



# The Implant Learning Center

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## Surgical DVD Order Form

DVD	Group	Title	Price
1	A   D	Anterior Aesthetics	\$129
2	A	Immediate Extraction (Maxillary Canine) Implant Placement, Immediate Provisionalization Utilizing the Natural Tooth Shell as a Provisional	\$149
3	A	Immediate Extraction (Maxillary Central) Implant Placement, Immediate Provisionalization Utilizing a Stock Zirconia Abutment, Minimally Invasive Bone Grafting Techniques	\$149
4	A   D	Immediate Implant Placement and Provisionalization in a Maxillary Central Incisor Edentulous Site, With Minimally Invasive Bone Grafting and Dermal Matrix Correction of the Adjacent Natural Tooth Lacking Keratinized, Attached Tissue	\$169
5	E	Anterior Aesthetics: Immediate Implant Placement, Multiple Sites, TempStent II Surgical Guide	\$249
6	B	Puros® Block Allograft Surgical Techniques	\$169
7	B	Anterior Aesthetics and Puros® Block Allograft Techniques with Immediate Implant Restoration	\$199
8	C	Internal Sinus Lift Procedure	\$119
9	C   E	Bi-Lateral Sinus Elevations	\$199
10	C   E	Immediate Maxillary Full Arch Tooth Removal, Implant Placement (one-stage), Bone Grafting, Socket (sinus) Elevation and Full Arch Temporization	\$199
11	D	Full Mouth Dermal Matrix Grafting to Correct Advanced Gingival Recession	\$199
12	A   D   E	Immediate Tooth Removal, Implant Placement and Provisionalization with Allogenic Bone and Dermal Tissue Grafting	\$199
13		Practice Management: Case Presentation/Closure	\$199

**Buy one  
set from 6  
and SAVE!**

<b>Group A:</b>	Immediate Restoration in Anterior Aesthetics (DVD's 1, 2, 3, 4, 12)	\$755
<b>Group B:</b>	Allogenic Block Grafting (DVD's 6, 7)	\$350
<b>Group C:</b>	Sinus Elevation/Socket Lift (DVD's 8, 9, 10)	\$492
<b>Group D:</b>	Dermal Matrix Grafting (DVD's 1, 4, 11, 12)	\$642
<b>Group E:</b>	Multidisciplinary (DVD's 5, 9, 10, 12)	\$804
<b>Group F:</b>	<b>Entire Collection of 13 DVD's, at a 10% Savings!</b>	<b>\$2094</b>

**\*\*\* OVER 30 HOURS OF SURGICAL, PROVISIONALIZATION AND PROSTHETIC INSTRUCTION MATERIAL! \*\*\***

**PAYMENT INFORMATION**

Check enclosed    Credit card   Card type (circle one): Visa / Mastercard / American Express

Card # \_\_\_\_\_ Exp \_\_\_\_\_ Security Code \_\_\_\_\_

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Signature \_\_\_\_\_ Date \_\_\_\_\_

**CONTACT INFORMATION**

Name \_\_\_\_\_

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Set/DVD Qty.	x	Price	=	\$
# _____	x	\$ _____	=	\$
# _____	x	\$ _____	=	\$
# _____	x	\$ _____	=	\$
# _____	x	\$ _____	=	\$
# _____	x	\$ _____	=	\$
# _____	x	\$ _____	=	\$
# _____	x	\$ _____	=	\$
Subtotal				\$
S & H				\$ 24.95
<b>TOTAL</b>				<b>\$</b>