

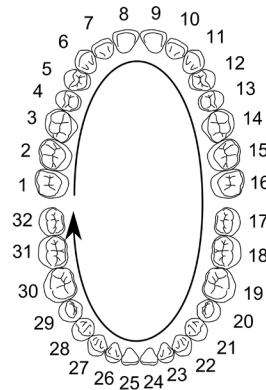


Custom Tissue Former Order Form

Doctor Name: _____
 Practice Name: _____
 Address: _____
 City: _____ State: _____ Zip: _____
 Phone: _____
 Email: _____
 Patient Name: _____

Follow the steps below to order a Custom Tissue Former. Send this form in with your case and RX. An online version of this form can be found at www.pittmandental.com/tissue-former or you can click on the QR code.

Step 1: Enter the tooth number



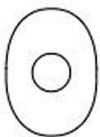
Online Order Form

Step 2: Enter the implant brand

Step 3: Enter the implant platform size

Step 4: Select a shape (Circle One)

Maxillary/Mandibular
Premolar/Mandibular
Canine



Maxillary Lateral/
Mandibular Incisor



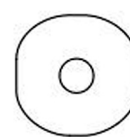
Maxillary Central



Maxillary Canine



Maxillary Molar



Mandibular Molar

