

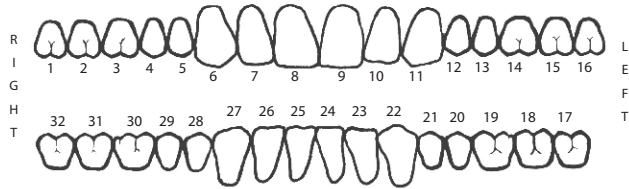
# NAKANISHI IMPLANT

Pan
Route

Doctor \_\_\_\_\_

Patient \_\_\_\_\_

Date \_\_\_\_\_



HAVE MANAGER CALL

SEND INSTRUMENTS

Restoration \_\_\_\_\_

### Due Date

Date
Appt. time
*Note: 5pm unless otherwise specified

#### ABUTMENT MATERIAL:

- Titanium CAD/CAM
- Gold Hue CAD/CAM
- Titanium Base
- Titanium stock
- Cast
- Zirconia stock\*
- Angled Screw CAD/CAM (not available on all platforms)
- Zirconia CAD/CAM\*

\*NDL recommends anterior only

#### CROWN MATERIAL:

- PFM \_\_\_\_\_ metal type  Metal OCCL
- FGC \_\_\_\_\_ metal type
- Zenostar/ZirCAD
- Lava Esthetic
- Layering to Zirconia
- e.max Press

#### SHADE

RECEIVED \_\_\_\_\_ Date \_\_\_\_\_ AM PM \_\_\_\_\_ CSR \_\_\_\_\_

### PRE-IMPLANT PLANNING

- DIAGNOSTIC WAX UP
- SINFONY REINFORCED PROVISIONAL: \_\_\_\_\_

### EMERGENCE PROFILE:

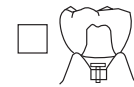
- Minimal Tissue Flare No Blanch
- Medium Flare Slight Blanch (default)
- Full Flare Surgical Seat
- Ridge Lap Crown

### INTERPROXIMAL EMBRASURES:

- Copy Adjacent Teeth (default)
- Fill Black Spaces

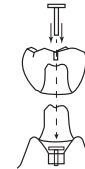
### CROWN DESIGN:

#### Cementable Crown



Any Abutment

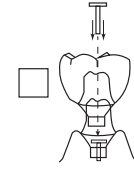
#### NDL Screw Access



Titanium CAD, Cast, or Stock TI Abutment

- Screw Access Only
- Bond In Lab

#### One Piece



Gold Cast UCLA

### CEMENT MARGIN POSITION:

- 1 mm Deep on Buccal, .5 Deep on Lingual (default)
- Other \_\_\_\_\_

### BUCCAL-LINGUAL OCCLUSAL TABLE WIDTH:

- Copy Adjacent Teeth (default)
- More Full Than Adjacent
- 2/3 Natural Width

Doctor's Signature \_\_\_\_\_ License No. \_\_\_\_\_

Doctor's Address \_\_\_\_\_ Phone No. \_\_\_\_\_



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