


Digital RX

PAN No.	CASE No.
 DUE DATE	TIME

DOCTOR NAME	Email	M/F
PATIENT NAME	Phone	SEX AGE

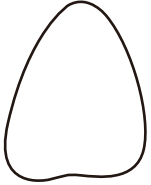
File Attached

- Max scan
- Mand scan
- Bite scan
- Study scan(Pre-op)
- Extra scan
- CBCT(Surgical guide)
- Implant Scanbody scan
- Whole folder
- Photos

Fixed Restoration

- TruZir shaded
- TruZir Layered
- E.max shaded
- E.max layerd
- PFM/PFC
- PMMA TruTemp
- PMMA Temp
- FGC

Shade



Occlusal Stain

- None
- Light
- Medium

Implant

Brand: _____

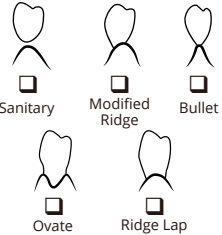
System/Size: _____

- Custom Abutment
- Ti
- Zr-Ti Hybrid
- Screw Retain(Ti-Base)
- Bar
- Fixed
- Removable

If, No occ clearance

- Adjust opposing
- Reduction & Mark
- Reduction Coping
- Metal Island
- Metal Occlusal

Pontic Design



- Sanitary
- Modified Ridge
- Bullet
- Ovate
- Ridge Lap

Digital Appliance

- Night Guard
- Anterior Guidance
- Canine Guidance
- Kois Night Guard
- Kois DeProgrammer

Digital Surgical Guide

Implant Brand & System

- Fully Guided
- Pilot Guided
- Fully Edentulous
- Email Screen shot

Digital Wax up

- Keep Original teeth
- Remove Original teeth
- 3D Model Print

INSTRUCTIONS

Rx

MEMO