

REQUIRED INFORMATION:

Date: _____
 Due Back to Dr.: _____
 Shade: _____
 Restorative Dr.: _____
 Lic #: _____ Ph #: _____

Patient Name: _____
FIRST NAME

LAST NAME
 Age: _____ Gender: Male Female
 Referring Oral Surgeon: _____
 Check box if prepaid case
 Case #: _____

SHIP TO:

Practice: _____
 Ph#: _____
 Address: _____
 City: _____
 State: _____ Zip: _____

PHOTOS:

Email: ndxtwincitiesphotos@nationaldentex.com

PROTECTIVE NIGHT GUARD.***

Yes No

***Additional fee will apply.

Implant manufacturer: _____

Implant Information _____

OPTION 1: Denture Teeth & Acrylic

Upper Lower

- Step 1** (6 business days):
 - All-on-X Setup
- Step 2** (20 business days):
 - Bar Fabrication to Finish

*Note: OEM bar included for our Preferred Partners**

OPTION 2: Nano-Ceramic

Upper Lower

- Step 1** (6 business days):
 - All-on-X Setup
- Step 2** (24 business days):
 - Nano-ceramic to Finish

OPTION 3: Solid Zirconia

Upper Lower

- No Cutback**
- With Anterior Cutback**
- Step 1** (6 business days):
 - All-on-X Setup
- Step 2** (24 business days):
 - Zirconia Full Arch to Finish

PLEASE INCLUDE THE FOLLOWING RECORDS ALONG WITH YOUR COMPLETED RX FORM:

- Clear Duplicate Bridge with Temporary Copings Bite Registration Opposing Arch Analogs & Screws Post-Op Photos with LTP

Special Instructions: _____

Dentist's Signature: _____ Date: _____

**Preferred Partners:* BioHorizons[®], Dentsply Sirona, Keystone Dental, Neodent[®], Nobel Biocare[™], Straumann and Zimmer Biomet
 Business days do not include weekends, holidays or days in transit.

OPTION 4: Locator Abutment

Upper Lower

- Setup** (5 days)
- Finish** (5 days)
- Retention** Blue Pink Clear

OPTION 5: Conus Abutment

Upper Lower

- Setup** (5 days)
- Finish** (5 days) Frame and abutment fabrication

Notes