

Hybrid Laboratory Procedure Prescription

REQUIRED INFORMATION

Doctor name _____
Last First

Practice name / ID _____

Address _____

Phone _____

Patient name _____
Last First

Patient chart no. _____ M F Age _____

RX date _____

Due date/ Deliver case by 5 pm on _____ (standard working time if no date given)
Case turnaround times are based on the date the prescription is received at Treasure Dental Studio. Please allow 8 business days (M-F) between appointments. The milling of the bar will take up to 21 working days to complete after final approval of denture set up.

Implant System

- Nobel Biocare Zimmer Ankylos Astra Tech Other: _____
 Straumann Implant Direct Camlog Neodent GM/CM _____

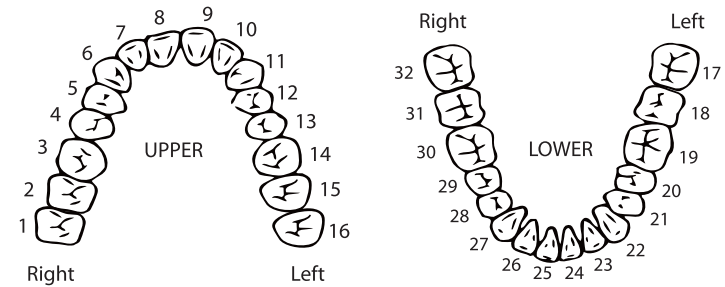
Diameter of Implant _____

Style of Implant _____

Appointment Scheduled

1. _____ Denture Duplication I Diagnostic Wax up
2. _____ Final Impression with Impression Posts
3. _____ Verification Jig and Wax Rims
4. _____ Wax Set up
5. _____ Process of Bar and Wax Set Up (**Allow 21 days**)
6. _____ Final Restoration
7. _____ Reset of one of the above {Mark the appropriate number}

CASE DESIGN



Surgical Guide:

Mark all teeth where Implants are to be placed

Hybrid Denture Acrylic Shade:

- Lt. Fiber Pink Lucitone Original Dk. MeHarry

Teeth Selection:

Shade _____ Mould No. _____

RX INSTRUCTION

Dentist signature*

Dentist license number

Send photos and emails to photos@TreasureDentalStudio.com