



Dr: _____ Phone: _____
 Address: _____ Email: _____
 Patient: _____ M/F: _____ Delivery by 5pm: ____/____/____ (10 in-lab days)

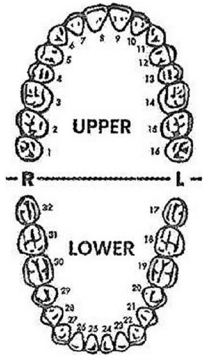
Bundle Pricing - Per Arch

Implant Treatment Plan
Treatment Plan Review
InstaRisa Fee
Diagnostic Wax Up Design
PMMA Prototype (48 hour loading)
PMMA Final Setup Try In
Zirconia Final Prosthesis
Night Guard

	Non-Printed	Printed
Billing Code	<input type="checkbox"/>	Billing Code <input type="checkbox"/>
Billing Code	<input type="checkbox"/>	Billing Code <input type="checkbox"/>
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À la Carte

- InstaRisa Design Only (per arch)
 Includes the pre-surgical diagnostic design, InstaRisa design, day of surgery 2 hour design finalization.
- Pre Surgical Diagnostic Design - Design Only - Per Arch.....
- Day of surgery 2 hour design finalization - Design Only - Per Arch...
- InstaRisa Alignment Fee - Per Arch.....
- InstaRisa Auxiliary Alignment Fee - Per Item.....
- Guided - Designed Guide STL File Only - Per Arch.....
- Guided - Capture® Stackable Guide System -PerArch.....
 Includes 4 implants sites, additional sites are \$147 each
- Plan B - Immediate Denture-PerArch.....



- 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 #: _____