



Facially Driven Workflow

Dr: _____

Address: _____

Patient: _____ M/F: _____

Phone: _____

Email: _____

Delivery by 5pm: ____ / ____ / ____ (10 in-lab days)

Bundle Options

Total Restorative (Non Printed) Bundle (NPIRFAP) ☐

Total Restorative (Printed) Bundle (PIRFAP) ☐

Total Surgical and Restorative (Non Printed) Bundle (NPIRFARGP) ☐

Total Surgical and Restorative (Printed) Bundle (PIRFARGP) ☐

À la Carte

NPIRSADTX Implant Treatment Plan ☐

NPIRDGO Guided - Design STL File - Per Arch ☐

IRDOSD InstaRisa Design Only (per arch)..... ☐
Includes the pre-surgical diagnostic design, InstaRisa design,
day of surgery 2 hour design finalization.

IRPSOD Pre Surgical Diagnostic Design - Design Only - (per arch)..... ☐

IRPOSOD Day of surgery 2 hour design finalization - Design Only (per arch)..... ☐

IRAF InstaRisa Alignment Fee - Per Arch..... ☐

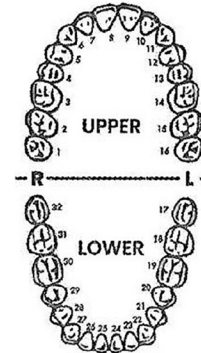
IRHBISBRXR Zirconia Final Prosthesis..... ☐

IRHNG Night Guard ☐

NPIRSADDSGBR Guided - Designed Guide STL File Only (per arch)..... ☐

IRPSD Guided - Capture® Stackable Guide System (per arch)..... ☐
Includes 4 implant sites, additional sites are \$147 each

IRISPMMAHB PMMA Prototype (48 hour loading)..... ☐



- ☐ Call Doctor
- ☐ No Call Needed
- ☐ Provide Angle Correcting Abutments
(Extra Charge Applies)
- ☐ Upper
- ☐ Full Arch
- ☐ Lower
- ☐ Partial Arch

Notes:

Implant System: _____

Gingiva Shade: _____

Tooth Shade: _____

Signature: _____

License #: _____