Editor' Comments:

I think, author(s) should be encouraged regarding the recommendations mentioned below.

1. Description of the clinical and laboratory application sequences is not clear and reproducible. They are recommended to clarify in details just as a cookbook manner. Description should permit to reproduce the treatment protocol by readers.

2. Screw retained provisional restoration has been described as manufactured on a cementable abutment. Rationale of this application is recommended to clarify. Mentioned procedure might be simpler and safer by using a provisional abutment from PEEK material.

3. The term "stock abutment" does not match with the internationally approved terminology. Replacement with a proper term is recommended.

4. Duplication of the temporary restoration by using a putty silicone key couldn't be understood. Detailed description is recommended. Photographic representation of these steps is not able to support the text. Renewal of these photographs is recommended.

5. Polymerization of the light cured resin composite material in a putty elastomeric key (which is not transmitting light), is recommended to clarify.

6. Sentences of intro and discuss sections are recommended to support with proper references.

7. Material info is generally lacking and not matching with internationally approved scientific writing style. Trademarks are recommended to provide within parentheses just next to the material type with name of the manufacturing company, city and county. Exp:restored with light cured resin composite (Tetric N Ceram, Ivoclar-Vivadent, Schaan, Liechtenstein).

8. The final paragraph objecting Bio-Col technique is looking like a last-minute inclusion to the text. It is recommended to alloy properly to the intro and discuss sections.

9. Photographic representation of the MS is lacking. Dimensions are not identical, composition has not center the object, resolutions are low and the photographs of most of the application phases are missing. Regarding these problems; photographs are recommended to prepare again.

Author's feedback:

1. Description and treatment protocol and procedure is very much cleared in the text. Kindly read again and co-relate as a prosthodontics procedure.

2. In the case report titanium abutment is used, core build up is done by acrylic and modified in the shape of tooth.

Peek material or composite are the alternative material.

3. Replacement with a proper term is recommended – stock abutment is replaced by titanium abutment.

4. Silicon key is not required to duplicate the temporary crown. Silicon key is required to record the contour of the crown so fabricate customised closed ray impression copings.

5. Light cure composite resin is used to filled the space in putty elastomeric key, composite is in direct approach laser. So light transmission through elastomeric key in not required.

6. Enough references have been quoted for introduction and discussion part.

7. I will do the needful changes in the revised manuscript.

8. I was asked by the reviewer only to add it in the discussion part otherwise bio-col technique is not required here as bio-col technique is for removal prosthesis and in this case report we are talking about emergence profile by fixed prosthesis.

9. all the photograph are of same size except the radiographs and ISQ measurement which cant be reshaped.