

Implant Rx

ATTN: _____ ACCOUNT#: _____

RX Date _____ Due Date _____

FOR DELIVERY BY 5PM.
NOTE: If no due date is assigned, a standard Westbrook due date will be applied.

DR. NAME/ADDRESS _____ PATIENT NAME (Please Print) _____

DR. PHONE _____ PATIENT APPT. DATE _____

DR. EMAIL _____ SEX: M/F _____ AGE: _____

SIGNATURE OF DENTIST (Required) _____ DENTIST LICENSE# _____

Person signing this authorization accepts sole responsibility for payment and agrees to pay all legal and collection costs in the event of suit, including reasonable fees. Pursuant to the provisions of Section 11, of the Texas State Dental Practice Act, This will authorize Westbrook laboratory to construct, alter or repair the restoration described on this requisition.

DESIRED ARTICULATOR Stratos 100 Acculiner Other _____

If no articulator is specified, our standard will be used.

Tooth #	Implant Brand	Platform Size	Depth of Margin Below Tissue

RESTORATION: Cementable Screw-Retained (1 piece)

PFM: White High Noble Noble Non-Precious

All-Ceramic: Porcelain to Zirconia Lava* Procera*

Full Metal Overdenture Hybrid

Temporaries

Lab to Order Parts Dr. to Supply/Order Parts

Call office w/ part #'s to order Order Parts on Dr. Account:

Implant Company: _____ Dr. Account #: _____

STOCK ABUTMENT: Titanium Zirconia

CUSTOM ABUTMENT:

UCLA UCLA w/ opaque

Procera: Zirconia Titanium

Atlantis: Zirconia Titanium

Have attended Misch Courses Follow Misch Protocol

METAL DESIGN



PLEASE SEND

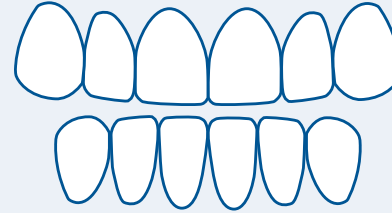
- Rx's
- FedEx Airbills
- UPS Airbills
- Boxes

FOR LAB USE

CHARACTERIZATION CHART

POSTERIOR OCCLUSAL

- Stain Color C-7 C-8 C-9 C-10
- Stain Placement S-1 S-2 S-3 S-4
- Hypo-Calcification H-5 H-6



ANTERIOR

- Translucency Intensity I-2 I-3 I-4
 - Translucency Volume V-5 V-6 V-7
 - Lobing L-8 L-9 L-10
 - Texture T-11 T-12 T-13
- STUMP _____
- SHADE _____

OCCLUSAL CLEARANCE

- In Occlusion
- Out of Occlusion
- Die Spacer on Opposing

FORM OF CROWN DESIRED

- Follow Study Model
- Match Existing
- Make Ideal

PINK PORC. TISSUE

- Light
- Medium
- Dark

- Bisque Try-In
- Metal Try-In
- Reduce Abutment/Send Red. Coping
- Reduce/Mark on Opposing
- Wax Check
- Seating Jig
- Finish

TEETH NUMBERS

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16
32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17

PONTIC DESIGN

- Ovate _____mm
- Full Lap
- Modified Ridge

INSTRUCTIONS

CALL ME (BEFORE PROCEEDING WITH CASE)

800.718.3384 · WestbrookDentalLab.com

ALL PRODUCTS MADE IN THE USA White-Lab Copy. Pink-Doctor Copy