

Implant Case Rx Form

PLEASE SEND:

□ Rx forms □ Boxes □ Mailing labels

A R C A R I	Doctor's Account #			P	hone ()	-		
DENTAL LABORATORY	Dr		Please Write Clear	ly				ENCLOSURES (I	_ab use only)
20 A Del Carmine, Wakefield, MA, 01880	Patient	First Name		/		Last Name		□ Analog	□ Bite
Phone 800-433-9833 Fax 949-955-2199 Email: shade@keatingdentalarts.com	Date Due In Office	//	/	Age	Sex			☐ Models☐ Implant parts	□ Shade tab □ Other

ABUTMENT SELECTION

□ Stock Titanium Stock Zirconia UCLA Custom Abutment □ UCLA Custom Abutment with tooth colored porcelain outer surface CAD/CAM (Atlantis, Encode, Nobel Procera, etc.) Material:
Titanium
Gold Hue
Zirconia

ABUTMENT MARGIN DEPTH (Subgingivally)

Default values will be used, if not specified.		
Mesial	_ (Default is 1.3 mm*)	
🗆 Distal	(Default is 1.0 mm*)	
🗆 Lingual	(Default is even with tissue*)	
Buccal/Facial _	(Default is 1.5 mm*)	

ABUTMENT TRANSFER INDEX (always provided with zirconia abutments)

Provide abutment transfer index with this case Do not provide an abutment transfer index

PROVISIONALIZATION

Provide custom abutment and anatomical provisional Provide Essex Bridge (Back-filled, suck-down type bridge from diagnostic wax-up) □ Provide immediate placement screw-retained provisional crown □ Provide immediate placement screw-retained custom healing abutment

SOFT TISSUE GRAFT

□ No graft planned □ Site has been grafted (Expect _____mm recession) □ Site will be grafted (Expect _____mm to be grafted)

IMPLANT PORCELAIN CONTOUR

\frown	\sim
XX	XX

□ Hygenic □ Natural Emergence □ 1/2 Pontic Ridge Lap

GINGIVAL COUNTOUR OF ABUTMENTS/CROWNS

□ No blanching of soft tissue

Blanching (Tissue returning to normal within 5 mins)

□ Natural emergence width (Doctor will sculpt tissue or use a releasing incision)

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SHADE INSTRUCTIONS

Vita-Lumin:	
Noritake:	
Vita-3D:	

STENT/TEMPLATE, POLISHED CLEAR ACRYLIC FROM DIAGNOSTIC WAX-UP

Radiographic Stent

□ Fill 2.0mm pilot hole with barium sulfate/silicone mixture	Э
□ Place radiographic opaque tooth at proposed implant si	ite
Place radiographic markers for CBCT	
Surgical Stent	

□ Provide ideal placement 2.0mm pilot holes.

□ Retain only the buccal / lingual (circle one) at implant site

□ Bone graft clear suck-down stent from diagnostic wax-up of ideal ridge

DOCTOR'S COMPONENTS SENT WITH CASE

Please	indicate	quantity

Impression coping w/screw _Waxing sleeves Analog Abutments _Abutments screws

 Drivers	
Other	

TYPE OF RESTORATION

PFM– White high-noble	⊡Katana ML™
PFM– Semi-precious*	□ Zirlux 16®
□ Captek™	□ IPS e.max®
Full-cast yellow high-noble	□ BruxZir 16 [®]
□ Full-cast yellow semi-precious	

□ Metal try-in

TYPE OF FINAL RESTORATION

Cement-retained crown and bridge □ Screw-retained crown and bridge with occlusal access holes □ to be cemented in lab □ Overdenture

CLINICAL CHECKLIST

Implant manufacturer and type		
Platform size	length	
PA or bite wing		
□ Surgeon's letter		
Provisional shade		



Signature:
License #: