

Implant Laboratory Design RX

1. Pt Name: _____ Dentist: _____

2. Patient Appt Date & Time: _____

3. Abutment Options



Custom Titanium



Hybrid Abut(Zirconia)



Ti-Base



Stock Abutment

4. Implant Brand: _____

Implant Platform Size: _____



Gold-Hue

5. Crown Type (Circle One)

Screw Retained
Cement Retained

Emax Full
Emax Layered
Temporary

Full Contour Zirc
PFZ Layered Zirc
PFM
Fullcast

6. Shade: _____

Instructions: _____

See Design Options on Back



License No: _____ Date: _____

Signature: _____

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Abutment Design (Optional)

(Default for All= 1mm)

Sub Gingival Margin Depth:_____ Buccal/Facial:_____
Lingual:_____Mesial:_____

Interocclusal Clearance: _____ (Default =2.5mm)

Margin Style:
Shoulder_____ Chamfer_____ Feather_____