

Dentist _____ Invoice Name _____
 Invoice Address _____ Suburb _____ Postcode _____
 Tel _____ Email _____
 Patient ID _____ Date _____
 Patient ID - Please do not use patient's name unless consent is provided, and appropriate form/s have been completed.

BATCH # (Office only)

New Case Continuation/Remake Account Number
 Work Required by Day Month

PROSTHESIS TYPE

- Crown
- Removable overdenture
- Bridge
- Locator
- Hybrid
- Bar & clip

SHADE

- Images to be emailed



COMPONENT SUPPLIER

- Lab (default)
- Dentist

IMPLANT

System: _____
 For turnaround times please refer to price list.

Teeth	18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
Platform Diameter																
Teeth	48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38
Platform Diameter																

COMPONENT TYPES

- Genuine Parts
- Generic Parts

SINGLE TOOTH IMPLANT BUNDLE (Incl. of soft tissue model, analogue, screw, abutment and crown)

Please tick all relevant fields below

- STEP 1** **SCD Implant Bundle**
 (GENERIC COMPONENTS)
 (Incl. custom-milled abutment,
 Australian Made not available)

OR

- Genuine Implant Bundle Types: (BRANDED COMPONENTS)**
 AUSTRALIAN MADE (Incl. genuine CAD Ti or custom-milled Ti/Zirconia on Ti abutment)
 Straumann MIS Implant Direct TRI Dental SCD Range only

- STEP 2** Screw-Retained OR Cement-Retained

With Zirconia on Ti-Abutment
 OR
 Ti-Abutment

- STEP 3** PFM (non-precious alloy incl., other alloys not available)
 IPS E.MAX®
 Lab to assess and advise.

- FMZ (Monolithic Zirconia) PFZ (Porcelain-Fused to Zirconia)
 VITA Enamic® UTZir

SCREW-RETAINED *If Range has not been selected it will default to SCD Range

- SCD Range Quest Range

Restoration Type

- PFM All-ceramic
- Non-Precious FMZir - Fully Monolithic Zirconia
 - Semi-Precious^{^+} UZir - Ultra Translucent Zirconia
 - High-Precious⁺ PFZ - Porcelain-Fused-to-Zirconia
 - Ti IPS e.max®
 - Genuine Cast Other _____
 - Custom -Milled Ti*

(*default)
[^] SCD Range only
⁺ Genuine Components only

Alternative screw variations

- (You will be advised if any limitations apply)
 Cross screw Angled Screw Channel

CEMENT-RETAINED *If Range has not been selected it will default to SCD Range

- SCD Range Quest Range

Restoration Type

- PFM All ceramic
- Non-Precious FMZir - Full Monolithic Zirconia
 - Semi-Precious[^] PFZ - Porcelain-Fused-to-Zirconia
 - High-Precious IPS e.max®
 - [^] SCD Range only Composite
 - Other _____

Abutment type (choose either custom or genuine components)

- Custom-milled Genuine Preformed:
- Ti Cast (specify alloy) Ti
 - Zir on Ti Base PFM default. Same alloy as PFM unless specified otherwise. Zir

IMPLANT GUIDES

- Surgical
- Model-based
- Cone-beam-based
- Cone-beam-based including planning service
- Radiographic

FAST TRACK

- Insufficient occlusal clearance
 Adjust opposing and mark on the model

Screw retained - Buccal screw channel

- Change to cement-retained crown

MATERIAL ENCLOSED

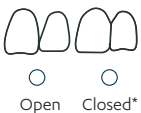
Please tick

	DR	SCD
Analog #	<input type="checkbox"/>	<input type="checkbox"/>
Abutment/Gold Adapt/Parts #	<input type="checkbox"/>	<input type="checkbox"/>
Screws #	<input type="checkbox"/>	<input type="checkbox"/>
Upper Impression.....	<input type="checkbox"/>	<input type="checkbox"/>
Lower Impression.....	<input type="checkbox"/>	<input type="checkbox"/>
Upper Model.....	<input type="checkbox"/>	<input type="checkbox"/>
Lower Model.....	<input type="checkbox"/>	<input type="checkbox"/>
Bite Registration (over prepared abutment).....	<input type="checkbox"/>	<input type="checkbox"/>
Previous C & B to return.....	<input type="checkbox"/>	<input type="checkbox"/>
Previous Study Models to return.....	<input type="checkbox"/>	<input type="checkbox"/>
Articulator.....	<input type="checkbox"/>	<input type="checkbox"/>
Denture.....	<input type="checkbox"/>	<input type="checkbox"/>
Crown/Bridge.....	<input type="checkbox"/>	<input type="checkbox"/>
Shade Tab.....	<input type="checkbox"/>	<input type="checkbox"/>
Voucher Attached #.....	<input type="checkbox"/>	<input type="checkbox"/>
Images to be emailed.....	<input type="checkbox"/>	<input type="checkbox"/>

ADDITIONAL INSTRUCTIONS

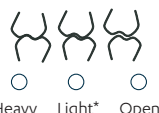
PROMO CODE

EMBRASURE

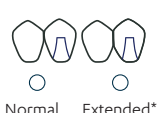


*Default

OCCUSAL CONTACT



PROXIMAL CONTACT



PONTIC CONTACT

