

PATIENT

Name: _____

Address: _____

Zip Code / City: _____

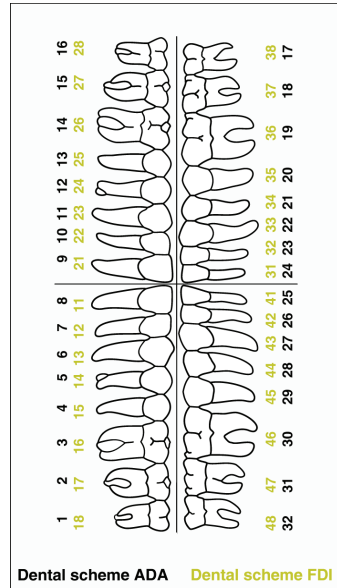
Country: _____

Phone: _____

E-mail: _____ @ _____

Date of Birth: _____

Health Insurance: _____



BIODENTA IMPLANT

Date of implantation: _____

REF: _____ [LOT]

Implant Type: Bone Level Bone Level Tapered
 Tissue Level

Diameter: 3.0 mm 3.5 mm 4.1 mm 4.8 mm
 6.0 mm Other: _____

Platform: B0 B1 B2
 NP RP WP Other: _____

Length: 6.5 mm 8.0 mm 10.0 mm 12.0 mm
 14.0 mm Other: _____

Surface: BST surface Other: _____

Position: ADA FDI

Sticker

DENTIST

Name / Clinic: _____

Address: _____

Zipcode / City: _____

Country: _____

Phone: _____

E-mail: _____

BIODENTA COMPONENT

Date of placement: _____

REF: _____ [LOT]

Article Name: _____

Sticker

Contact Data Dentist:

BIODENTA COMPONENT

Date of placement: _____

REF: _____ [LOT]

Article Name: _____

Sticker

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REF: _____ [LOT]

Article Name: _____

Sticker

Contact Data Dentist:

biodenta
we're all about teeth

swiss design

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Tramstrasse 16
CH-9442 Berneck
Switzerland
Tel +41 71 747 11 11
Fax +41 71 747 11 12

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emea@biodenta.com

AMERICAS (North & South America)
usa@biodenta.com

APAC (Asia & Pacific)
apac@biodenta.com

ver1-403

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Date of placement: _____

REF: _____ [LOT]

Article Name: _____

Sticker

Contact Data Dentist:

BIODENTA COMPONENT

Date of placement: _____

REF: _____ [LOT]

Article Name: _____

Sticker

Contact Data Dentist:

biodenta
we're all about teeth

TL / BL / TP

Implant Passport
Dental Implant System
Tissue & Bone Level & Bone Level Tapered