

Surgical Manual

Taper KIT

Introduction

Welcome,

and thank you for choosing Osstem Implant products. This catalogue is designed to support dental professionals with product information, clinical workflows, and practical guidance for daily use. It is important to inform patients about the option of dental implant treatment and the potential benefits it may provide. For further information, please contact your local Osstem representative.

Important Notice

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Electronic IFU (per (EU) 2021/2226)

- Surgical Drill & KIT System is eligible for provision of electronic instructions for use (e-IFU) under Regulation (EU) 2021/2226 for professional users.
- e-IFUs are available at [website URL: ifu.osstem.com] in the official languages required by the Member State(s) where the device is placed on the market.
- The e-IFU content is consistent with the paper version; all updates are promptly reflected in both versions.
- If requested, a paper copy of the IFU will be supplied free of charge, within 7 calendar days.
- The e-IFU website maintains historical versions for traceability of all previously applicable instructions.
- Labeling on the product/package indicates the provision of e-IFU and how to access it online.

Surgical Manual | English Edition

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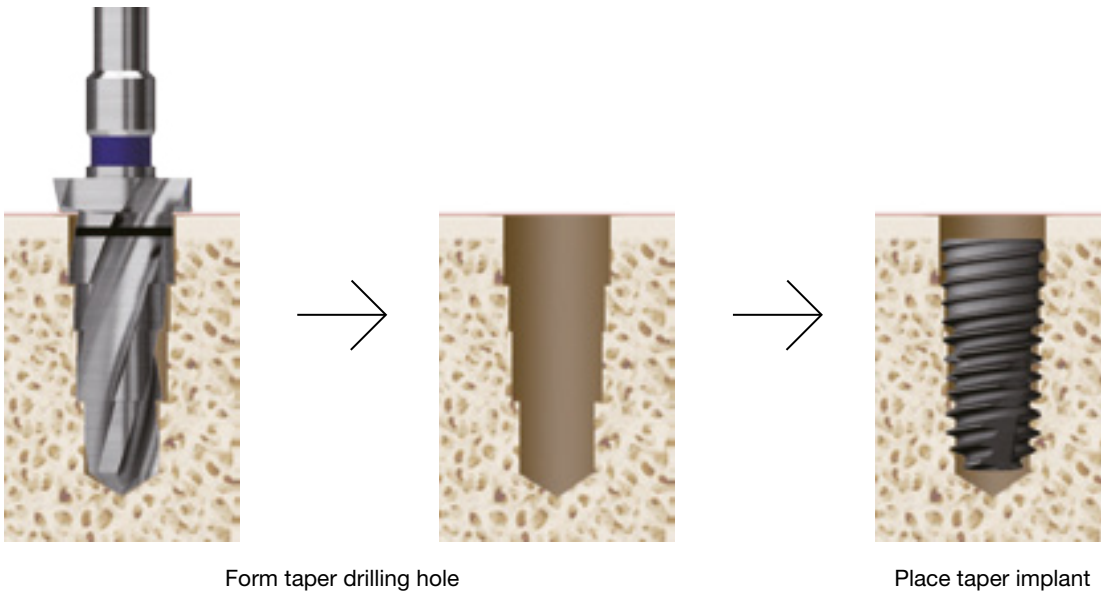
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Note: *This brochure is based on the global 2021 Osstem Surgical Manual and has been visually revised and adapted for the European market. Product availability and specifications may vary by country and are subject to change without notice. Images are for illustrative purposes only. For professional use only.*

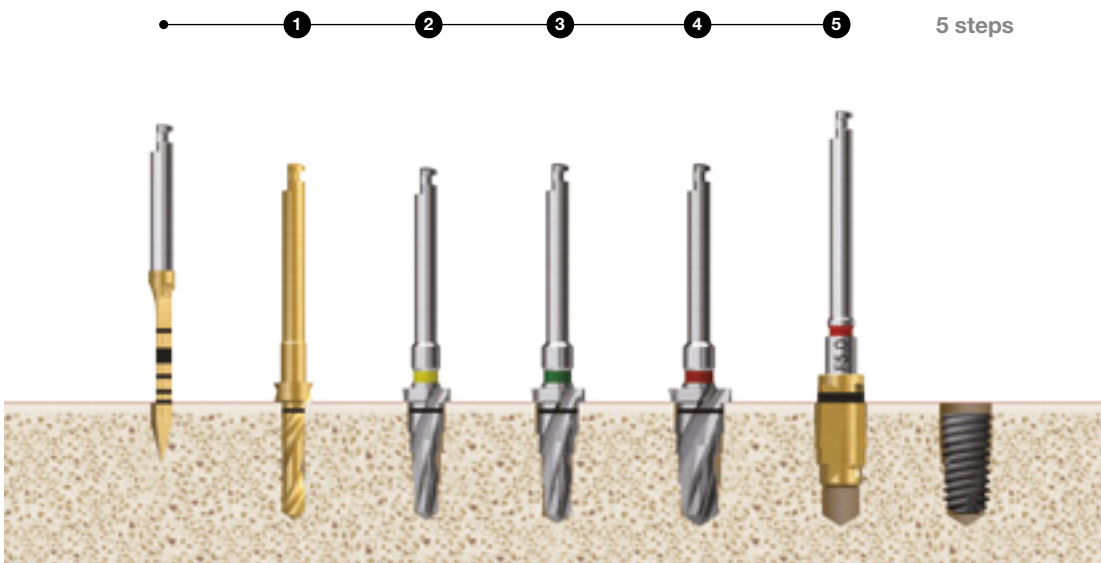
Taper KIT

Surgery KIT with taper drills for placing taper implants

A Taper drill optimized for taper implant placement



B Form taper drilling hole



1 Indication

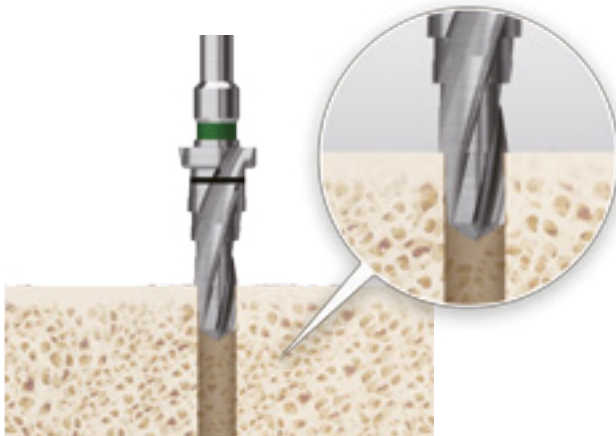
- Use KIT for placing TSIII/IV, KSIII, SSIII, USIII/IV implant
- Diameter: Ø3.0, Ø3.5, Ø4.0, Ø4.5, Ø5.0



2 Feature

A Prevent Implant kickbacks

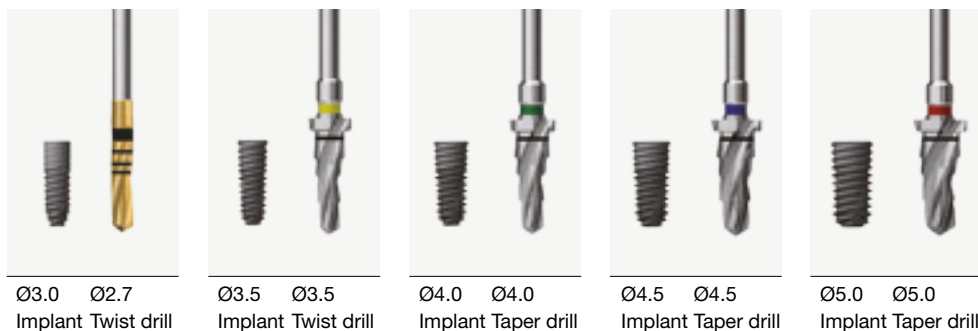
Pilot drill's function is replaced by multi-step taper drill



B Maintains stable placement torque in various bone qualities

- By using various drills as final drill depending on the bone quality, interference between the implant and the bone can be adjusted to obtain the desired placement torque.
- Nominal drill: Final drill used in normal bone for each implant diameter

* Final drill for each implant diameter

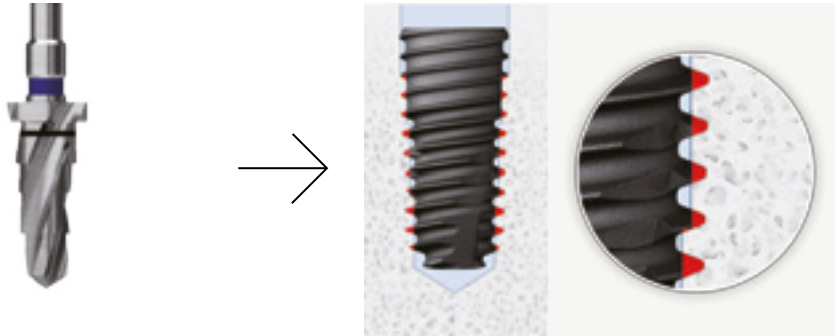


Normal bone Appropriate bone quality

Use nominal drill to form a drill hole that matches the diameter of the implant to be placed.

* Example: Ø4.5×10mm placement

After forming a drill hole with an F4.5 diameter drill, place a Ø4.5 diameter implant



Final drill: F4.5 taper drill

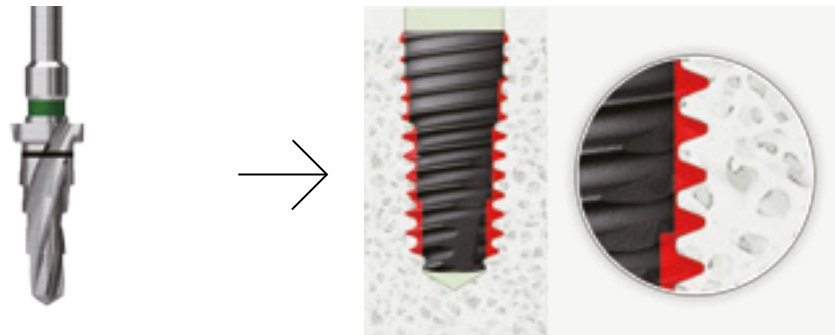
Ø4.5 x 10mm implant placement

Soft bone Since the bone quality is soft, bone interference must be increased to secure enough primary stability

Create a drill hole smaller than the diameter of the implant to be placed with a drill one size smaller than the nominal drill.

* Example: Ø4.5×10mm placement

After forming a drill hole with an F4.0 diameter drill, place a Ø4.5 diameter implant.



Final drill: F4.0 taper drill

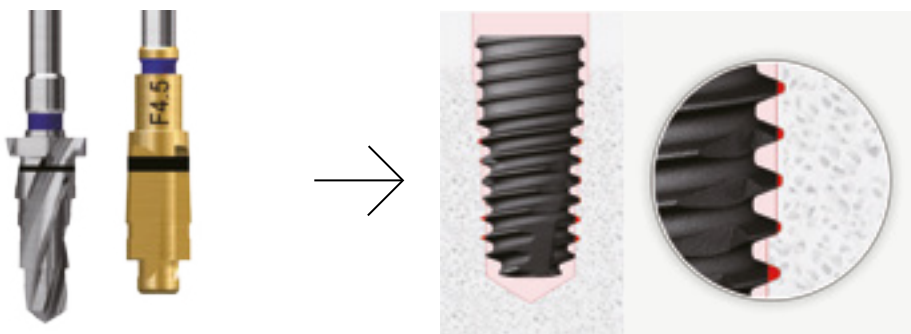
Ø4.5×10mm implant placement

Hard bone Since bone quality is hard, bone interference must be reduced to prevent over-torque and osteonecrosis.

Create a drill hole larger than the diameter of the implant to be placed with a nominal drill and a taper cortical drill

* Example: Ø4.5×10mm placement

After forming a drill hole with an F4.5 diameter drill and an F4.5 taper cortical drill, place the Ø4.5 diameter implant



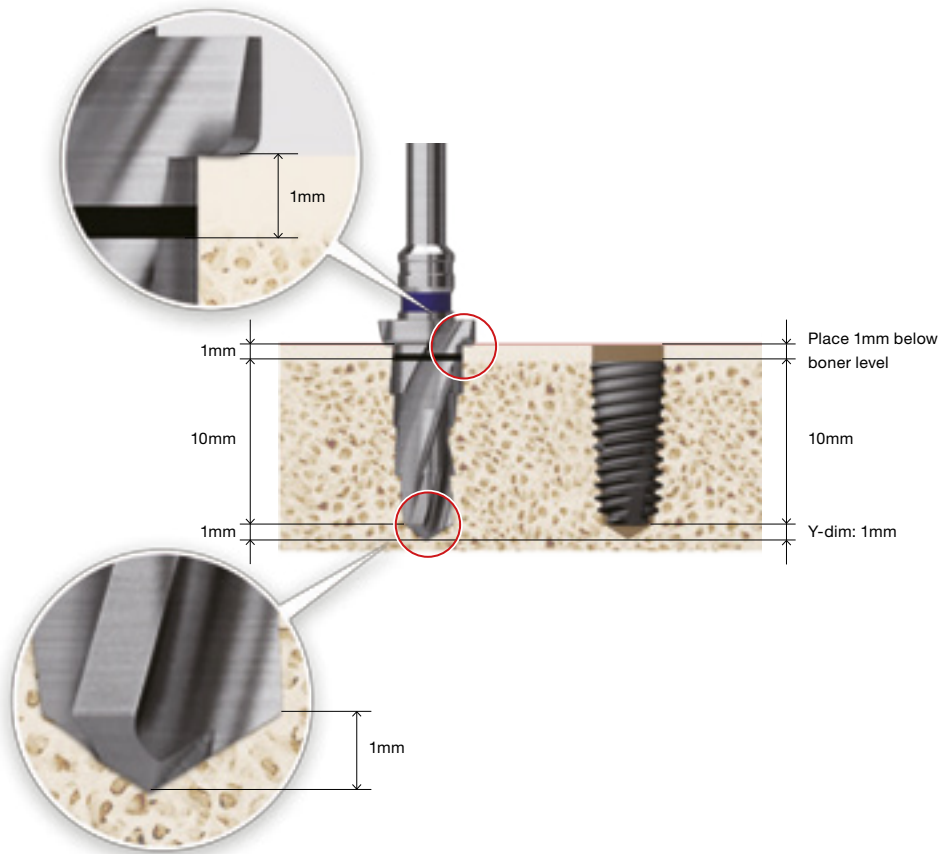
Final drill:
F4.5 taper drill + F4.5 taper cortical drill

Ø4.5×10mm implant placement

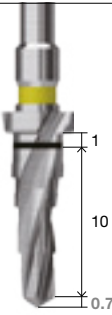
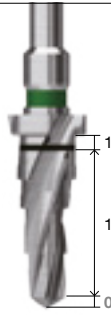
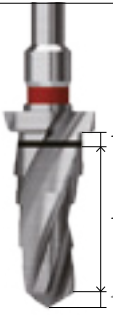
C Easy to adjust drilling depth with the stopper

- Stopper is located 1mm higher than the indicated drill length, and therefore drill all the way to the stopper to facilitate placing TS implant 1mm subcrestal.
- Possible to control implant placement depth by taking the irregular bone height into account.
- When placement torque is low, the implant can be placed deeper to increase placement torque
- There is a difference between the length marked on the drill and the actual drill length : Drill is actually 1.7~2mm longer due to the Y-dim (different for each diameter, 0.7~1mm) and the 1mm margin between the laser marking line and Stopper.

• F4.5 x 10mm 122 taper drill and 10mm implant length comparison

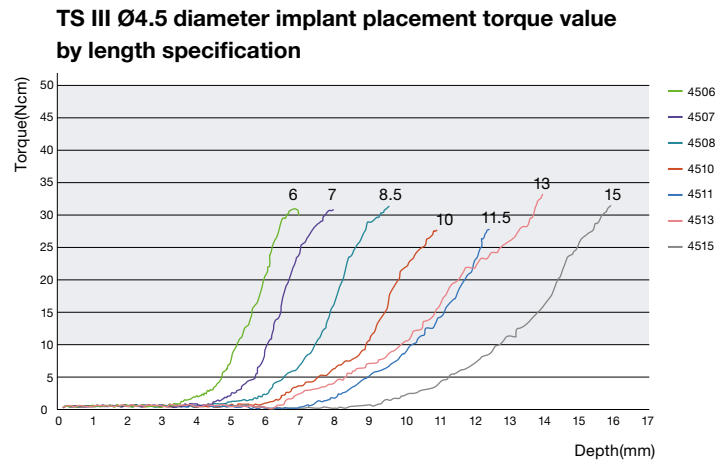
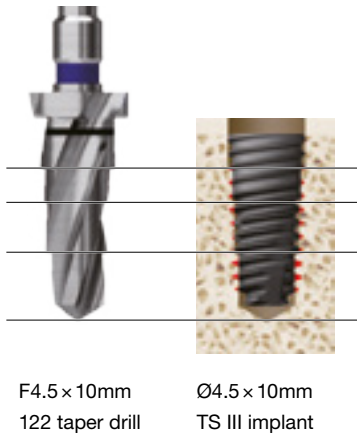


• Y-dim height for each 10mm drill diameter size

Drill diameter	F3.5	F4.0	F4.5	F5.0
Y-dim	0.7mm	0.9mm	1mm	1mm
Drill actual length (mm)	11.7mm	11.9mm	12mm	12mm
				

D Drill shape optimized for taper implant placement

- According to the diameter and length of the taper implant, the drill has a multi-tier shape with 3~4 tiers optimized for bone contact. Therefore, it is possible to obtain optimized primary stability.
- Stable placement for implants of all diameters and lengths.
- The multi tier drill has a similar shape as an implant, and therefore the drill hole has an appropriate tight contact with implant.
- The multi tier design of the drills are different for each drill's diameter and length, and therefore providing stable placement torque.



* Comparison of bone interference by length of a Ø4.5 diameter taper implant

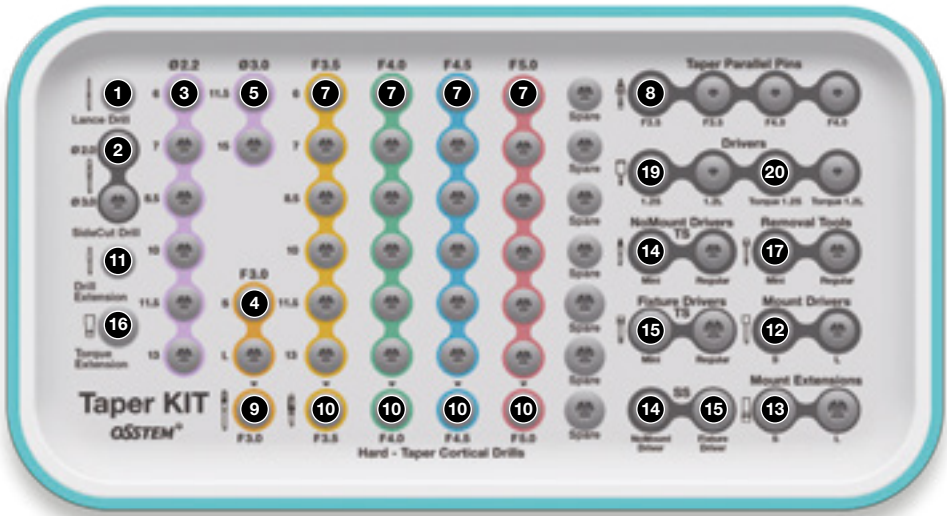
For proper bone interference, select the drill specification that matches the length of the implant to be placed.

Length	122 Taper drill	Taper drilling hole
7.0		
8.5		
10.0		
11.5		
13.0		

3 Tools of KIT

Taper KIT

- Drilling tool
(1~11)
- Implant placement tool
(12~18)
- Superstructure placement tool
(19, 20)



1 Lance drill 	2 SideCut drill 	3 Twist drill  Ø2.2	4 Twist drill  Ø2.7	5 Twist drill  Ø3.0	6 Depth gauge (instrument attached to lid of the KIT) 	
7 Taper drill  Ø3.5	 Ø4.0	 Ø4.5	 Ø5.0	8 Taper parallel pin 	9 Cortical drill  F3.0	10 Taper cortical drill 
11 Drill extension 	12 Simple mount driver 	13 Simple mount extension 	14 TS NoMount driver 	SS NoMount driver 	15 TS Implant driver 	SS Implant driver 
16 Torque extension 	17 Removal tool 	18 Torque wrench (KIT top panel) 	19 Hand driver 	20 Torque driver 		

4 User guide of KIT's tools



The KIT has surgical drills for forming drill holes, a depth gauge for guaging drill depth, and parallel pins for checking placement path.



1 Lance drill



2 SideCut drill



3 Ø2.2 twist drill



4 Ø2.7 twist drill



5 Ø3.0 Twist drill



6 Depth gauge



7 Taper drill



8 Taper parallel pin



9 Taper cortical drill



10 Cortical drill



11 Drill extension

1 Lance drill

Drill used for marking the implant's placement position

User guide

- Connect drill to handpiece.
- Use the tip of the drill to mark the implant's placement position.
- The thickness and bone quality of the cortical bone can be assessed during the drilling process.
- Depending on the skill of the surgeon, laser marking lines can be used for drilling until the desired placement depth.
- Vertical drilling is easier when using the Ø2.0 SideCut drill on inclined bone.
- Recommended RPM is 1,200~1,500rpm.



Mark the implant's placement position (marking)

2 SideCut drill

Drill used for correcting the path or ream the drilling site.

User guide

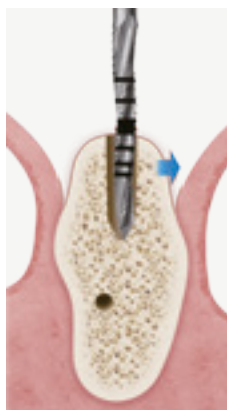
- Connect drill that has appropriate diameter to the handpiece.
- Instead of using the Lance drill, it is possible to mark placement position with the tip of the SideCut drill.
- Drill until the marking line that corresponds with the length of the implant to be placed.
- Sidecut drill is recommended in case of reaming drill hole, or correcting a path, or cutting the septal bone of extraction site.
- Ø2.0 specification is used after initial drilling, and Ø3.0 specification is used for correcting the path after middle/final drilling.
- Recommended RPM is 1,200~1,500rpm.
- Available diameter specifications are Ø2.0, Ø3.0



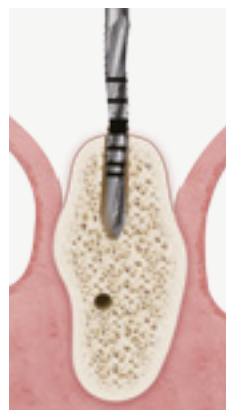
Ø2.0



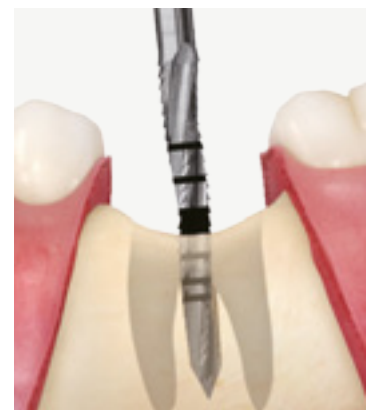
Ø3.0



Drill hole reaming



Path correction



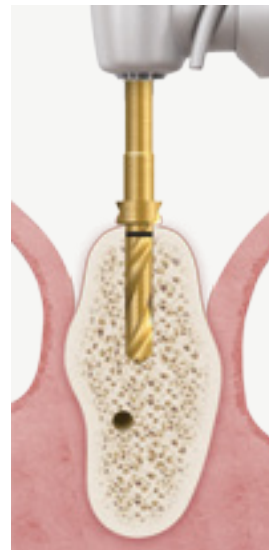
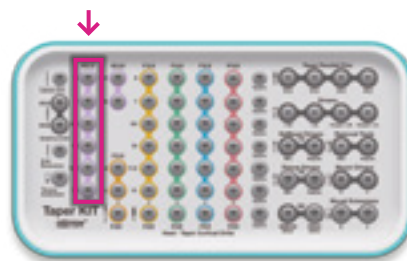
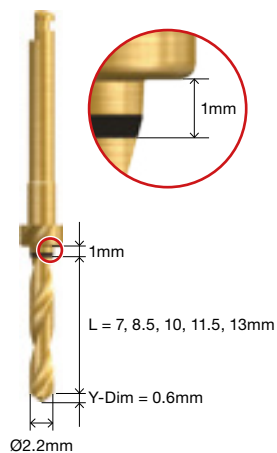
Septal bone cutting

3 Ø2.2 Twist drill

The initial drill used after the lance drill
and final drill when placing a Ø3.0 implant in soft bone

User guide

- Connect the drill that matches the length of the implant to be placed to the handpiece.
- Perform full drilling until stopper.
- Recommended RPM is 800~1,200rpm.
- Available length specifications: 7, 8.5, 10, 11.5, 13mm

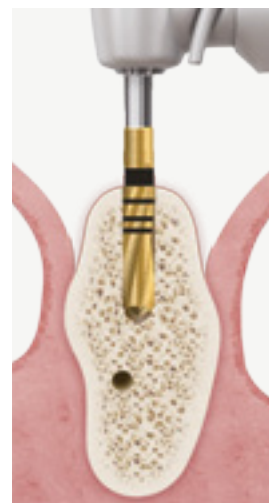
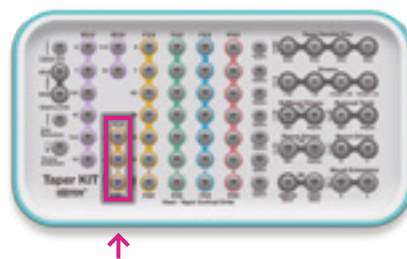
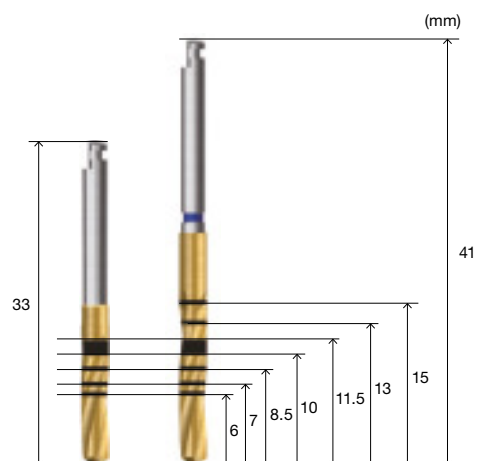


4 Ø2.7 Twist drill

Middle drill used after the initial drill
and final drill when placing a Ø3.0 implant in normal bone

User guide

- Connect drill to handpiece.
- Drill until the marking line that corresponds with the length of the implant to be placed.
- Recommended RPM is 800~1,500rpm.
- Available length specifications: Short(13mm), long(15mm)

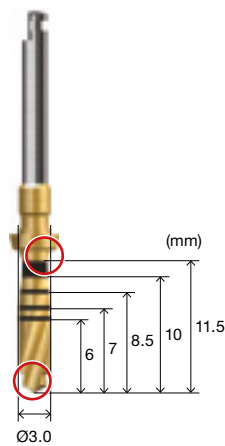


5 Ø3.0 Twist drill

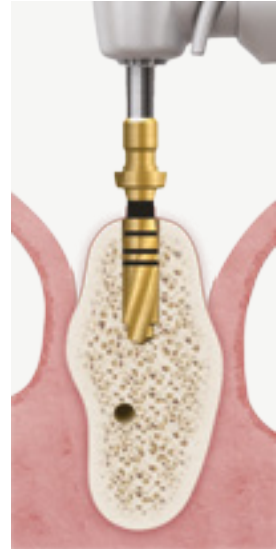
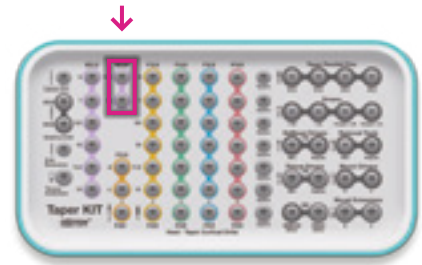
The initial drill used after the lance drill and final drill when placing a Ø3.5 implant in soft bone

User guide

- Connect the drill that matches the length of the implant to the handpiece.
- In case of Stopper drills, perform full drilling until stopper, and in case of non-stopper drills, drill until laser marking that corresponds to the length of the implant to be placed.
- Recommended RPM is 800~1,200rpm.
- Available specifications: Stopper(11.5mm), Non-stopper(15mm)



Multi-step drill

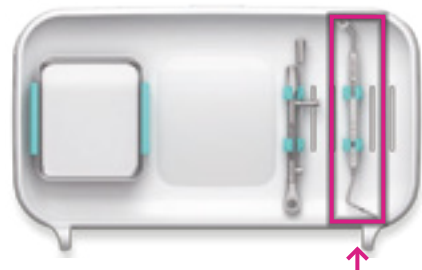


6 Depth gauge

One side of the Depth gauge is for gauging drill hole depth, and the other side is used as open wrench.

User guide

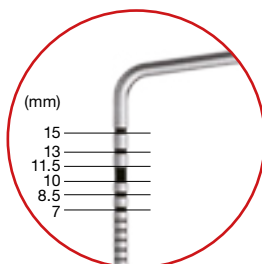
- Place it into the drill hole and check the depth. (grooves in 1mm increments)
- Marking lines of 10mm and 11.5mm are made with one thick line to make length recognition easier.
- When removing Mount from implant, the open wrench grips the octa part of the mount in order to prevent torque application to the implant.



Measure drill hole depth



Functions as open wrench



Grooves in 1mm increments

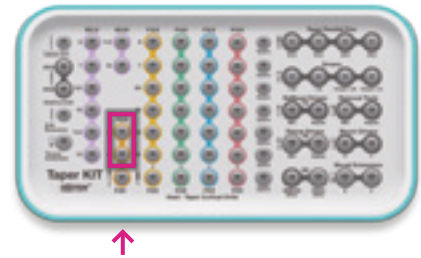
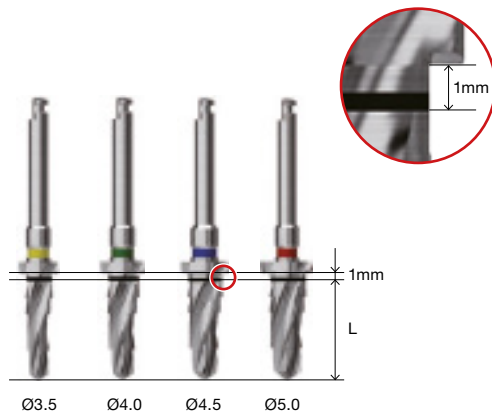


7 Taper drill

Used for forming holes according to implant length and diameter

User guide

- Select appropriate drills for the diameter and length of the implants to be placed.
- Connect drill to handpiece.
- Perform full drilling until stopper.
- Recommended RPM is 800~1,200rpm.
- Available length specifications: 7, 8.5, 10, 11.5, 13mm
- Available diameter specifications are F3.5, F4.0, F4.5, F5.0

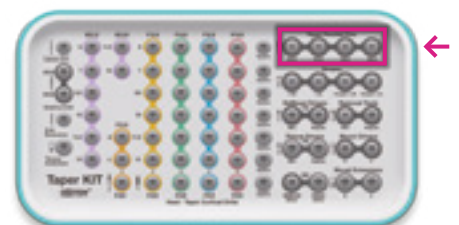


8 Taper parallel pin

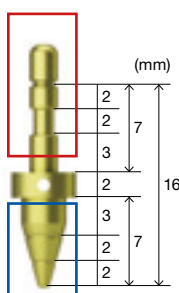
Used for checking drilling spot and path after drilling with a taper drill

User guide

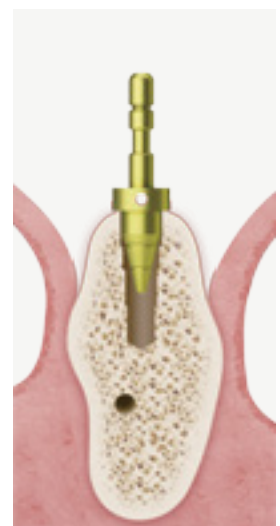
- After initial drilling and F3.5 drilling, place it into the drill hole and check the location and path.
- The straight part can be used for checking path after Ø2.2 twist drilling, and the tapered part after F3.5 drilling.
- Make the patient slightly occlude in order to check path with antagonist teeth.
- The Taper parallel pin might fall into the patient's throat, therefore it is advised to put dental floss through the hole located in the middle.
- Diameter standard specifications: F3.5, F4.0 (additionally available options: F4.5, F5.0).



Use after initial drilling



Use after taper drilling

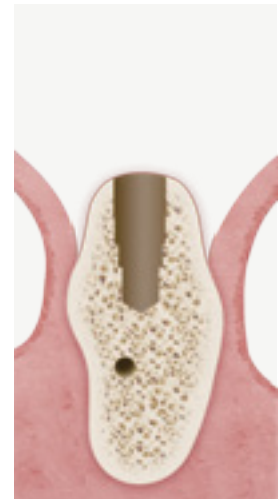
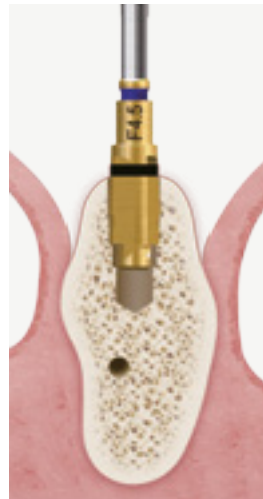
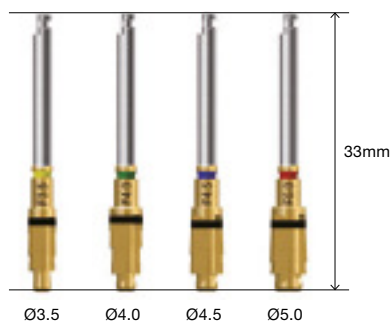
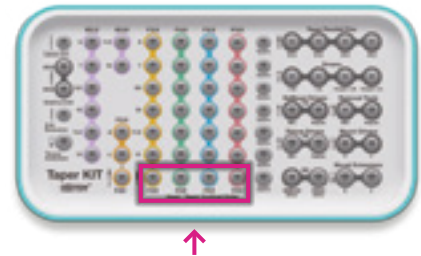


9 Taper cortical drill

Drill to remove cortical bone to reduce torque when placing implants in hard bone (prevents over-torque)

User guide

- Select appropriate drill for the diameter of the implant to be placed.
- Connect drill to handpiece.
- The Laser marking line is 1mm wide, and the surgeon should drill until the lower end of the Marking line.
- Recommended RPM is 800~1,200rpm.
- Available diameter specifications are F3.5, F4.0, F4.5, F5.0

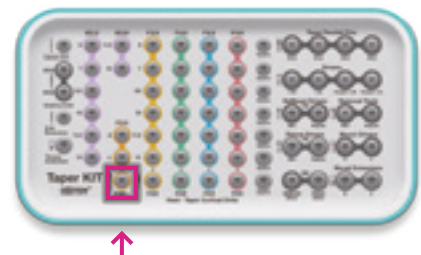


10 Cortical drill

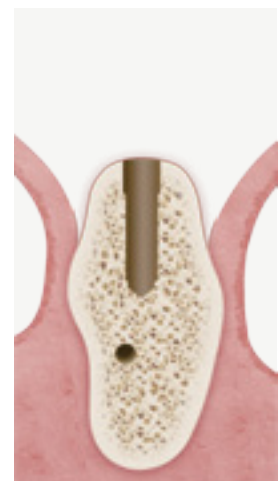
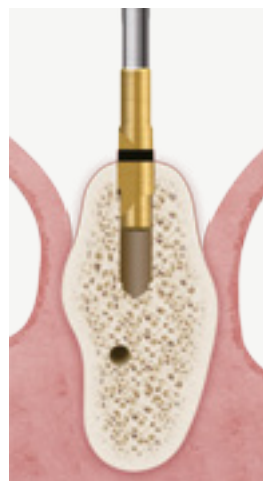
A drill that cuts the cortical bone to lower the torque when placing a Ø3.0 implant in hard bone (prevents over-torque)

User guide

- Connect drill to handpiece.
- The laser marking line is 1mm wide, and this line should not be passed when drilling.
- Recommended RPM is 800~1,200rpm.
- Available diameters: F3.0



Ø3.0 cortical drill

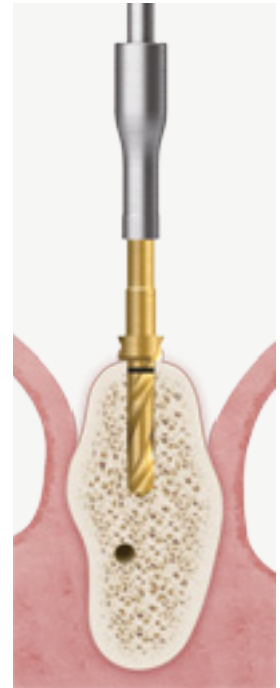
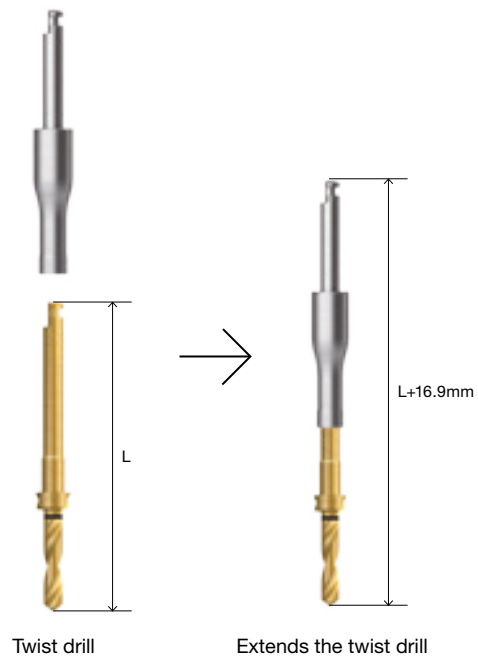


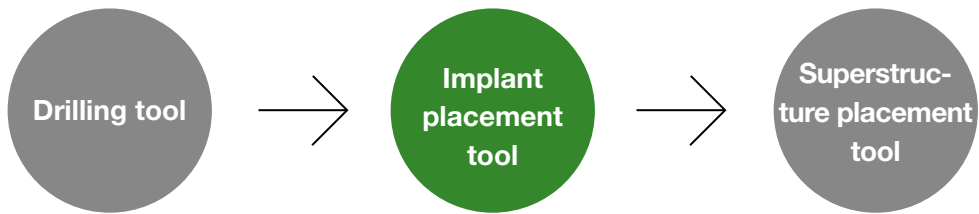
11 Drill extension

Used for extending the length of drills and other hanpiece-using tools in case there is interference from adjacent teeth.

User guide

- Connect the drill extension to the drill and then connect it to the handpiece.
- The Drill extension needs to be properly connected, since it could lead to bending or fracture when applying strong force in case of improper connection.
- Drill at placement site.
- When using a drill extension, the length of the drill is extended by 16.9mm.





Consists of drivers for placing pre-mount implants and NoMount implants, a torque wrench, and a removal tool used in case of mount jamming.



12 Simple mount driver



13 Simple mount extension



14 NoMount driver



15 Implant driver



16 Torque extension



17 Removal tool



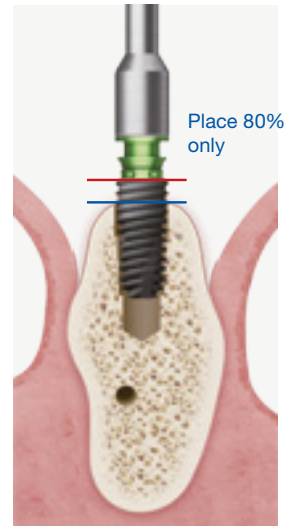
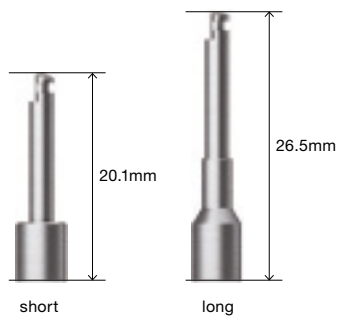
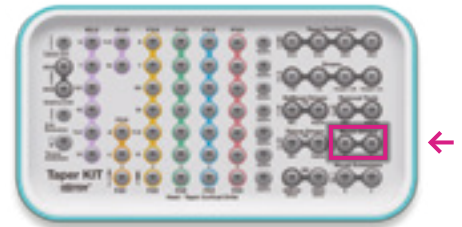
18 Torque wrench

12 Simple mount driver

Simple mount driver is used for placing pre-mount implants with engine.

User guide

- Connect the mount driver to the handpiece.
- Connect the mount driver to the implant mount and take out the implant from the ampoule.
- When taking the implant into the mouth, carry it with the implant tip facing up so that it does not fall down.
- Place only approx. 80% of the implant, and adjust the additional depth with the torque wrench.
- Place the implant at a speed of only 50 rpm and torque of 40Ncm.
- Short and long specifications are available.

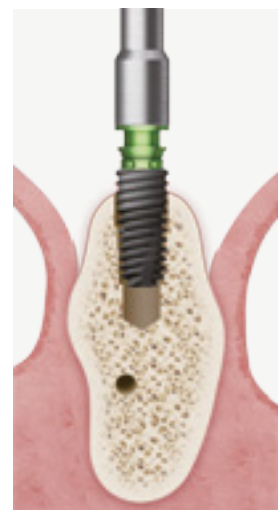
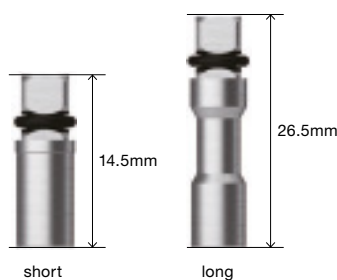
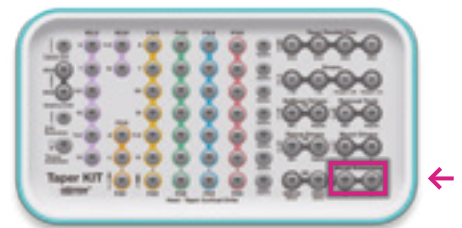


13 Simple mount extension

Tool for adjusting the additional placement depth of pre-mount implants (instrument for torque wrench)

User guide

- Connect the torque wrench to the mount extension.
- Connect to Mount of the placed implant. for additional depth control.
- Short and long specifications are available.

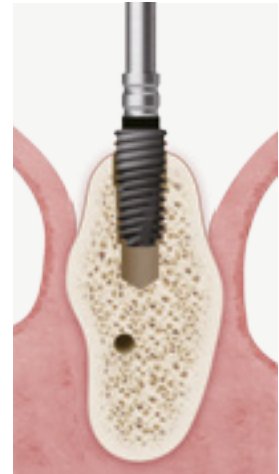
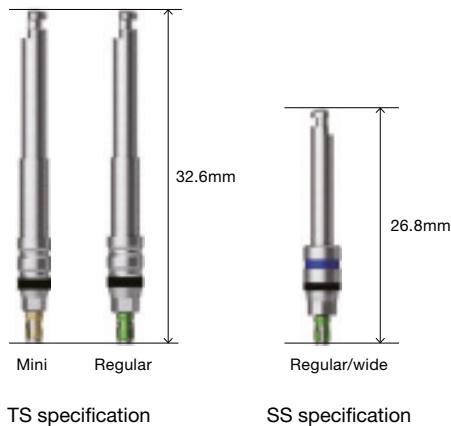
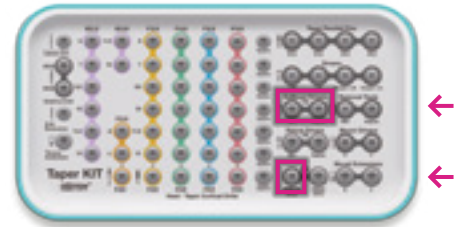


14 NoMount driver (TS/SS)

No Mount driver is used for placing TS or SS NoMount implants with engine.

User guide

- Connect the Nomount driver to the handpiece.
- Connect the Nomount driver to the Nomount implant and take out the implant.
- When taking the implant into the mouth, carry it with the implant tip facing up so that it does not fall down.
- Place only approx. 80% of the implant, and adjust the additional depth with the torque wrench.
- Place the implant at a speed of only 50 rpm and torque of 40Ncm.
- There are mini and regular (long) specifications for TS, and one single regular/wide (short) specification for SS.

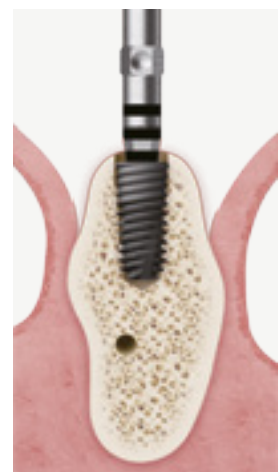
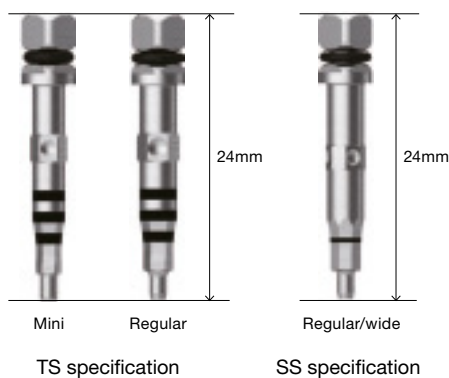
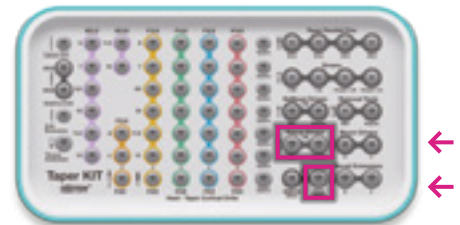


15 Implant driver (TS/SS)

And hex direction Implant driver is used for adjusting the additional implant depth and hex direction with torque wrench (instrument for torque wrench).

User guide

- Select an implant driver that meets the implant specifications and connect it to the torque wrench.
- Connect it to placed implant for additional depth control.
- Place the implant with 30Ncm of torque.
- There are mini and regular (long) specifications for TS, and one single regular/wide (long) specification for SS.

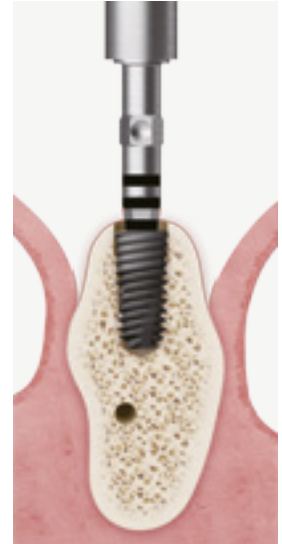
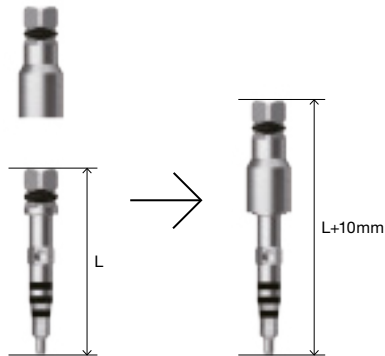


16 Torque extension

A tool that extends the length by 10mm of instruments that are used with the handpiece (Instrument used with torque wrench).

User guide

- Connect the torque extension to the torque wrench.
- Then connect to tool for torque to extend their length and apply torque.

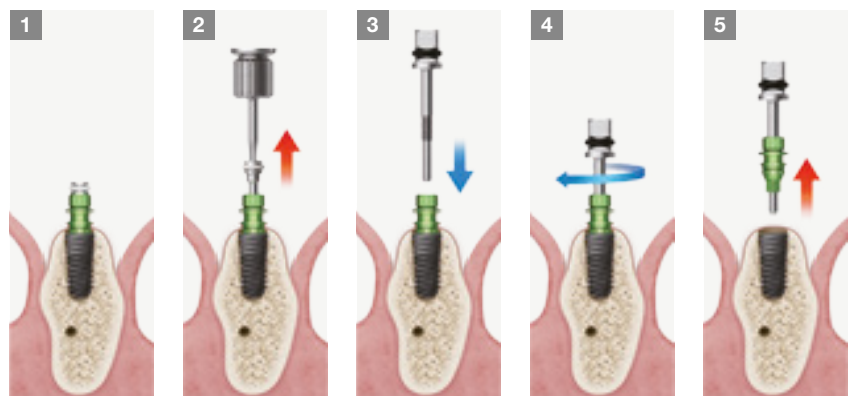


17 Removal tool

A tool that separates the mount in case the mount is jammed and can't be taken out from the placed Pre-Mount implant.

User guide

- Completely remove the mount screw with 1.2 hex hand driver.
- Connect Removal tool to implant mount and rotate clockwise to separate the mount.
- There are two specifications available : mini(TS, US) and regular(TS, SS, US)/wide(SS).

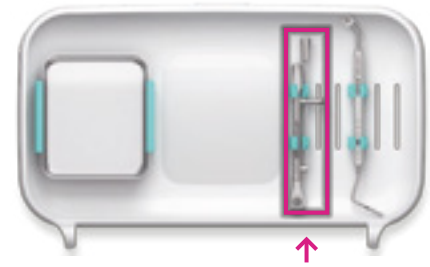


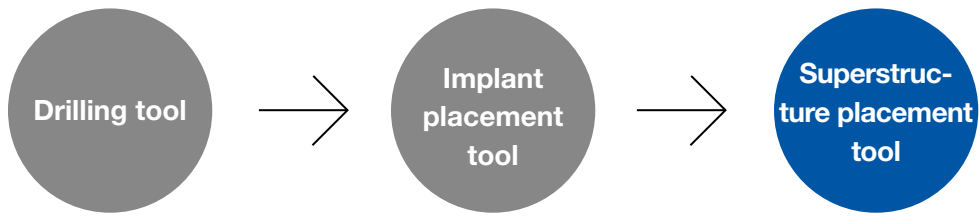
18 Torque wrench

A tool used for adjusting implant placement depth or for applying constant torque on abutment, screw, etc.

User guide

- Rotate clockwise Pull the bar to match the bar with the torque value you wish to apply, and rotate clockwise for torque application.
- Torque value of 10, 20, and 30Ncm can be applied.
- Keep torque value below 30Ncm when placing the implant.





Includes tools used for placing and removing cover screw, healing abutment, and abutment screw after implant placement.



19 Hand driver



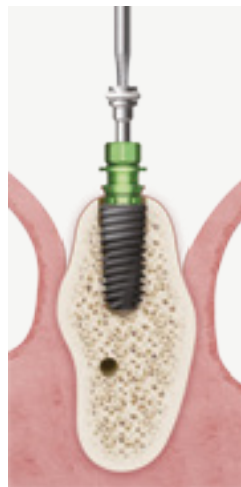
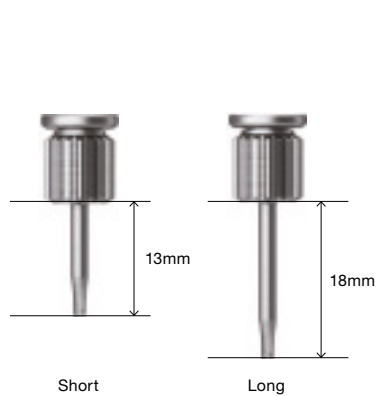
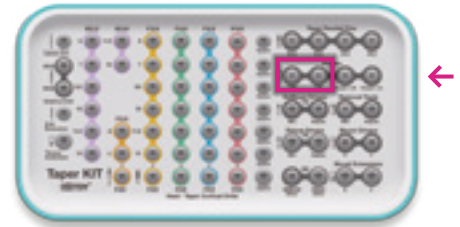
20 Torque driver

19 Hand driver

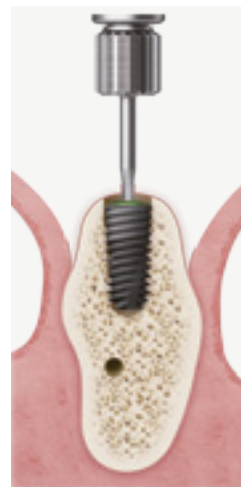
A manual driver used for tightening or loosening cover screw, healing abutment, and abutment screw after implant placement.

User guide

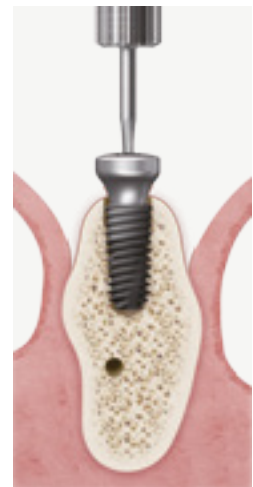
- Place the hand driver hex into the hex of cover screw or healing abutment.
- To tighten, turn clockwise at 5~8Ncm.
- To loosen, turn counterclockwise.
- If excessive force (above 20Ncm) is applied, hex slip may occur at the tip of the driver or the screw head. Be careful not to apply over-torque.
- When an adult male wears gloves and tightens with his fingers only, he can generate approx. 12 ~ 18Ncm of force (female: 8 to 12 Ncm).
- 1.2 hex (short, long) specifications available.



Remove mount



Assemble/remove cover screw



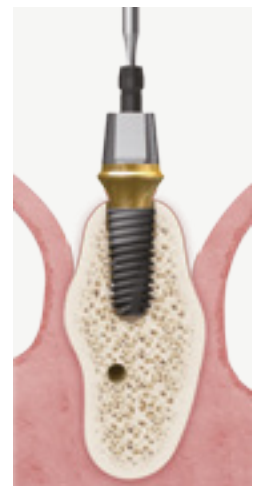
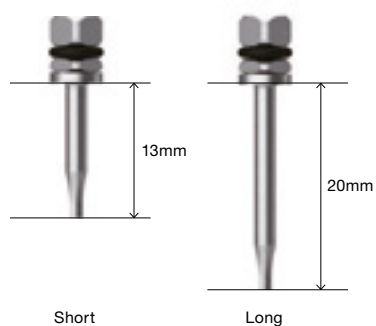
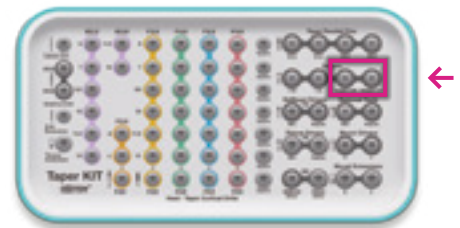
Assemble/remove healing abutment

20 Torque driver

A driver used for applying torque to the abutment screw with a torque wrench (instrument for torque wrench)

User guide

- Connect the torque driver to the torque wrench.
- To fasten the abutment screw, rotate clockwise.
- To loosen the abutment screw, rotate counterclockwise.
- 1.2 hex (short, long) specifications available.



5 KIT sequence

Normal bone TSIII Ø4.5×10mm placement

N: Tool number



Gingival incision

- Make a gingival incision and a flap in the gingiva and check the surgery region.



Mark drilling position (Lance drill)

- Mark the implant placement site by drilling 2-3mm in cortical bone with lance drill.
- Recommended RPM : 1,200~1,500rpm



Initial drilling (Ø2.2 × 10mm Twist drill)

- Full drilling up to the stopper with Ø2.2 twist drill
- Recommended RPM : 1,200~1,500rpm



Check depth (Depth gauge)

- After initial drilling, check the depth of the hole and the status of the hole floor.
- * The lower border of the marking lines are the criteria. The single marking line for both 10 and 11.5mm together is bold for easier recognition.



Check drilling position and path (Parallel pin)

- After initial drilling, place a parallel pin into the hole to check the drilling position and path



Expand drill hole (F3.5 × 10mm Taper drill)

- Full drilling up to the stopper with F3.5x10mm taper drill
- Connect drill extension in case there is interference from adjacent teeth.
- If the drill gets stuck during the surgery, rotate in reverse mode to remove the drill, then resume drilling
- Recommended RPM: 800~1,200rpm



Check drilling position and path (Parallel pin)

- Check the position and path of the hole after drilling with an F3.5 drill



Final drilling (F4.5 × 10mm Taper drill)

- Place only 80% of the implant by setting the maximum engine torque to 40Ncm (place implant until only two threads can be seen).
- If the implantation torque is above 55Ncm, bone necrosis might occur or the mount may get stuck.
- If a strange sound can be heard when placing implant, it must be rotated in reverse mode to remove implant.
- Recommended RPM: Max. 50rpm



Place implant (Simple mount driver)

- Place only 80% of the implant by setting the maximum engine torque to 40Ncm (place implant until only two threads can be seen).
- If the implantation torque is above 55Ncm, bone necrosis might occur or the mount may get stuck.
- If a strange sound can be heard when placing implant,, it must be rotated in reverse mode to remove implant.
- Recommended RPM: Max. 50rpm



Remove mount

(when placing a pre-mount implant)

- Remove the mount screw with a 1.2 hex hand driver.
- If the mount screw cannot be removed, it can be separated with a 1.2 torque driver and a torque wrench or a 1.2 machine screw driver (sold separately) and a handpiece.



- When removing the mount screw, fix the top octa part of the mount with an open wrench so that no torque is applied to the implant, then loosen the screw and remove it.



Adjust placement depth

- After connecting the implant driver to the torque wrench, rotate clockwise to place the implant 1mm below the bone level.
- Recommended torque: Max. 30Ncm



Place cover screw or healing abutment

- Consider primary stability, and fasten the cover screw or healing abutment with a 1.2 hex hand driver.



Suture

- 2-stage : Cover the cover screw with gingiva and suture so that it is not exposed.
- 1-stage : Suture with the healing abutment exposed.

Quick Guide | TSIII, KSIII, SSIII, USIII (Length: 10mm)

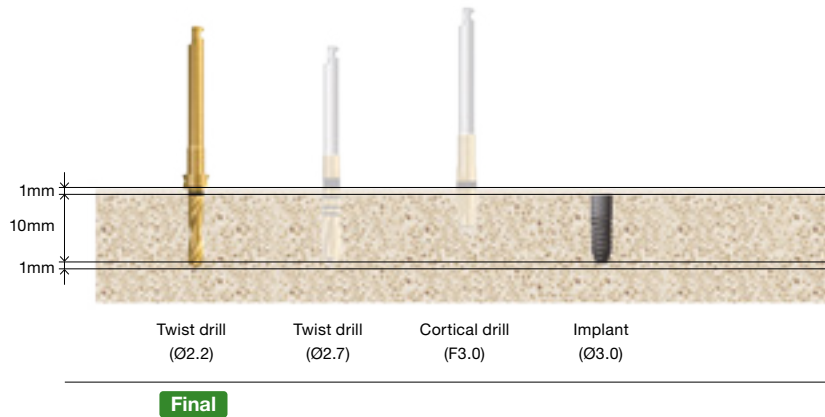
Ø3.0×10mm implant placement

Soft bone Use a drill one specification smaller than the nominal drill

Since bone quality is soft, use a Ø2.2 twist drill, which is smaller than the implant, as the final drill in order to obtain primary stability by increasing bone interference.



Final drill
Ø2.2 Twist drill

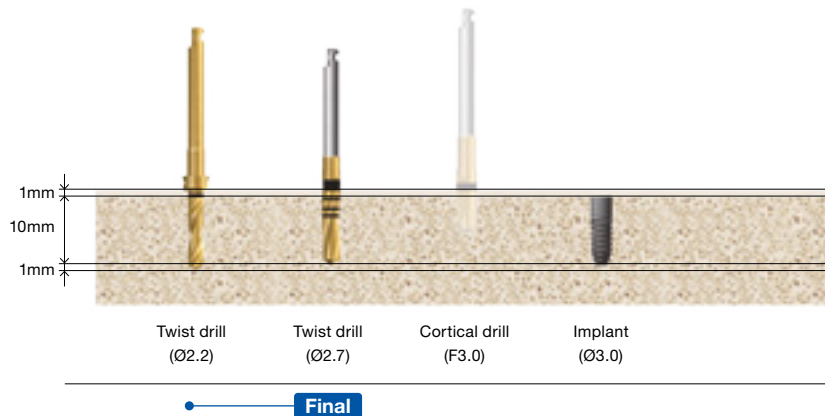


Normal bone Use nominal drill

As bone quality is appropriate, use the Ø2.7 twist drill, which matches the implant, as final drill to form drill hole.



Final drill
Ø2.7 Twist drill

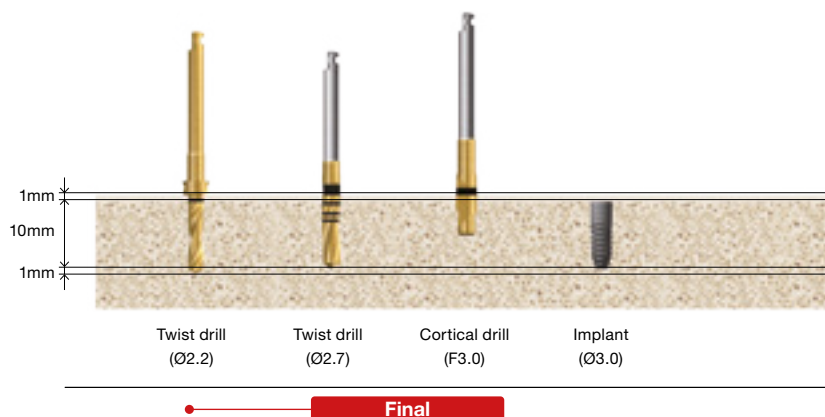


Hard bone Use nominal drill and cortical drill

Since bone quality is hard, use a Ø2.7 twist drill and afterwards the F3.0 cortical drill as final drill to prevent osteonecrosis and over-torque.



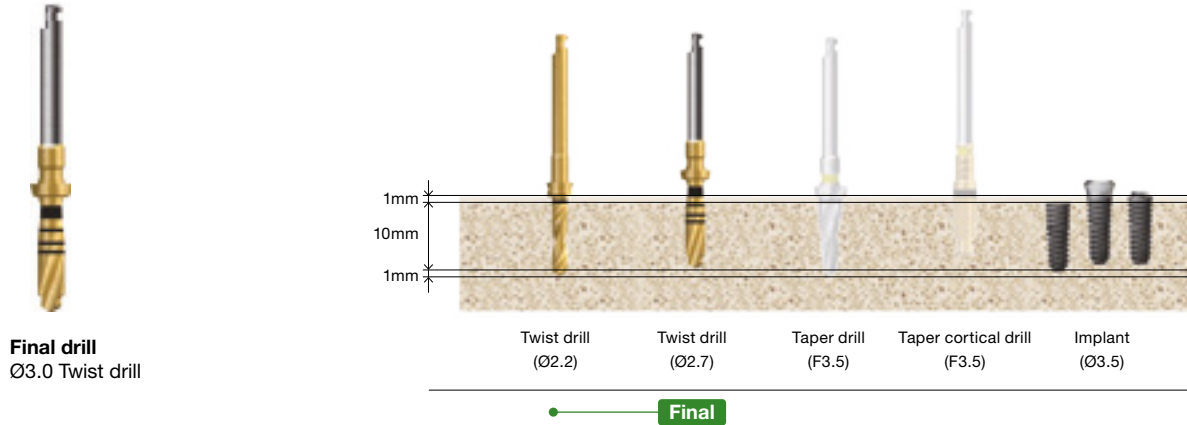
Final drill
Ø2.7 Twist drill
F3.0 cortical drill



Ø3.5x10mm implant placement

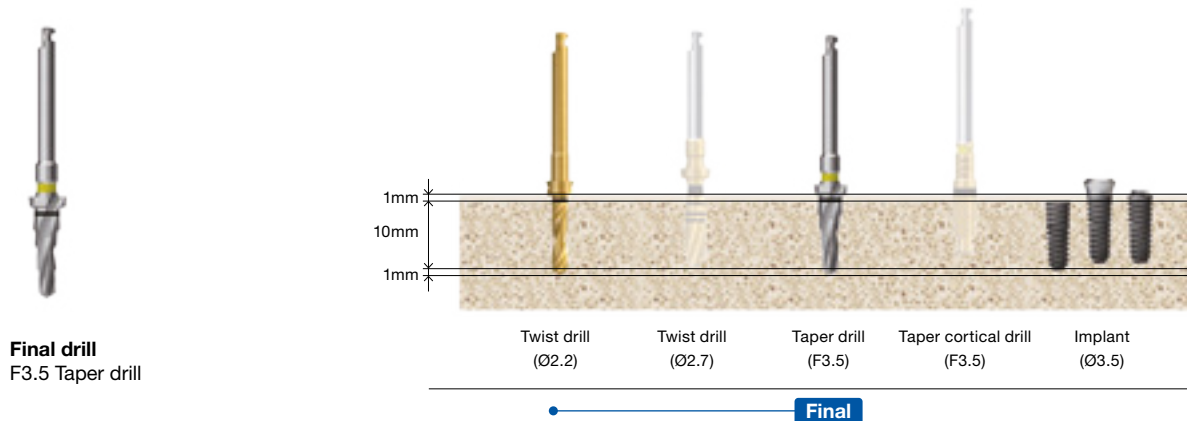
Soft bone Use a drill one specification smaller than the nominal drill

Since bone quality is soft, use a Ø3.0 twist drill, which is smaller than the implant, as the final drill in order to obtain primary stability by increasing bone interference.



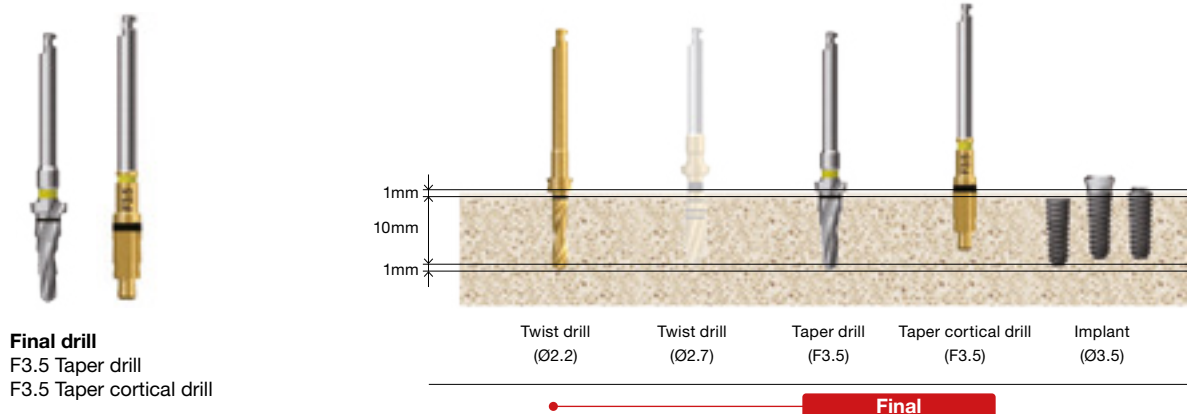
Normal bone Use nominal drill

As bone quality is appropriate, use the F3.5x10mm taper drill that matches the implant's diameter, as the final drill to create a drill hole.



Hard bone Use nominal drill and taper cortical drill

Since bone quality is hard, use the F3.5 taper drill and afterwards the F3.5 taper cortical drill as final drill to prevent osteonecrosis and over-torque.

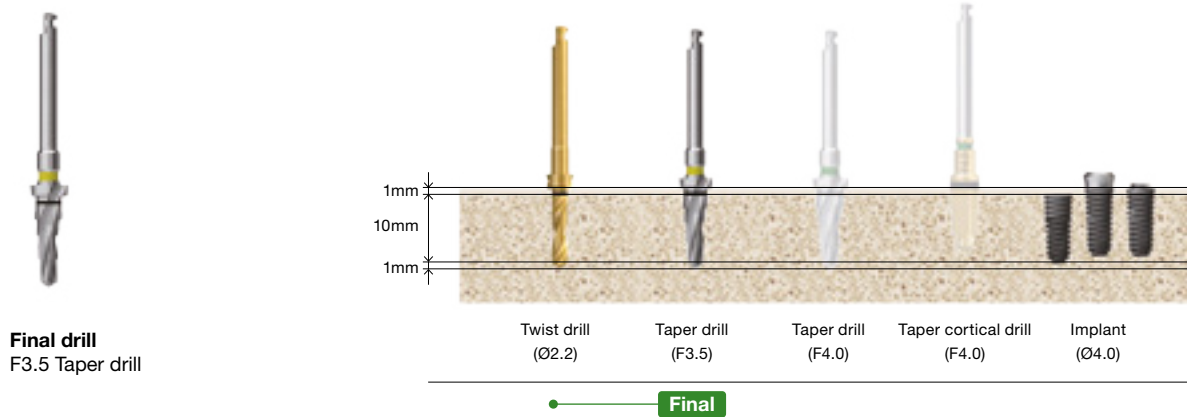


Quick Guide | TSIII, KSIII, SSIII, USIII (Length: 10mm)

Ø4.0×10mm implant placement

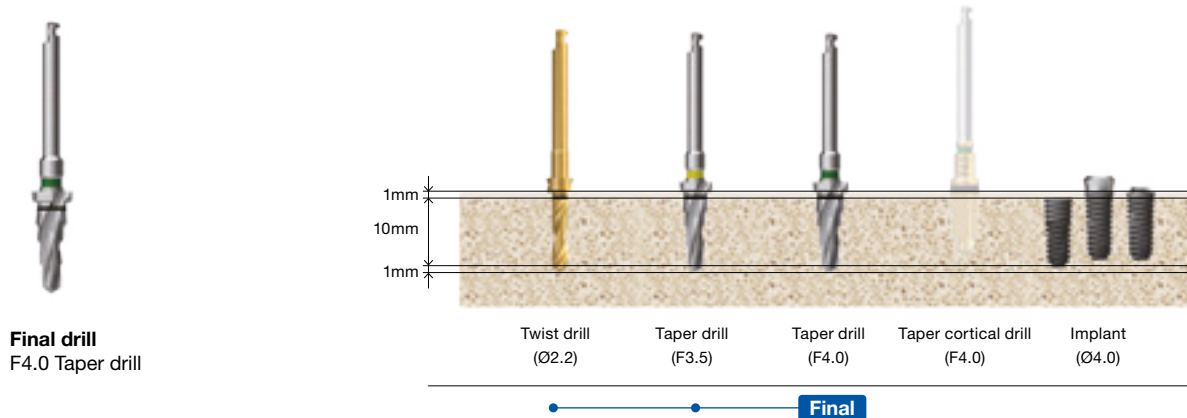
Soft bone Use a drill one specification smaller than the nominal drill

Since bone quality is soft, use a Ø2.2 taper drill, which is smaller than the implant, as the final drill in order to obtain primary stability by increasing bone interference.



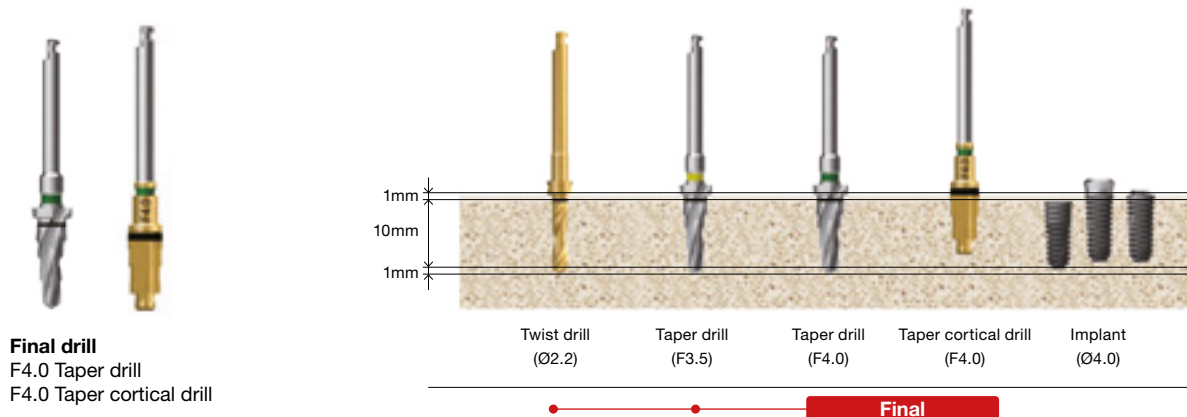
Normal bone Use nominal drill

As bone quality is appropriate, use a F4.0 taper drill, which matches the implant's diameter, as the final drill to create a drill hole.



Hard bone Use nominal drill and taper cortical drill

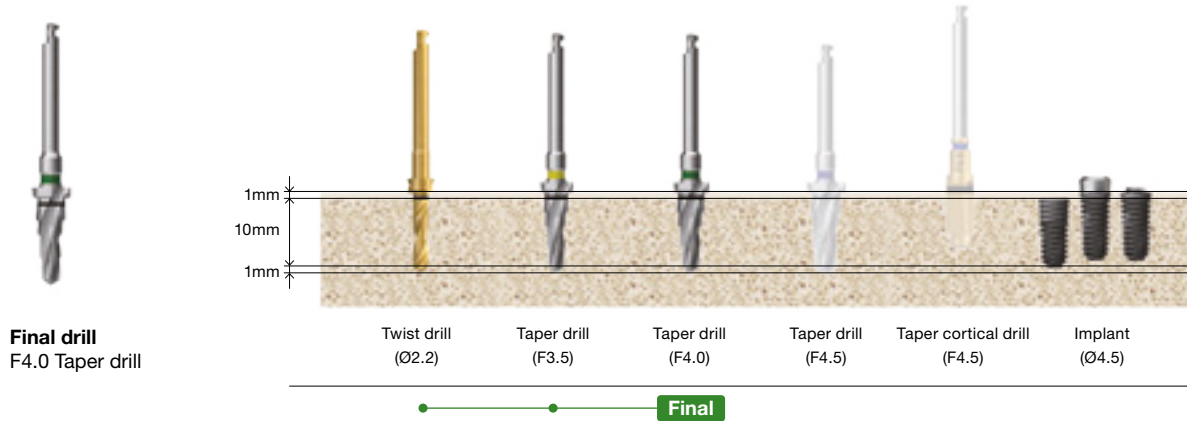
Since bone quality is hard, use a F4.0 taper drill and afterwards the F4.0 taper cortical drill as final drill to prevent osteonecrosis and over-torque.



Ø4.5×10mm implant placement

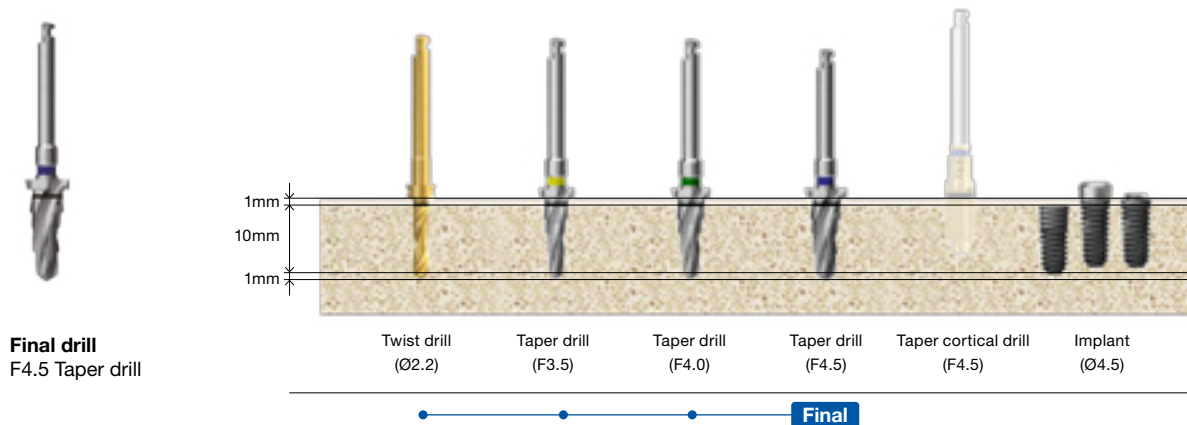
Soft bone Use a drill one specification smaller than the nominal drill

Since bone quality is soft, use a F4.0 taper drill, which is smaller than the implant, as the final drill in order to obtain primary stability by increasing bone interference.



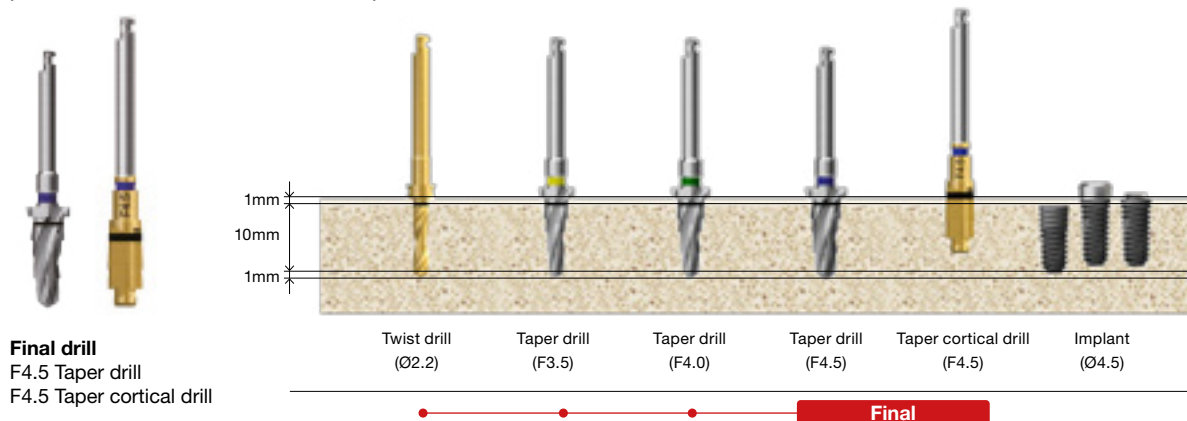
Normal bone Use nominal drill

As bone quality is appropriate, use a F4.5 taper drill, which matches the implant's diameter, as the final drill to create a drill hole.



Hard bone Use nominal drill and taper cortical drill

Since bone quality is hard, use a F4.5 taper drill and afterwards the F4.5 taper cortical drill as final drill to prevent osteonecrosis and over-torque.

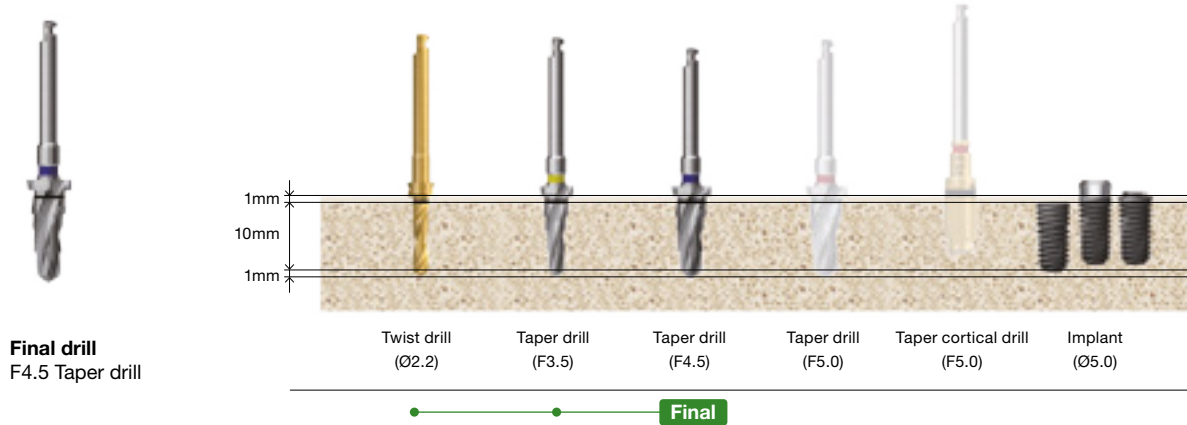


Quick Guide | TSIII, KSIII, SSIII, USIII (Length: 10mm)

Ø5.0×10mm implant placement

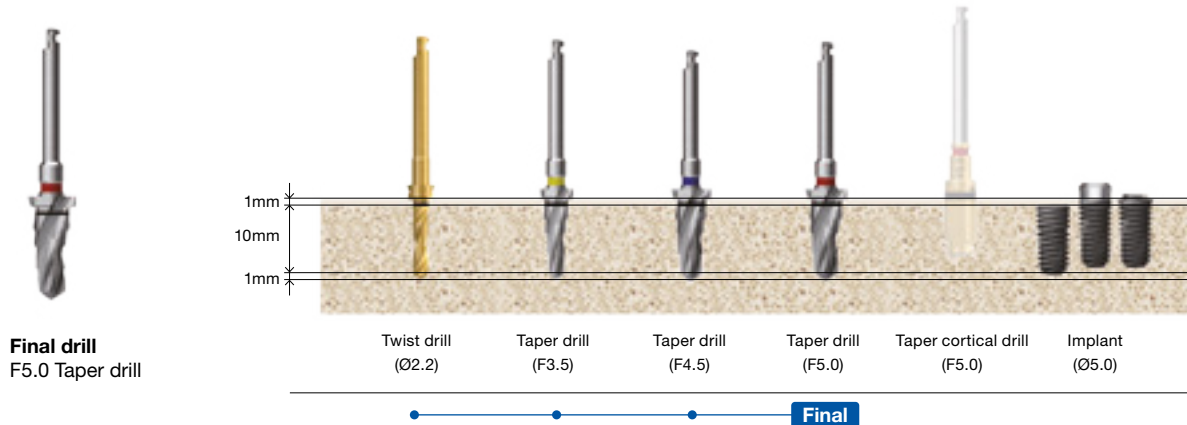
Soft bone Use a drill one specification smaller than the nominal drill

Since bone quality is soft, use a F4.5 taper drill, which is smaller than the implant, as the final drill in order to obtain primary stability by increasing bone interference.



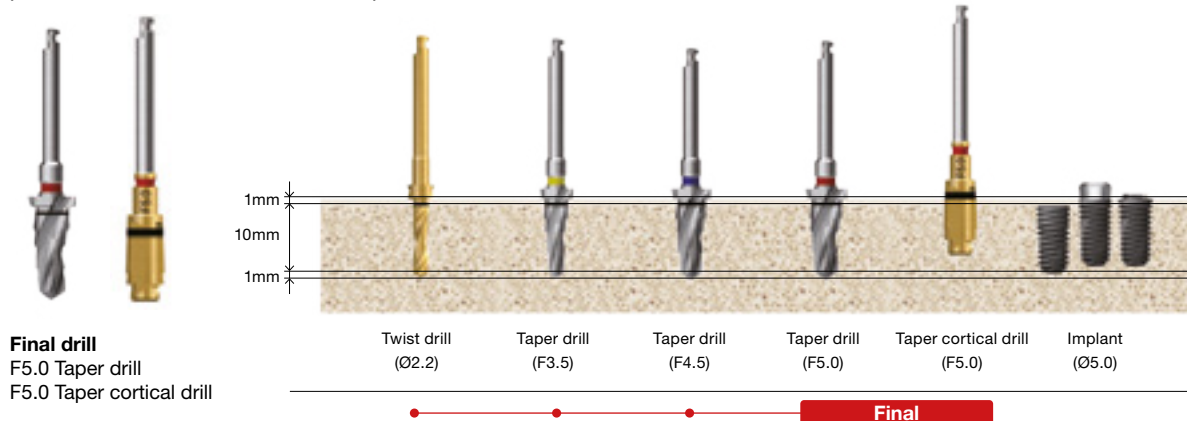
Normal bone Use nominal drill

As bone quality is appropriate, use a F5.0 taper drill, which matches the implant's diameter, as the final drill to create a drill hole.



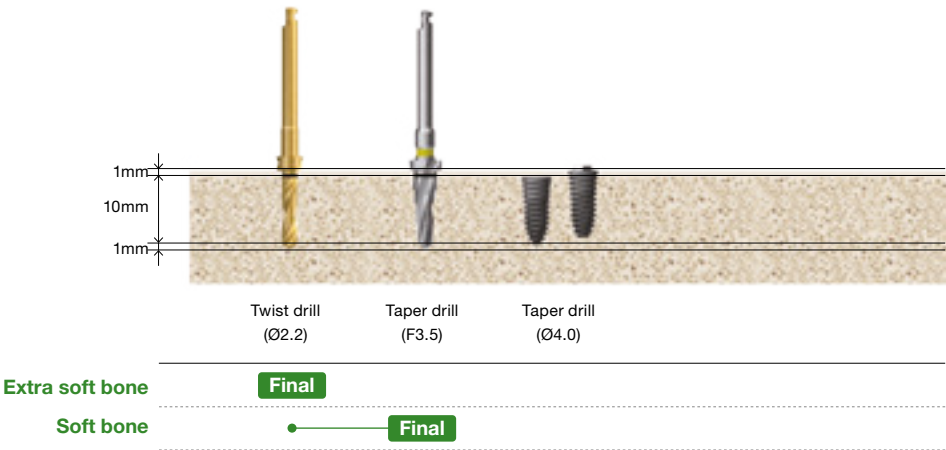
Hard bone Use nominal drill and taper cortical drill

Since bone quality is hard, use a F5.0 taper drill and afterwards the F5.0 taper cortical drill as final drill to prevent osteonecrosis and over-torque.

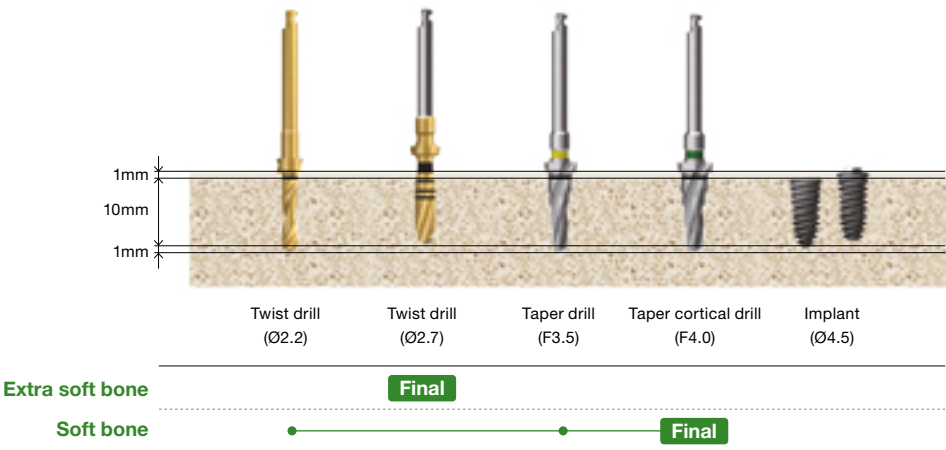


Quick Guide | TSIV, USIV (Length: 10mm)

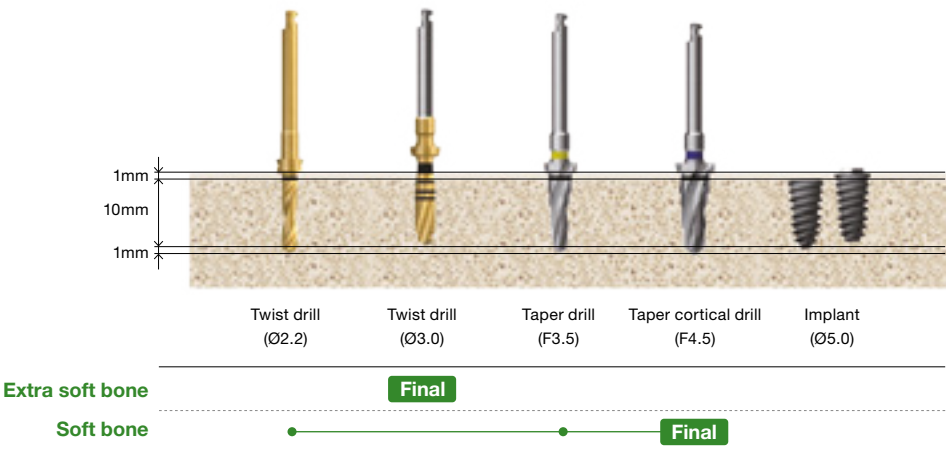
Ø4.0×10mm implant placement



Ø4.5×10mm implant placement



Ø5.0×10mm implant placement



How to take care of the KITS

1



Soak (saline/distilled water)

- Soak the surgical instruments in saline or distilled water

2



Drying (remove moisture)

- Completely dry all drills, drivers, tools, etc by using a towel or fan.

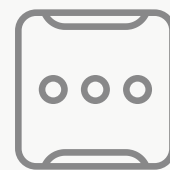
3



First wash

- After surgery, immediately separate and wash all the used instruments.

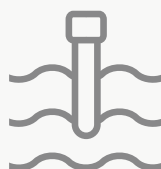
4



Organize instruments in the KIT

- Place the completely dried instruments in the KIT
- Make sure they are properly placed in the correct location
- Refer to the color coding for reference

5



Second wash

- Thoroughly wash with distilled water or running water to avoid remnants of blood or foreign debris.

6



Sterilization and storage at room temperature

- Wrap clean kit in a sterilization wrap or pouch and place into sterilizer.
- Sterilize temperature - 121°C to 132°C, time duration 15 - 30 minutes, dried and stored at room temperature.
- KIT re-sterilization is recommended immediately before surgery.
- Before and after sterilization, thoroughly dry (the drills will corrode if not fully dried after sterilization)

Important Information and Legal Notices 2026.03 ver.1.1

1. IMPORTANT NOTICE

This catalogue is intended solely as an informational and educational guide for trained dental professionals. It does not replace the applicable Instructions for Use (IFU), product labelling, formal clinical training, treatment planning, or independent professional judgment.

All clinical protocols, drilling sequences, cleaning instructions, sterilization requirements, torque recommendations, indications, contraindications, warnings, and procedural steps must be verified against the current product-specific IFU and the applicable product label for the relevant REF/product code prior to use.

In the event of any discrepancy between this catalogue and the applicable IFU, product labelling, or other official Osstem documentation, the IFU, labelling, and official product documentation shall prevail.

2. PRODUCT INFORMATION, CHANGES, AND AVAILABILITY

All products, specifications, protocols, recommendations, illustrations, and other information contained in this catalogue are subject to change without prior notice.

Not all products may be approved, cleared, released, licensed, or otherwise available in all markets. Product availability, indications, and regulatory status may vary by country. For information on the current product portfolio, approved indications, and local availability, please contact your local Osstem representative or Customer Service and consult the current official Osstem documentation.

3. PROFESSIONAL USE ONLY

Osstem Implant products are intended for use by appropriately trained dental professionals only. Dental implant treatment involves complex professional procedures and requires appropriate education, clinical training, patient selection, treatment planning, and radiographic as well as clinical evaluation.

The suitability of any procedure must be assessed individually for each patient, taking into account anatomy, bone quality and quantity, occlusion, systemic conditions, oral hygiene, compliance, and any other relevant clinical factors.

4. PRODUCT DESCRIPTION AND COMPATIBILITY

Osstem Implant offers implant fixtures, prosthetic components, surgical instruments, and related materials for dental implant treatment. Product codes, specifications, lot numbers, dates of manufacture, and expiration dates, where applicable, must be checked on the product label before use.

Unless expressly stated otherwise in the applicable product documentation, Osstem Implant abutments, prosthetic components, instruments, and related accessories are intended to be used only with compatible Osstem Implant fixtures and components. Use in combination with components or instruments from other manufacturers may result in improper fit, incomplete locking, loosening, fracture, reduced performance, or other clinical complications.

5. STERILITY, CLEANING, REPROCESSING, AND STORAGE

Sterile products supplied in sterile packaging must be used only if the packaging is intact and the expiration date has not passed. If sterile packaging has been opened, damaged, or has expired, the product must not be used.

Single-use products must not be reused, reprocessed, or resterilized.

Reusable instruments must be cleaned, disinfected, inspected, maintained, and sterilized strictly in accordance with the applicable Osstem IFU before reuse.

Products must be stored in accordance with the applicable labelled

storage conditions and protected from moisture, contamination, direct sunlight, and other adverse environmental conditions.

6. CLINICAL PROTOCOLS AND PROCEDURAL GUIDANCE

Any surgical, prosthetic, drilling, insertion, loading, cleaning, maintenance, or other procedural guidance shown in this catalogue is provided for general informational purposes only and must be adapted to the individual patient, the specific product, and the current approved IFU.

Clinicians remain solely responsible for selecting the appropriate treatment protocol and for determining whether the intended procedure, component selection, loading protocol, and clinical application are appropriate for the individual case and within the approved indications for the relevant product.

7. WARNINGS, CONTRAINDICATIONS, AND POSSIBLE COMPLICATIONS

Improper patient selection, inadequate treatment planning, non-compliance with the applicable IFU, improper use, off-label use, product modification, poor oral hygiene, infection, insufficient bone quality or quantity, excessive occlusal loading, or other unfavorable clinical conditions may result in complications or treatment failure.

Possible complications and adverse events may include, without limitation, implant instability or failure, loosening, fracture, bone loss, infection, soft- or hard-tissue complications, prosthetic complications, delayed healing, or the need for revision or removal.

Contraindications and precautions must always be assessed in accordance with the applicable Osstem product documentation and accepted professional standards of care.

8. INTENDED PURPOSE

The products are tools and instruments for surgical placement of Osstem implant fixtures. The drill is used to make implant sites. The cortical drill and tap removes cortical bones or forms threads on bone for the purpose of preventing excessive torque generated when implanting a fixture on hard bone. The drivers are for the placement of the fixture, and the prosthesis is used for setting. In addition, other instruments and tools will be used as aids in the Implant procedure.

The applicable product-specific IFU must always be consulted to confirm the intended purpose, indications, limitations, and approved clinical applications of the relevant product.

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10. ILLUSTRATIONS AND EXAMPLES

Product illustrations, diagrams, radiographic examples, case images, and step-by-step demonstrations are for illustrative purposes only. Unless expressly stated otherwise, they are not shown to scale and do not guarantee any clinical outcome.

Example cases do not constitute a promise or representation of treatment success in any individual case.

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Important Contact Information



International HQ

Osstem Implant Co., Ltd.
3, Magokjungang 12-ro, Gangseo-gu
Seoul 07801, Republic of Korea

☎ +82-2-2016-7000

☎ +82-2-2016-7001

🌐 www.osstem.com



European HQ

Osstem Implant s.r.o.
Radlická 740/113c
158 00 Prague, Czech Republic

☎ +420-296-238-800

✉ info@osstem.eu

🌐 www.osstem.eu



Hiossen HQ

Hiossen Implant Inc.
85 Ben Fairless Drive, Fairless Hills
PA 19030, USA

☎ +1-888-678-0001

✉ master@hiossen.com

🌐 www.hiossen.com



Osstem Pharma HQ

Osstem Pharma Co., Ltd.
123, Gasan digital 2-ro, Geumcheon-gu
Seoul 08505, Republic of Korea

☎ +82-70-5118-0330

☎ +82-70-4369-1930

🌐 www.osstempharma.com



Osstem Orthodontic HQ

OSSTEM Orthodontics Inc.
13, Ojeongongeop-gil, Uiwang-si
Gyeonggi-do 16072, Republic of Korea

☎ +82-31-477-9902

☎ +82-31-477-9904

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