

Laboratory _____

Patient _____

FIRST NAME

SURNAME

Date Received _____

Date Required _____

18 17 16 15 14 13 12 11

21 22 23 24 25 26 27 28

48 47 46 45 44 43 42 41

31 32 33 34 35 36 37 38



IMPLANT BRIDGES

Cobalt-Chromium Titanium

IMPLANT BAR

Cobalt-Chromium Titanium

CUSTOM ABUTMENTS

Tissue level NN RN WN

Bone level NC RC WC

Material Titanium

Zirconia shade White

SUBSTRUCTURES

Zirconia (Zerion) White

Co Cr (Coron)

Titanium (Ticon)

Polycon (Cast)



IMPLANT BRIDGES

Zirconia Titanium

IMPLANT BAR

Titanium only

CUSTOM ABUTMENTS

Titanium

Zirconia light

Zirconia medium

Zirconia dark

SUBSTRUCTURES

Alumina

Zirconin

Co Cr

Titanium



E-Max Blue

Empress

Telio CAD

Zir CAD

CAD On



AGC ELECTROFORMING

Coping



FULL CONTOUR

BruXZir

Im Coris 21

Cerec

Ti Bace 21 Abut



FULL CONTOUR

Vita Mark II / Trilux

Real Life

Emmic

SUBSTRUCTURES

Inceram

YZ



Precision Solutions

FULL CONTOUR

Lava Plus

Lava Ultimate

Sinfony

SUBSTRUCTURES

Lava Classic

Lava Plus

SPECIAL INSTRUCTIONS

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Please tick this box if you have further instructions on the reverse of this sheet