


Innovative solutions that make dentistry enjoyable!



STONEGLASS[®]
Industries

Scanning Request Application Form

Date:		Type of Appliance:
Company & Laboratory Name:		
Contact Person:		
Patient Name:		
Telephone No.:		
Materials		Abutments
<input type="checkbox"/> Zirconia		3i™ - Certain®
<input type="checkbox"/> Titanium		<input type="checkbox"/> Micro Mini <input type="checkbox"/> 4.1 <input type="checkbox"/> 5.1 <input type="checkbox"/> 6.0
<input type="checkbox"/> Plastic		3i™ - Hexed
<input type="checkbox"/> Non Precious (Tilite/NEM)		
Shade		<input type="checkbox"/> 3.4 <input type="checkbox"/> 4.1 <input type="checkbox"/> 5.0 <input type="checkbox"/> 6.0
<input type="checkbox"/> White <input type="checkbox"/> A1 <input type="checkbox"/> A2 <input type="checkbox"/> A3 <input type="checkbox"/> A3.5 <input type="checkbox"/> A4		Astra Tech Implant System™
<input type="checkbox"/> B1 <input type="checkbox"/> B2 <input type="checkbox"/> B3 <input type="checkbox"/> B3		<input type="checkbox"/> 3 (Titanium Only) <input type="checkbox"/> 3.5/4.0 <input type="checkbox"/> 4.5/5.0
<input type="checkbox"/> C1 <input type="checkbox"/> C2 <input type="checkbox"/> C3 <input type="checkbox"/> C4		Brånemark System® / Southern - Hexed
<input type="checkbox"/> D2 <input type="checkbox"/> D3 <input type="checkbox"/> D4		<input type="checkbox"/> 3.25 <input type="checkbox"/> Narrow <input type="checkbox"/> Regular <input type="checkbox"/> Wide
		Endopore®
		<input type="checkbox"/> 3.5 <input type="checkbox"/> 4.1 <input type="checkbox"/> 5.0
		ITI Straumann
Product		<input type="checkbox"/> Narrow Neck <input type="checkbox"/> Regular Synocta <input type="checkbox"/> Wide Synocta
<input type="checkbox"/> Single Coping	<input type="checkbox"/> 8 Unit Bridge	Replace® Select / Southern - Tri-Lobe
<input type="checkbox"/> 2 Unit Bridge	<input type="checkbox"/> 9 Unit Bridge	<input type="checkbox"/> Narrow <input type="checkbox"/> Regular <input type="checkbox"/> Wide <input type="checkbox"/> 6mm
<input type="checkbox"/> 3 Unit Bridge	<input type="checkbox"/> 10 Unit Bridge	ITI Straumann Bone Level
<input type="checkbox"/> 4 Unit Bridge	<input type="checkbox"/> 11 Unit Bridge	<input type="checkbox"/> RC <input type="checkbox"/> NC
<input type="checkbox"/> 5 Unit Bridge	<input type="checkbox"/> 12 Unit Bridge	MIS
<input type="checkbox"/> 6 Unit Bridge	<input type="checkbox"/> 13 Unit Bridge	<input type="checkbox"/> Medium <input type="checkbox"/> Wide
<input type="checkbox"/> 7 Unit Bridge	<input type="checkbox"/> 14 Unit Bridge	Zimmer® / Bio-Horizon
		<input type="checkbox"/> Narrow <input type="checkbox"/> Regular <input type="checkbox"/> Wide

PLEASE FAX COMPLETED APPLICATION FORM TO: (+61 2) 8756 5930

OR

**POST TOGETHER WITH YOUR CASEWORK TO:
UNIT 26, 11-21 UNDERWOOD ROAD HOMEBUSH NSW 2140 /or
PO BOX 1250 BURWOOD NSW 1805**

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