Implant And Abutment Level Impressions
1. Select the proper Pick-Up Impression Coping by matching the EP® Diameter of the healing abutment and the color of the implant platform. To determine platform diameter, see below. Remove the healing abutment from the implant using a .048” Large Hex Driver (PHD02N or PHD03N). To help prevent accidental swallowing, thread floss through the spinner on the driver.

2. Activate the fingers using the QuickSeat® Activator Tool. Place the Pick-Up Impression Coping into the implant, line up the hex and press firmly until feeling a tactile click.
   - Thread the Pick-Up Impression Coping Screw into the implant until finger tight. Tighten the screw using the Large Hex Driver (PHD02N or PHD03N).

3. Radiograph the interface to verify complete seating of the coping on the implant.

4. A custom or stock open impression tray is used for the Pick-Up Impression Technique. Cut a small hole into the tray so that the clinician has access to the screw head.

5. A low, medium or heavy body impression material is recommended for the material in the impression tray. Use light body or injection consistency impression material and syringe impression material around the entire Pick-Up Impression Coping.

6. Load the impression tray and seat it in the mouth. Wipe impression material off the top of the screw so that the screw hex is visible and free of impression material before it sets. Allow the impression material to set per the manufacturer’s instructions.
7. After the impression material has set, unscrew and remove the Pick-Up Impression Coping Screw using the .048” Large Hex Driver (PHD02N or PHD03N). Remove the impression from the mouth.

8. Verify that the impression material has completely adapted around the coping and that there is no impression material on the impression coping restorative platform.

9. Immediately replace the healing abutment on the implant using the .048” Large Hex Driver Tip (RASH3N or RASH8N) with a torque device (L-TIRW) and torque to 20 Ncm.

10. Place the proper diameter Implant Lab Analog onto the impression coping, engaging the hex. Hold the analog in place while tightening the screw with the Large Hex Driver (PHD02N or PHD03N). Verify that the impression coping is completely seated on the analog. If the clinician is sending the impression to a commercial laboratory to pour it, do not attach the analog.

11. Syringe soft-tissue material around the coping and analog interface. Pour the cast in die stone. Articulate with the opposing cast.
1. Select the proper Twist Lock Impression Coping by matching the EP® Diameter of the healing abutment and the color of the implant platform. To determine platform diameter, see below. Remove the healing abutment from the implant using a .048” Large Hex Driver (PHD02N or PHD03N). To help prevent accidental swallowing, thread floss through the spinner on the driver.

2. Place the Twist Lock Impression Coping on the implant and engage the hex.

3. Radiograph the interface to verify complete seating of the coping on the implant.

4. A custom or stock impression tray is used for the Twist Lock Transfer Impression technique. Try in the tray to verify that there is no contact with the coping.

5. A low, medium or heavy body impression material is recommended for the material in the impression tray. Use light body or injection consistency impression material around the entire Twist Lock Impression Coping.

6. Load the impression tray and seat it in the mouth. Allow the impression material to set per the manufacturer’s instructions.
7. After the impression material has set, remove the impression from the mouth. The Twist Lock Impression Coping will remain on the implant. Verify that the impression material completely adapted around the coping.

8. Remove the Twist Lock Impression Coping from the implant using the Impression Coping Driver (ICD00).

9. Immediately replace the healing abutment on the implant using the .048” Large Hex Driver Tip (RASH3N or RASH8N) with a torque device (L-TIRW) and torque to 20Ncm.

10. Place the proper diameter Implant Lab Analog into the impression coping, engaging the hex. Hold the components together while finger tightening the screw. Verify that the impression coping is completely seated on the analog.

11. Re-index the impression coping/analog assembly into the impression using firm pressure to its full depth. Slightly rotate the coping/analog clockwise until feeling anti-rotational resistance.

12. Syringe a soft-tissue material around the coping and analog interface. Pour the cast in die stone. Articulate with the opposing cast.