implantare dalla decontaminazione all'osteointegrazione Chiara Giamberini / Angelo Tagliabue / Dino Azzalin / Giorgio Santarelli

Int J Periodontics Restorative Dent. 2006 Feb; 26(1): 9-17
Platform switching: a new concept in implant dentistry for controlling postrestorative crestal bone levels. Lazzara RJ / Porter SS.

I Vela-Nebot X, et al.
Benefits of an implant platform modification technique to reduce crestal bone resorption. *Implant Dent* 2006;15:313-320

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MATERIALS LEGEND

CrCo	Cobalt-chrome alloy
Inox	Surgical stainless steel
Ptfe	Polytetrafluoroethylene
Peek	Polyetereeterechetone
Pmma	Polymethylmethacrylate
Ti5	Titanium gr.V ELI for medical use
Plastic	Polymer

PACKAGING SYMBOLS LEGEND



Lot number



Sterilized by gamma rays



Not sterile



Product code

RIUTILIZZABILE

Reusable



Use by



Non-reusable



Attention, consult
the supplied documentation



Directive 93/94/CEE
conformity mark



0123
Notified body identification

