



Dr: _____ Phone: _____

Account: _____ Patient: _____

Location: _____ Deliver by 5 pm on: _____

ENCLOSED WITH CASE:

Impression Models Bite Photos Other _____

R_x

UPPER LOWER
 FULL ARCH PARTIAL ARCH

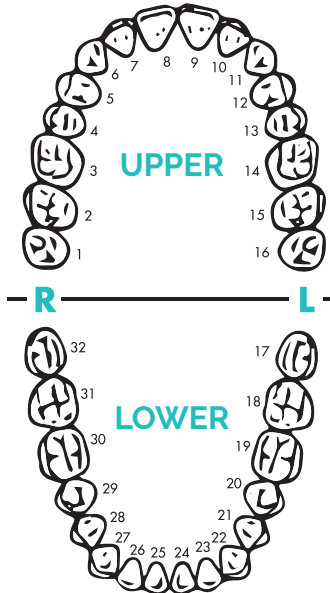
IMPLANT SYSTEM _____

ABUTMENTS EMERGENCE PROFILE



ACCESS HOLES ON FACIAL

- Call Doctor
- No Call Needed
- Provide Angle Correcting Abutments.
(Extra Charge Applies)



SELECT IMPLANT PROSTHESIS

- Elite Titanium
Abutment / Zirconia
Crown / Screw Ret
- Custom Milled Titanium Bar
- Set Teeth Back on Bar in Wax
- Full Contour Zirconia Implant Prosthesis
(Stain and Glaze Gingiva)
- Full Contour Zirconia Implant Prosthesis
(Gingiva Cutback)
- Layered Zirconia Implant Prosthesis
- Elite Zirconia Hybrid
- Pre - Surgical Milled PMMA
- Printed Bite Registration
- Printed Surgical Guide
- Pre Zirconia Denture Setup
- PMMA Implant Provisional
(Precision - Milled PMMA with Tooth
and Gingival Layered Tissue)
- Hard/Soft Night Guard
- Copy intaglio of Temporary
- Copy intaglio of Model

Signature _____

License# _____