



South Africa - Headquarters 1 Albert Road, Irene, RSA
T: +27-12-667-1046 | E: info@southernimplants.com
W: SOUTHERNIMPLANTS.COM

**DENTAL IMPLANT** 

**ID CARD** 

Innovative Treatment Solutions

# The Dental Implant ID card is used to keep important information of your dental implant treatment.

Postal code: \_\_\_\_

### **Patient details**

Name: \_\_\_\_

Patient #: \_\_\_\_

## Surgical treatment details

Date of first surgical procedure:

Surgeon:\_\_

----

City/state: \_\_\_\_

Country: \_\_\_\_

e-mail:\_\_

### Instruction for use:

After providing dental implant treatment to your patient, send them home with this personal record of the implants and components placed during the procedures.

\_\_\_\_\_ Phone: \_\_\_\_

This easy to use document has spacing to place implant label stickers and write down information accompanying each Southern Implant component. This information is very helpful to the dental team treating the patient, facilitating the ordering of the correct components, and for future reference/record purposes.

Printed and electronic versions are available in English, Spanish, French, Italian, Portuguese and German.

place implant sticker here		place implant sticker here			
tooth #	date	tooth #	date		
UDI	place implant sticker here		place implant sticker here		
tooth #	date	tooth #	date		
UDI	place implant sticker here		place implant sticker here		
tooth #	date	tooth #	date		
	place implant sticker here		place implant sticker here		
tooth #	date	tooth #	date		
UDI	place implant sticker here		place implant sticker here		
tooth #	date	tooth #	date		
UDI	place implant sticker here		place implant sticker here		
tooth #	date	tooth #	date		
Notes:					

Temporary Abutments							
UDI							
REF	Tooth #						
LOT no: Do	ate:						
UDI							
REF	Tooth #						
LOT no: Do	ate:						
UD							
REF	Tooth #						
LOT no: Do	ate:						
וסט							
REF	Tooth #						
LOT no: Do	ate:						
וסט							
REF	Tooth #						
LOT no: Do	ate:						
UDI							
REF	Tooth #						
LOT no: Do	ate:						
LOT no: Do	ate:						
[REF]							
LOT no: Do	ate:						
LOT no: Do	are:						
	T						
LOT no: Dc							
	ano						
[REF]	Tooth #						
LOT no: Do							
	Tooth #						
LOT no: Do							
( DC							

Notes:

# Prosthetic treatment details

Please complete information from the label included with abutment packaging.

Restorative doctor		
City/state:		Postal code:
Country:	Phone:	
e-mail:		

Restorative Components				
UDI				
REF		Tooth #		
LOT no:	Date:			
UDI				
[REF]		Tooth #		
LOT no:	Date:			
UDI				
[REF]		Tooth #		
LOT no:	Date:			
REF		Tooth #		
LOT no:	Date:			
UDI				
[REF]		Tooth #		
LOT no:	Date:			
UDI				
REF		Tooth #		
LOT no:	Date:			
UDI				
REF		Tooth #		
LOT no:	Date:			
UDI				
[REF]		Tooth #		
LOT no:	Date:			
UDI				
REF		Tooth #		
LOT no:	Date:			
UDI				
REF		Tooth #		
LOT no:	Date:			
REF		Tooth #		
LOT no:	Date:			
UDI				
REF		Tooth #		
LOT no:	Date:			

### Changes in performance

It is the responsibility of the clinician to instruct the patient on all appropriate contraindications, side effects, and precautions as well as the need to seek the services of a trained dental professional if there are any changes in the performance of the implant (e.g., looseness of the prosthesis, infection or exudate around the implant, pain, or any other unusual symptoms that the patient has not been told to expect).

#### Pain Management & looking after your Implants Medication

Your surgeon will prescribe or recommend medication to assist in your pain management.

#### Diet

Following surgery, protect the implants by not disturbing the wound. Your surgeon will recommend a suitable diet, for example a soft diet for a few weeks. Good oral hygiene is essential to healing

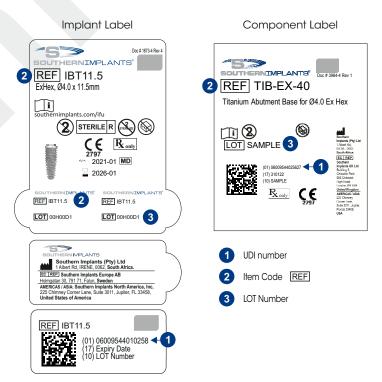
#### **Oral Hygiene**

Patients who have implants must commit themselves to a lifetime of stringent oral hygiene. This is to ensure that the gingival tissues surrounding the implant remain healthy, with no plaque accumulating around the implants, the prosthetic parts attached to them and around the teeth.

Follow the advice of your dental professional when it comes to regular checkups and professional teeth cleaning after your implant treatment. Ask your dental professional for personalized and detailed care instructions.

#### **Label Information**

Label information required to complete the Dental Implant ID Card can be found as set out below.



Notes: