

# Multi-unit Abutment Plus and Multi-unit Abutment



## Important – Disclaimer of Liability

This product is part of an overall concept and may only be used in conjunction with the associated original products according to the instructions and recommendation of Nobel Biocare. Non-recommended use of products made by third parties in conjunction with Nobel Biocare products will void any warranty or other obligation, express or implied, of Nobel Biocare. The user of Nobel Biocare products has the duty to determine whether or not any product is suitable for the particular patient and circumstances. Nobel Biocare disclaims any liability, express or implied, and shall have no responsibility for any direct, indirect, punitive or other damages, arising out of or in connection with any errors in professional judgment or practice in the use of Nobel Biocare products. The user is also obliged to study the latest developments in regard to this Nobel Biocare product and its applications regularly. In cases of doubt, the user has to contact Nobel Biocare. Since the utilization of this product is under the control of the user, they are his/her responsibility. Nobel Biocare does not assume any liability whatsoever for damage arising thereof.

Please note that some products detailed in this Instruction for Use may not be regulatory cleared, released or licensed for sale in all markets.

## Description

A premanufactured dental implant abutment to be directly connected to an endosseous dental implant intended for use as an aid in prosthetic rehabilitation.

The Multi-unit Abutment Plus is made of titanium alloy.

The Multi-unit Abutment is made of pure titanium and/or titanium alloy.

**Note** The 45° and 60° Multi-Unit Abutments do not have a holder.

Gold Coping Multi-unit may be used if a casted framework is preferred.

### Multi-unit Abutment Plus, straight and angled 17° & 30°

Multi-unit Abutments Plus Conical Connection (CC) feature an conical connection and are available in platform sizes NP, RP, and WP. They come in a selection of different collar heights and can be straight or with an angulation of 17° or 30°. Abutment screw and holder Multi-unit Abutment Plus included.

### Multi-unit Abutment, straight and angled 17° & 30°

Multi-unit Abutments NobelReplace™ feature an internal tri-channel connection and platform sizes NP, RP, and WP. They come in a selection of different collar heights. The Multi-unit Abutments NobelReplace™ NP and RP also have a selection of different angulations of 17° and 30°. Abutment screw and handle for abutment seating included.

Multi-unit Abutments Brånemark System® feature an external hex connection and platform sizes NP, RP, and WP. They come in a selection of different collar heights and can be straight or with an angulation of 17° or 30°. Abutment screw and handle for abutment seating included.

Other implant systems: Astra Tech Implant System™, Aqua and Lilac. Straumann® Bone Level NC 3.3 and RC 4.1/4.8.

### Multi-unit Abutment Non-Engaging, angled 30°

The Multi-unit Abutment Non-Engaging angled 30° is available for use with the All-on-4® treatment concept with guided surgery only.

## Multi-unit Abutment, straight

Other implant systems: Straumann® Octagon soft tissue level 4.8 and 6.5.

Ankylos® Implant System 3.5, 4.5, 5.5, 7.0 mm. Astra Tech Implant System™ 4.5ST, 5.0ST mm. Camlog® Implant System 3.3, 3.8, 4.3, 5.0/6.0 mm.

## Multi-unit Abutment angled 45° & 60°

External hex connection for: NobelZygoma™ 0°.

Nobel Biocare products are intended and available to be used in a variety of configurations. For further information refer to Nobel Biocare publication Compatibility Information by navigating to [ifu.nobelbiocare.com](http://ifu.nobelbiocare.com).

## Intended Use/Intended Purpose

Dental implant abutments are intended to be used in the upper or lower jaw and used for supporting tooth replacements to restore chewing function. Multi-unit Abutment/Plus in combination with endosseous implants are indicated for multiple unit reconstructions when screw retained prosthetics is preferred.

## Indications

Multi-unit Abutment/Plus is a premanufactured prosthetic component directly connected to the endosseous dental implant and is intended for use as an aid in prosthetic rehabilitation.

45° and 60° Multi-unit Abutment for External Hex are indicated for multi-unit screw retained restorations with NobelZygoma™ 0° implants only.

## Contraindications

It is contraindicated to use Multi-unit Abutment/Plus in:

- Patients who are medically unfit for an oral surgical procedure.
- Patients in whom adequate sizes, numbers or desirable positions of implants are not reachable to achieve safe support of functional or eventually parafunctional loads.
- Patients who are allergic or hypersensitive to commercially pure titanium or titanium alloy Ti-6Al-4V (titanium, aluminum, vanadium), gold alloy (gold, platinum, palladium, iridium) polypropylene or PBT (Polybutylene terephthalate).

The 45° and 60° Multi-unit Abutment external hex connection are contra-indicated for all other implants other than NobelZygoma™ 0°.

## Materials

### Multi-unit Abutment Bmk Syst NP/RP/WP, Multi-Unit Abutment NobRpl NP/RP/WP, Brånemark System® Zygoma Multi-unit Abutment

**Abutment:** Commercially pure Titanium grade 4 or Commercially pure Titanium grade 1. Detailed chemical composition of Titanium grade 1 is Titanium balanced with max. 0.20 wt.% Iron, max. 0.18 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.03 wt.% Nitrogen, and max. 0.015 wt.% Hydrogen (max.-maximum value). Detailed chemical composition of Titanium grade 4 is Titanium balanced with max. 0.50 wt.% Iron, max. 0.40 wt.% Oxygen,

max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, and max. 0.015 wt.% Hydrogen (max.-maximum value).

**Screw:** Titanium alloy composed of Titanium-6 Aluminium-4 Vanadium ELI (Extra Low Interstitial) Alloy. Detailed chemical composition of the Titanium alloy is Titanium balanced with 5.50 - 6.50 wt.% Aluminium, 3.5-4.5 wt.% Vanadium, max. 0.25 wt.% Iron, max. 0.13 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, max. 0.012 wt.% Hydrogen, (max. -maximum value). Screw is partly coated by Diamond like Carbon Coating. The coating is metal containing Carbon coating, containing Tungsten Carbide and Carbon with Chromium interlayer between substrate and Diamond like Carbon coating.

**Handle:** Polypropylene (PP) polymer.

### Zygoma Abutment Multi-unit RP

**Abutment:** Commercially pure Titanium grade 4 or Commercially pure Titanium grade 1. Detailed chemical composition of Titanium grade 1 is Titanium balanced with max. 0.20 wt.% Iron, max. 0.18 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.03 wt.% Nitrogen, and max. 0.015 wt.% Hydrogen (max.-maximum value). Detailed chemical composition of Titanium grade 4 is Titanium balanced with max. 0.50 wt.% Iron, max. 0.40 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, and max. 0.015 wt.% Hydrogen (max.-maximum value).

**Screw:** Titanium alloy composed of Titanium-6 Aluminium-4 Vanadium ELI (Extra Low Interstitial) Alloy. Detailed chemical composition of the Titanium alloy is Titanium balanced with 5.50 - 6.50 wt.% Aluminium, 3.5-4.5 wt.% Vanadium, max. 0.25 wt.% Iron, max. 0.13 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, max. 0.012 wt.% Hydrogen, (max. -maximum value).

**Handle:** Polypropylene (PP) polymer.

### 17° Multi-unit Abutment Bmk Syst NP/RP, 30° Multi-unit Abutment Bmk Syst RP, 17° Multi-Unit Abutment NobRpl NP/RP, 30° Multi-Unit Abutment NobRpl RP, 17° Multi-unit Abutment Plus CC NP/RP/WP, 30° Multi-unit Abutment Plus CC NP/RP

**Abutment:** Titanium alloy composed of Titanium-6 Aluminium-4 Vanadium ELI (Extra Low Interstitial) Alloy. Detailed chemical composition of the Titanium alloy is Titanium balanced with 5.50 - 6.50 wt.% Aluminium, 3.5-4.5 wt.% Vanadium, max. 0.25 wt.% Iron, max. 0.13 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, max. 0.012 wt.% Hydrogen, (max. -maximum value).

**Screw:** Titanium alloy composed of Titanium-6 Aluminium-4 Vanadium ELI (Extra Low Interstitial) Alloy. Detailed chemical composition of the Titanium alloy is Titanium balanced with 5.50 - 6.50 wt.% Aluminium, 3.5-4.5 wt.% Vanadium, max. 0.25 wt.% Iron, max. 0.13 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, max. 0.012 wt.% Hydrogen, (max. -maximum value). Screw is partly coated by Diamond like Carbon Coating. The coating is metal containing Carbon coating, containing Tungsten Carbide and Carbon with Chromium interlayer between substrate and Diamond like Carbon coating.

**Handle:** Titanium alloy ELI (Extra Low Interstitial) containing 6wt.% Aluminium and 4wt.% Vanadium.

### Zygoma 17° Abutment Multi-unit RP, Brånemark System® Zygoma 17° Multi-unit Abutment

**Abutment and screw:** Titanium alloy composed of Titanium-6 Aluminium-4 Vanadium ELI (Extra Low Interstitial) Alloy. Detailed chemical composition of the Titanium alloy is Titanium balanced with 5.50 - 6.50 wt.% Aluminium, 3.5-4.5 wt.% Vanadium, max. 0.25 wt.% Iron, max. 0.13 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, max. 0.012 wt.% Hydrogen, (max. -maximum value).

**Handle:** Titanium alloy ELI (Extra Low Interstitial) containing 6wt.% Aluminium and 4wt.% Vanadium.

### **45° Multi-unit Abutment External Hex RP, 60° Multi-unit Abutment External Hex RP**

**Abutment:** Titanium alloy composed of Titanium-6 Aluminium-4 Vanadium ELI (Extra Low Interstitial) Alloy. Detailed chemical composition of the Titanium alloy is Titanium balanced with 5.50 - 6.50 wt.% Aluminium, 3.5-4.5 wt.% Vanadium, max. 0.25 wt.% Iron, max. 0.13 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, max. 0.012 wt.% Hydrogen, (max. -maximum value).

**Screw:** Titanium alloy composed of Titanium-6 Aluminium-4 Vanadium ELI (Extra Low Interstitial) Alloy. Detailed chemical composition of the Titanium alloy is Titanium balanced with 5.50 - 6.50 wt.% Aluminium, 3.5-4.5 wt.% Vanadium, max. 0.25 wt.% Iron, max. 0.13 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, max. 0.012 wt.% Hydrogen, (max. -maximum value). Screw is partly coated by Diamond like Carbon Coating. The coating is metal containing Carbon coating, containing Tungsten Carbide and Carbon with Chromium interlayer between substrate and Diamond like Carbon coating.

### **Multi-unit Abutment Plus CC NP/RP/WP**

**Abutment:** Titanium alloy composed of Titanium-6 Aluminium-4 Vanadium ELI (Extra Low Interstitial) Alloy. Detailed chemical composition of the Titanium alloy is Titanium balanced with 5.50 - 6.50 wt.% Aluminium, 3.5-4.5 wt.% Vanadium, max. 0.25 wt.% Iron, max. 0.13 wt.% Oxygen, max. 0.08 wt.% Carbon, max. 0.05 wt.% Nitrogen, max. 0.012 wt.% Hydrogen, (max. -maximum value).

**Handle:** Polypropylene (PP) polymer.

## **Cautions**

### **General**

Close cooperation between surgeon, restorative dentist and dental laboratory technician is essential for a successful implant treatment.

Multi-unit Abutments must only be used with compatible Nobel Biocare instruments and/or components and/or prosthetic components. Use of instruments and/or components and/or prosthetic components that are not intended to be used in combination with Multi-unit Abutments can lead to product failure, damage to tissue, or unsatisfactory esthetic results.

When using a new device/treatment method for the first time, working with a colleague who is experienced with the new device/treatment method may help avoid possible complications. Nobel Biocare has a global network of mentors available for this purpose.

Working the first time with a colleague, experienced with the new device/treatment method, avoids eventual complications. Nobel Biocare has a global network of mentors available for this purpose.

### **Before Surgery**

Special attention has to be given to patients who have local or systemic factors that could interfere with the healing process of either bone or soft tissue or the osseointegration process (e.g. cigarette smoking, poor oral hygiene, uncontrolled diabetes, oro-facial radiotherapy, steroid therapy, infections in the neighboring bone). Special caution is advised in patients who receive bisphosphonate therapy.

In general, implant placement and prosthetic design must accommodate individual patient conditions. In case of bruxism or unfavorable jaw relationships reappraisal of the treatment option may be considered.

Pre-operative hard tissue or soft tissue deficits may yield a compromised esthetic result or unfavorable implant angulations.

All components, instruments and tooling used during the clinical and/or laboratory procedure must be maintained in good condition and care must be taken that instrumentation does not damage implants or other components.

### **At Surgery**

Small diameter implants and angled abutments are not recommended for the posterior region.

Because of the small sizes of the devices, care must be taken that they are not swallowed or aspirated by the patient. It is appropriate to use specific supporting tools to prevent aspiration of loose parts (e.g. gauze, dental dam, or throat shield).

### **After Surgery**

To help ensure a successful long term-treatment outcome, it is advised to provide comprehensive regular patient follow up after implant treatment and to inform the patient about appropriate oral hygiene.

## **Intended Users and Patient Groups**

Multi-unit Abutments are to be used by dental health care professionals.

Multi-unit Abutments are to be used in patients subject to dental implant treatment.

## **Clinical Benefits and Undesirable Side Effects**

### **Clinical Benefits Associated with Multi-unit Abutments**

Multi-unit Abutments are a component of treatment with a dental implant system and/or dental crowns and bridges. As a clinical benefit of treatment, patients can expect to have their missing teeth replaced and/or crowns restored.

### **Undesirable Side Effects Associated with Multi-unit Abutments**

The placement of this device is part of an invasive treatment which may be associated with typical side effects such as inflammation, infection, bleeding, hematoma, pain, swelling. During abutment placement or removal, the pharyngeal reflect (gag reflex) may be triggered in patients with a sensitive gag reflex.

Implant abutments are part of a multi-component system that replaces teeth and as a result, the implant recipient may experience side effects similar to those associated with teeth, such as retained cement, calculus, mucositis, ulcers, soft tissue hyperplasia, soft and/or hard tissue recessions. Some patients may experience discoloration in the mucosal area such as graying.

## Notice regarding serious incidents

For a patient/user/third party in the European Union and in countries with an identical regulatory regime (Regulation 2017/745/EU on Medical Devices); if, during the use of this device or as a result of its use, a serious incident has occurred, please report it to the manufacturer and to your national authority. The contact information for the manufacturer of this device to report a serious incident is as follows:

Nobel Biocare AB

[www.nobelbiocare.com/complaint-form](http://www.nobelbiocare.com/complaint-form)

## Handling Procedure

### Clinical procedure

#### 1A. Straight Multi-unit Abutment/Plus

1. Place appropriate abutment (Figure A). Use plastic holder to facilitate the insertion (Figure C). It is recommended to verify the final abutment seating using radiographic imaging.



Figure A



Figure B

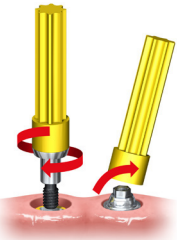


Figure C

2. Tighten the abutment according to table 1, using Screwdriver Machine Multi-unit and Manual Torque Wrench Prosthetic (Figure D).

**Caution** Never exceed recommended maximum tightening torque for the abutment screw. Overtightening of abutment may lead to a screw fracture.

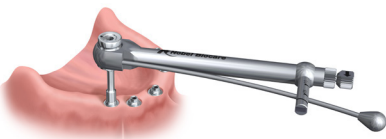


Figure D

#### 1B. 17° and 30° Multi-unit Abutment/Plus

1. Place appropriate angulated abutment (Figure B). Use the holder to facilitate proper position, as there are several positions available (Figure E). It is recommended to verify the final abutment seating using radiographic imaging.
2. Unscrew holder (Figure E).
3. Tighten the abutment to 15 Ncm using Unigrip™ Screwdriver and Manual Torque Wrench prosthetic (Figure F).

**Caution** Never exceed recommended maximum 15 Ncm tightening torque for the abutment screw. Overtightening of abutment may lead to a screw fracture.

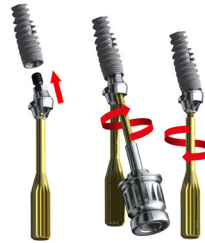


Figure E

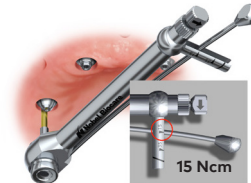


Figure F

#### 1C. 45° and 60° Multi-unit Abutment

1. Place appropriate angulated abutment (Figure B). It is recommended to verify the final abutment seating using radiographic imaging.

**Note** The 45° and 60° Multi-Unit Abutments do not have a holder.

**Caution** The screw is not locked by a holder. Ensure that the screw is engaged to the Unigrip™ Screwdriver when placing the abutment.

2. Tighten the abutment to 35 Ncm using Unigrip™ Screwdriver and Manual Torque Wrench prosthetic (Figure D).

**Caution** Never exceed recommended maximum 35 Ncm tightening torque for the abutment screw. Overtightening of abutment may lead to a screw fracture.

3. Take impression of abutments using open or closed impression tray technique (Figure G, Figure H).

**Note** Hand tighten only and close impression coping recess prior to impression taking.

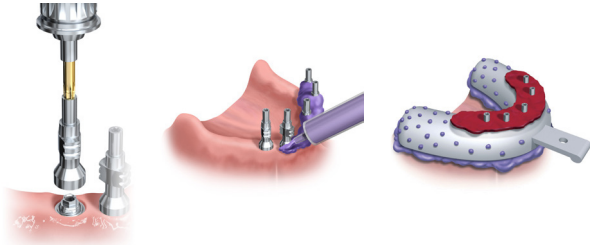


Figure G – Open tray

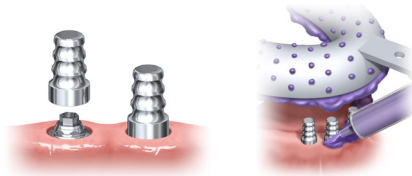


Figure H – Closed tray

4. Provisionalize or attach healing caps.

### Laboratory procedure

5. Attach abutment replicas to impression copings.
6. Fabricate a working model with removable gingival material (Figure I).

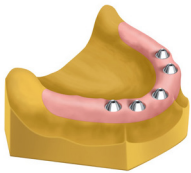


Figure I

#### 6A. NobelProcera® Implant Bridge Wax-up

1. Create implant bridge framework using non-engaging temporary cylinders as a foundation and add pattern resin to fabricate desired framework design (Figure J).
2. Scan the acrylic framework using the NobelProcera® Scanner according to the tutorial found within the software.
3. Once precision milled framework is delivered back to lab, veneering material is added for completion.

#### 6B. Laboratory – Casted Framework

1. Attach Gold Coping Multi-unit to the abutment replicas (Figure K) and reduce the height of the plastic chimney.



Figure J

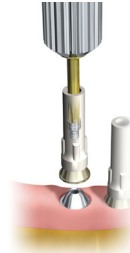


Figure K

2. Wax up framework around gold copings (Figure L).



Figure L

**Note** The Gold Coping Multi-unit is made from a non-oxidizing alloy. Cracking of porcelain may occur if it is applied directly to the gold coping. Make sure the wax covers the Gold Coping Multi-unit with a minimum wax thickness of 0.5 mm. A reduction to 0.3 mm can be made after casting.

3. Fabricate the restoration framework using standard techniques.
4. Complete framework with ceramic (if applicable).

### Clinical procedure

5. Remove temporary restoration if applicable.
6. Use the Screwdriver Machine Multi-unit and Manual Torque Wrench Prosthetic to verify the tightening of the straight Multi-unit Abutment/Plus according to Table 1. Use the Unigrip™ Screwdriver and Manual Torque Wrench Prosthetic to verify tightening of the angulated Multi-unit Abutment/Plus to 15 Ncm and for 45° and 60° Multi-Unit Abutment to 35 Ncm.

Table 1

Abutment (clinical) Screw Tightening Torque	Straight	Angulated (17°, 30°)	Angulated (45°, 60°)
Nobel Biocare implant systems	35 Ncm	15 Ncm	35 Ncm
*Astra Tech Implant System™ Aqua	20 Ncm	15 Ncm	–
*Astra Tech Implant System™ Lilac	25 Ncm	15 Ncm	–
*Astra Tech Implant System™ 4.5 ST, 5.0 ST	25 Ncm	15 Ncm	–
* Straumann® Bone Level, Straumann® Octagon soft tissue level	35 Ncm	15 Ncm	–
*Ankylos® Implant System	25 Ncm	15 Ncm	–
*Camlog®	20 Ncm	15 Ncm	–

**Note** Always refer to the original implant manufacturer's instructions for use, with regards to the implant indications and contraindications, as well as tooling and tightening torque.

7. Insert fixed prosthesis and tighten the prosthetic screws by alternating left and right side (Figure M, Figure N). Finally tighten the prosthetic screws according to Table 1 using Screwdriver Machine Multi-unit or Unigrip™ Screwdriver, as appropriate, and Manual Torque Wrench prosthetic (Figure O).



Figure M



Figure N



Figure O

8. Close screw access channel.

For additional information on restorative and dental laboratory procedures please consult treatment guidelines available at [www.nobelbiocare.com](http://www.nobelbiocare.com) or request latest printed version from a Nobel Biocare representative.

Gold Coping Multi-unit casting specifications: Melting range: 1400–1490° C/2550–2720° F. Coefficient of thermal expansion: 12 µm/m\*° K.

Recommended casting alloys: Conventional gold alloys: High gold content (min 75% Au + Pt metal) alloys, standard ISO 1562 type 4.

Ceramic bonding alloys: High gold content (min 75% Au) alloys, standard ISO/DIS 9693, NIOM type A.

Soldering in the range of 800–890° C/1472–1634° F.

Gold Coping Bar: Soldering in the range of 800–890° C/1472–1634° F.

## Sterility and Reusability Information

Multi-unit Abutment/Plus have been sterilized using irradiation and are intended for single use only. Do not use after the labeled expiration date.

**Warning** Do not use device if the packaging has been damaged or previously opened as the device sterility and/or integrity may be compromised.

**Caution** Multi-unit Abutment/Plus are single use products and must not be reprocessed. Reprocessing could cause loss of mechanical, chemical and/or biological characteristics. Reuse could cause local or systemic infection.

## Magnetic Resonance (MR) Safety Information

These products are fabricated from a metal material which can be affected by MR energy. For further information refer to Nobel Biocare publication **Magnetic Resonance (MR) Safety Information** by navigating to [ifu.nobelbiocare.com](http://ifu.nobelbiocare.com).

## Performance Requirements and Limitations

To achieve the desired performance, the devices must only be used with the products described in this Instructions for Use and/or in the Instructions for Use for other compatible Nobel Biocare products, and in accordance with the Intended Use for each product. To confirm the compatibility of products which are intended to be used in conjunction with the devices, check the color coding, dimensions, lengths, connection type and/or any direct marking as applicable on the products or product labeling.

## Facilities and Training

It is strongly recommended that new and experienced users of Nobel Biocare products always go through special training before using a new product for the first time. Nobel Biocare offers a wide range of courses for various levels of knowledge and experience. For more information please visit [www.nobelbiocare.com](http://www.nobelbiocare.com).

## Storage, Handling and Transportation

The device must be stored and transported in dry conditions in the original packaging at room temperature and not exposed to direct sunlight. Incorrect storage and transportation may influence device characteristics leading to failure.

## Disposal

Safely discard potentially contaminated or no longer usable medical devices as healthcare (clinical) waste in accordance with local healthcare guidelines, country and government legislation or policy.

Separation, re-cycling or disposal of packaging material shall follow local country and government legislation on packaging and packaging waste, where applicable.

# Manufacturer and Distributor Information

<b>Manufacturer</b> 	Nobel Biocare AB PO Box 5190, 402 26 Västra Hamngatan 1 Göteborg 411 17 Sweden <a href="http://www.nobelbiocare.com">www.nobelbiocare.com</a>
<b>UK Responsible Person</b> <div><b>UK</b> <b>RP</b></div>	Nobel Biocare UK Ltd 4 Longwalk Road Stockley Park Uxbridge UB11 1FE United Kingdom
<b>Distributed in Turkey by</b>	EOT Dental Sağlık Ürünleri ve Dış Ticaret A.Ş. Nispetiye Mah. Aytar Cad. Metro İş Merkezi No: 10/7 Beşiktaş İSTANBUL Phone: +90 2123614901, Fax: +90 2123614904
<b>CE Mark for Class IIb Devices</b>	 <b>2797</b>

**Note** Refer to the product label to determine the applicable conformity marking for each device.

**Note** Regarding Canadian device licensure, not all products described in the IFU may have a device licence according to Canadian law.

## Basic UDI-DI Information

Product	Basic UDI-DI Number
Multi-unit Abutment Plus CC NP/RP/WP	73327470000001687H
17° Multi-unit Abutment Plus CC NP/RP/WP	
30° Multi-unit Abutment Plus CC NP/RP	
Multi-Unit Abutment NobelReplace® NP/RP/WP	
17° Multi-Unit Abutment NobelReplace® NP/RP	
30° Multi-Unit Abutment NobelReplace® RP	
Multi-unit Abutments Brånemark System® NP/RP/WP	
17° Multi-Unit Abutments Brånemark System® NP/RP	
30° Multi-Unit Abutments Brånemark System® RP	
Multi-unit Abutments Brånemark System® Zygoma	
17° Multi-unit Abutments Brånemark System® Zygoma	
45° Multi-unit Abutments External Hex RP	
60° Multi-unit Abutments External Hex RP	

## Legal Statements

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## Symbols Glossary

Please refer to the packaging label for the applicable symbols related to the product. On the packaging label you may encounter various symbols to convey a specific information about the product and/or its use. For further information refer to Nobel Biocare publication to the **Symbols Glossary** by navigating to [ifu.nobelbiocare.com](http://ifu.nobelbiocare.com).