

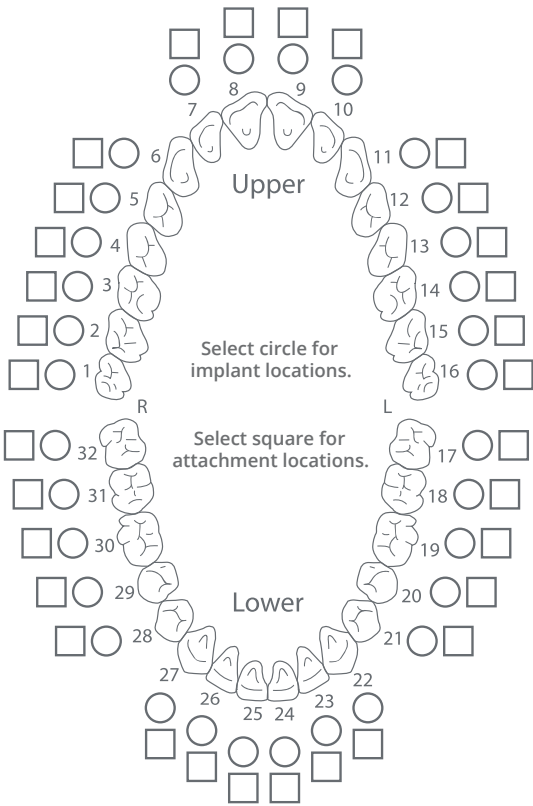
***SHIP TO:**

DENTIST: _____
LABORATORY: _____
PATIENT: _____
DATE CASE SHIPPED: _____
***CONTACT:** _____
EMAIL: _____
PHONE: _____
RETURN DATE: _____

IN-LAB PROCESSING DAYS: From STL file: Metal – 2 days | Ceramic – 3 days | From model: Metal – 7 days | Ceramic – 8 days
NOTE: when sending STL files, include xml file (preferably without screw holes) and choose implant system and size.

***ALL FIELDS WITH AN ASTERISK (*) ARE REQUIRED OR YOUR CASE MAY BE DELAYED.**

***CASE DESIGN INFORMATION**



PLEASE INCLUDE THE FOLLOWING ITEMS:

- Master Implant Model (fit verified)
- Diagnostic Set-Up or Wax-Up
- Removable Tissue
- Labial Matrix (optional)
- Acrylic Prototype Bar (for copy mill only)

***IMPLANT SYSTEM:** (WRITE IN TYPE, SIZE & QUANTITY)

- Astra Tech _____
- BioHorizons® _____
- Biomet 3i® _____
- Implant Direct _____
- Nobel Biocare™ _____
- Straumann® _____
- Zimmer® _____
- Camlog _____
- Other _____

Screws Supplied at an additional cost?

- Yes No *If there is no selection made, screws will not be sent
- Polish Exposed Metal for Additional Fee

***MATERIAL TYPE:**

- Titanium Chrome-Cobalt Zirconia

***BAR TYPE**

FIXED PROSTHETIC BAR: (SELECT ONE)

- Wrap Around Bar
- Hybrid Bar w/Metal Tissue Side
- Hybrid Bar w/Metal Lingual & Tissue (must provide acrylic prototype)
- Hybrid Bar w/Hygenic Tissue Side
- Free Shape Milled Bar
- Hybrid Bar w/Metal Lingual
- Copy Mill

REMOVABLE PROSTHETIC BAR:

- Dolder Egg Shape
- Dolder U Shape
- Canada Bar
- Round Bar
- Hader Bar
- Primary Bar
 - Buccal Angle: ____°
 - Lingual Angle: ____°
 - (angles from 0° to 10° by .5° steps)

ATTACHMENTS:

- Hader Clips & Housings - Qty: _____
- Bredent - Qty: _____
- Locator - Qty: _____
- Rhein 83 - Qty: _____

ENCLOSED WITH CASE:

- Opposing Model
- Die
- Working Model
- Impression
- Study Models
- No. of Units
- Bite _____

BAR DETAILS:

Extension Length: ____ mm | Distance from Tissue: ____ mm | Orolingual Thickness: ____ mm | Bar Height: ____ mm

SPECIAL INSTRUCTIONS: _____

DUE DATE: _____

PROMO CODE: _____

SIGNATURE: _____

DATE: _____