

Renishaw LaserAbutment™ order form

Thank you for choosing Renishaw for the manufacture of your custom abutment. In order for us to minimise the manufacture time, please **complete** and **print** this form, **sign** and **date** it and return it using the prepaid postage label which is available at www.renishaw.com/dental. We also require the following:

- Waxed-up cast-to (UCLA) cylinder

NB: The wax up must represent the finished form of the custom abutment.

Your details

Lab name		Telephone no.	
Address		Email address	
		Contact	
		Prescription ref.	
Postcode			

Design information

Charting

Please indicate the location of each abutment unit with an **X**.

1								2							
18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38
4								3							

Implant systems

We aim to maximise the number of compatible implant systems and so the list is regularly updated. If completing this form electronically, please ensure you have downloaded the latest copy from www.renishaw.com/laserabutments.

Please indicate the tooth position(s) against the implant system(s) used in the table below.

OEM	Implant system	Pin type	Position
AstraTech	OsseoSpeed™ TX 3.5/4.0	AT	
	OsseoSpeed™ TX 4.5/5.0	AU	
Biomet 3i™	Certain® 3.4	VV	
	Certain® 4.1	WW	
	Certain® 5.0		
	Certain® 6.0		
	External Hex 3.4	UU	
	External Hex 4.1	BB	
	External Hex 5.0		
	External Hex 6.0		
BioHorizons	External 3.5	BW	
	External 4.0	BX	
	External 5.0	BY	
	External 6.0		
	Internal 3.5	BT	
	Internal 4.5	BU	
	Internal 5.7	BV	
Straumann®	Bone Level NC	AD	
	Bone Level RC	AE	
	Tissue level RN + synOcta® abutment*	AG	
	Tissue level WN + synOcta® abutment*	AH	

* Requires a Synocta® abutment - not currently available from Renishaw

The customer agrees that they are responsible for the design of the wax-up and that any damage caused during transit is also their responsibility.

All brand names and product names used on this form are trade names, service marks, trade marks or registered trade marks of their respective owners.

OEM	Implant system	Pin type	Position
MIS®	Internal Hex NP	BC	
	Internal Hex SP	BD	
	Internal Hex WP	BE	
	Conical Connection SP	BF	
	Conical Connection WP	BG	
Nobel Biocare®	NobelReplace™ NP	DD	
	NobelReplace™ RP	EE	
	NobelReplace™ WP	FF	
	NobelReplace™ 6.0	GG	
	NobelActive™ NP	AJ	
	NobelActive™ RP	AK	
	Brånemark System® NP	HH	
	Brånemark System® RP	AA	
	Brånemark System® WP	CC	
TBR	Morse Taper M 3.2	BH	
	Morse Taper M 3.9	BJ	
	Morse Taper M 4.7	BK	
	Internal Octagon 3.5	BL	
	Internal Octagon 4.0		
	Internal Octagon 5.0		
ZIMMER	Tapered Screw-Vent 3.5	BT	
	Tapered Screw-Vent 4.5	BU	
	Tapered Screw-Vent 5.7	BV	

A full list of Renishaw dental terms and conditions can be found at www.renishaw.com/laserabutments.

Signed:

Date: