



Rx IMPLANT FIXED
 706 W. Broadway Blvd, #201,
 Glendale, CA 91204
 • 888-805-0808 • 747-268-0808
 smilespecialist@usdentallab.net

Dr. Name _____ Phone # _____
 Acct. # _____ Patient Name _____
First Last
 Address/Email _____ Deliver by 5 p.m. on _____
 Enclosed with Case: ☐ Impressions ☐ Models ☐ Bite ☐ Photos ☐ Other: _____

SHADE INSTRUCTIONS



Tooth No. _____

Final Shade _____

Occlusal Staining: ☐ Light* ☐ Med ☐ Dark ☐ None

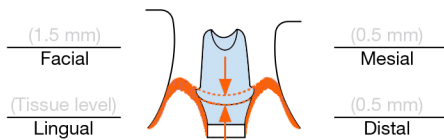
SELECT FINAL CUSTOM ABUTMENT

Choose Material Choose Abutment
☐ Titanium* ☐ Zirconia w/Ti-Base
☐ Gold-Colored Titanium ☐ Gold Alloy
☐ Prepare existing abutment

PARALLEL ABUTMENTS

☐ No ☐ Yes (indicate which abutments will have restorations splinted together for insertion)

ABUTMENT MARGIN DEPTH



If left blank, default values will be used

ABUTMENT EMERGENCE PROFILE



☐ Surgical placement ☐ Tissue displacement* ☐ No tissue displacement

BIOTEMPS PROVISIONALS

☐ Cementable ☐ Screw-Retained
 Reinforcement: ☐ None ☐ Wire ☐ Fiber
☐ Cast-Metal

SELECT RESTORATION TYPE

☐ Crown ☐ Splinted Crowns ☐ Bridge

CEMENT-RETAINED RESTORATIONS

☐ UniZir Full-Strength* (> 1,000 MPa) ☐ All-Ceramic
☐ UniZir Esthetic (870 MPa) ☐ Fused to Non-Precious
☐ IPS e.max (anterior) ☐ Fused to Noble
☐ IPS e.max (posterior) ☐ Fused to White High Noble

SCREW-RETAINED RESTORATIONS

☐ UniZir Full-Strength* (w/Ti-Base) ☐ Fused to Noble
☐ UniZir Esthetic (w/Ti-Base) ☐ Fused to White High Noble
☐ IPS e.max (w/Ti-Base) ☐ All-Ceramic (w/Ti-Base)

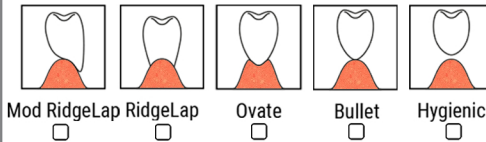
SCREWMENTABLE (cementable crown with screw-access hole over custom abutment)

☐ UniZir Full-Strength* ☐ IPS e.max
☐ UniZir Esthetic

CONTOUR AND OCCLUSION DESIGN

Embrasures: ☐ Closed* ☐ Open
 Occlusion: ☐ Light* ☐ Ideal ☐ Open _____ mm ☐ Out
 Contacts: ☐ Broad & Tight* ☐ Pinpoint ☐ Light

PONTIC DESIGN



ESSIX RETAINER

☐ Scan & Save (Fee Applies)
 Thickness: ☐ 0.8 mm ☐ 1.0 mm* ☐ 1.5 mm
 Essix Design: ☐ Standard ☐ Scalloped
 Palatal Coverage: ☐ Yes ☐ No

IF NO OCCLUSAL CLEARANCE

☐ Call doctor ☐ Spot opposing ☐ Metal occlusion
☐ Metal island ☐ Make this a permanent note in my master file

*Standard unless specified otherwise



Indicate implant system _____
 See reverse for Terms & Conditions

Indicate implant diameter _____ mm

☐ Please order all implant components for this case



*Discount cannot be combined with any other special offers. Case must include an implant-level or multi-unit abutment-level impression with a Universal HT transfer coping or a digital scan with a Universal HT scan body. Impressions over cementable abutments are not eligible for discount.
 For Terms and Conditions visit www.USdentallab.net

Signature _____

Submission of this Rx constitutes agreement with limited warranty terms and conditions. See reverse for details.

License # _____ Date _____

TERMS AND CONDITIONS

All Restorations Made in the USA



TERMS: Cost of collection of any account will be paid by the customer. All accounts are payable within 15 days of statement date. **Accounts not paid within the stated terms will be subject to COD status and a late charge of 3 percent of the unpaid balance.** \$59 NSF fee will apply for returned checks. Prices subject to change without notice. Rx must be enclosed with original case submission.

NO-FAULT REMAKE POLICY: USD Lab is pleased to process all remakes or adjustments at no additional charge if requested within the warranty period and accompanied by the return of the original appliance.

LIMITED WARRANTY/LIMITATION OF LIABILITY. For warranty terms and conditions and limitation of liability, visit www.USDentallab.net

All rush cases must be prescheduled by calling 747-268-0808 before the case is shipped. Time of pickup and delivery may affect turnaround time.

FLAT-RATE PRICE ON CUSTOM ABUTMENTS AND SCREW-RETAINED CROWNS IS AVAILABLE FOR THE FOLLOWING IMPLANT SYSTEMS

BIOMET 3i™
Certain®

CAMLOG®
SCREW-LINE

DENTSPLY Implants
ANKYLOS® C/X
ASTRA TECH IMPLANT SYSTEM®
ASTRA TECH IMPLANT SYSTEM® EV

Zimmer Dental
Screw-Vent®

HIOSEN®
HG System

MegaGen
AnyRidge® Implant System

Nobel Biocare
Brånemark System® RP
NobelActive®
NobelReplace®

Straumann®
Bone Level
Tissue Level

LIMITED WARRANTIES



- Custom Abutments



- UniZir Restorations



- All-Ceramic Restorations
- PFM Restorations