

PRESCRIBER AND PATIENT INFORMATION

Please complete this prescription form, include a copy of the surgical note & send in with your case. Please keep a copy for your files.

Cases will not proceed until ALL materials & information are provided.

Doctor's Name		
Address		
City	State	Zip
Phone	Email	
Patient's Name	Age Gender (M/F)	
Doctor's Signature		
License Number	Today's Date	
Final Tooth Shade	<input type="text"/>	
<input type="checkbox"/> Patient will call lab for custom shade appt.		

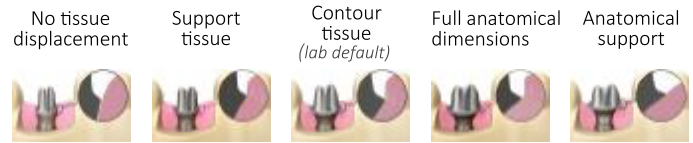
Implant Manufacturer, Type & Diameter	Tooth #	Margin Depths			
		B/F	D	M	L
Lab default margin depths		1.0	0.75	0.75	0.50

Please list the Implant manufacturer, type & diameter (i.e. Astra Tech EV 4.2, MIS Seven SP 4.2, Keystone PrimaConnex SD3.3, etc.) and tooth numbers of implants.

Lab defaults used if no abutment margin depths are indicated.

Emergency Profile Selection (circle one)

(Lab default used if no selection made)



Bundled Implant Abutment/Crown packages include:

- ✓ Custom designed & milled ATLANTIS Abutment
 - ✓ Custom designed & milled final restoration in your choice of materials
 - ✓ 2 Abutment screws per implant
 - ✓ ATLANTIS Warranty Card
- Printed models with analog can be added for an additional charge*

ATLANTIS ABUTMENT & CROWN SELECTION (Check applicable boxes)

ATLANTIS Titanium Custom Abutment

- ☐ Full Contour Zirconia crown
- ☐ Full Multi Layered Zirconia crown
- ☐ Porcelain Fused to Zirconia, PFZ
- ☐ Emax
- ☐ Gold Hue or Shaded

ATLANTIS Titanium Custom Abutment, Screw Retained

- ☐ Full Contour Zirconia crown
- ☐ Full Multi Layered Zirconia crown
- ☐ Porcelain Fused to Zirconia, PFZ
- ☐ Emax
- ☐ Gold Hue or Shaded

ATLANTIS Zirconia Custom Abutment

- ☐ Full Contour Zirconia crown
- ☐ Full Multi Layered Zirconia crown
- ☐ Porcelain Fused to Zirconia, PFZ
- ☐ Emax

Optional Items

- ☐ Custom Seating Guide
- ☐ ASA Driver for Angled Screw Channel
(Jig will not be sent on screw retained)



918-744-8885

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405-463-0573

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Notes

- ☐ Call to discuss