



17830 Clay Rd A103
Houston, TX 77084
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www.dentobytelab.com

Hybrid Laboratory Procedure Prescription

REQUIRED INFORMATION

Doctor name _____
Last First

Practice name / ID _____

Address _____

Phone _____

Patient name _____
Last First

Patient chart no. _____ M F Age _____

RX date _____

Due date/ Deliver case by 5 pm on _____ (standard working time if no date given)

Case turnaround times are based on the date the prescription is received at Treasure Dental Studio. Please allow 8 business days (M-F) between appointments. The milling of the bar will take up to 21 working days to complete after final approval of denture set up.

Implant System

Nobel Biocare Zimmer Ankylos Astra Tech Other: _____
 Straumann Implant Direct Camlog Neodent GM/CM _____

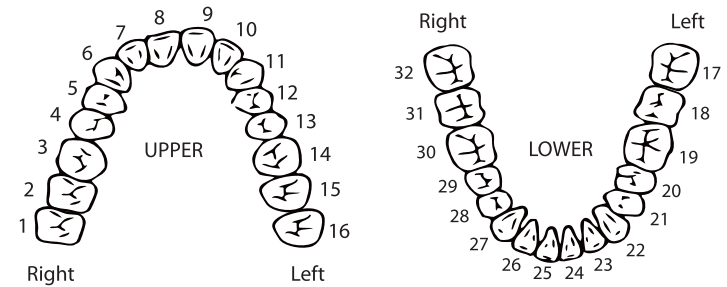
Diameter of Implant _____

Style of Implant _____

Appointment Scheduled

1. _____ Denture Duplication I Diagnostic Wax up
2. _____ Final Impression with Impression Posts
3. _____ Verification Jig and Wax Rims
4. _____ Wax Set up
5. _____ Process of Bar and Wax Set Up (**Allow 21 days**)
6. _____ Final Restoration
7. _____ Reset of one of the above {Mark the appropriate number}

CASE DESIGN



Surgical Guide:

Mark all teeth where Implants are to be placed

Hybrid Denture Acrylic Shade:

Lt. Fiber Pink Lucitone Original Dk. MeHarry

Teeth Selection:

Shade _____ Mould No. _____

RX INSTRUCTION

Dentist signature*

Dentist license number

Send photos and emails to jairum04@gmail.com