



RX Date:	Due Date:	<input type="checkbox"/> By 12pm	<input type="checkbox"/> By 5pm
-----------------	------------------	---	--

Patient Name:	Age:	Gender:
---------------	------	---------

CD of data enclosed

Note: Incomplete lab slip may delay your case

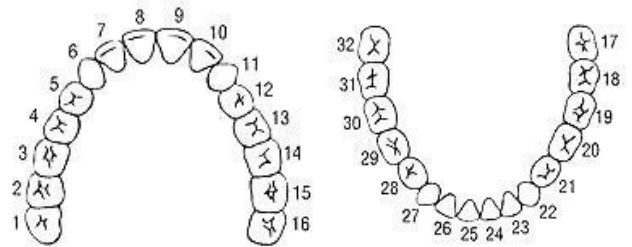
Specialist:	Specialist Phone #:	Specialist Email:
Restorative:	Restorative Phone #:	Restorative Email:
Billing Credit Card #:	Credit Card Expiration:	Security Code:

Surgical Treatment Plan:

- Flapped
- Flapless
- Immediate extraction + immediate implant placement only
- Immediate extraction + implant placement + immediate provisionalization:
 - Temporization
 - Conventional Immediate None
 - Shade: _____
 - Bite provided
 - Photos provided

Treatment Plan	<input type="checkbox"/> Call Doctor

Tooth #	Implant Type	Implant Length	Platform Diameter
<i>Ex: #8</i>	<i>Nobel</i>	<i>10mm</i>	<i>3.5mm</i>



Planning Assistance and Data Conversion:

- Diagnostic Wax-Up
- Software
 - 3i Navigator-iDent
 - 3i-Navigator-SimPlant
 - AstraTech/Facilitate-SimPlant
 - iDent
 - ILS-VIP
 - Keystone EasyGuide
 - Nobel Guide
 - SimPlant
- nSequence preferred software
- Scan Appliance
 - Scan Center: _____
 - Type of scan center machine used: _____
 - Phone: _____
 - Email: _____

Surgical guide from plan:

- Yes No Surgical instrumentation Type needed:
- Yes No Are you using the guide for primary drill sequence?
- Yes No Do you want to place implants through the guide?

Signature (approval) _____ Date _____



Fully Edentulous

1. Begin with a freshly relined denture or a new denture
2. Using a 1mm round drill, drill six (6) craters of 1mm in diameter (no more than 1.2 mm in depth on the tongue surface) equally spaced in the palate of the upper or the lingual of the lower. Compress a sphere of Gutta Percha into each of the six craters.
3. Remove any excess of Gutta Percha from the surrounding surface of the crater and cover with a thin layer of light cure acrylic.
4. Scan the patient wearing the CD* at .2 voxel for 20 seconds
5. Scan the denture alone on a Styrofoam box at .3 voxel for 10 seconds
6. On the computer, set up two different folders; one marked "Patient Scan" and the other marked "CD Scan"
7. Go to www.n-sequence.com. On the homepage, click the button that says "Send It" to upload your scan data to us.

The following must be sent to nSequence

- Computer disc of the scans
- Any opposing model, if any
- Check bite
- Completed lab slip with treatment plan

*Complete Denture

Partially Edentulous

1. Begin with upper and lower full arch VPS impressions
2. Bite registration of the patient
3. Using nSequence's Radiograph Registration Device* (referred to as "RRD"), reline with Clear Peppermint bite material on the occlusal surfaces in the mouth
4. Scan the patient wearing the RRD at .2 voxel -20 second protocol**
5. On the computer, set up a new folder using the patient's name (Pt. Name Scan Data.)
6. Go to www.n-sequence.com. On the homepage, click the button that says "Send It" to upload your scan data to us.

The following must be sent to nSequence

- Computer disc of the scan data
- Models
- Impression trays
- Bite registration
- RRD
- Completed lab slip with treatment plan

*Radiographic Registration Device

**If using i-CAT Classic, use .2 voxel-40 second scan

Scan Perimeters: PLEASE VERIFY QUALITY OF SCAN BEFORE SENDING WORK TO NSEQUENCE. REMOVE ALL JEWELRY OR REFLECTIVE METAL OBJECTS FROM SCANNING RANGE. THIS INCLUDES PIERCINGS, ELECTRONICS, LEAD APRON, AND OTHER METALLIC REMOVABLE OBJECTS WITHIN SCANNING RANGE.