



Adara Surgical Institute  
6505 226th Pl SE #100  
Issaquah WA 98027

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Tel: 425-332-5333  
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**"Reveal Your Inner Beauty"**

### Implant Questionnaire

\*\*\*Thank you for taking the time to complete the Implant Questionnaire. If you have already done this for your office, please fill out a new one. This will enable us to keep your preferences up to date. If you can return this form to our Practice Manager, we would appreciate it ([manager@adarasurgical.com](mailto:manager@adarasurgical.com)).

Please feel free to send any questions, concerns, or comments our way.

We appreciate your referrals and thank you for your time!

Name of Your Practice: \_\_\_\_\_

Name of Your Provider(s): \_\_\_\_\_

1. Which Implant brand is your preferred system? (Please rank in order of preference, 1 being your top preference)

\_\_\_\_\_ Nobel  
\_\_\_\_\_ Straumann  
\_\_\_\_\_ Zimmer  
\_\_\_\_\_ No Preference

2. Do you have any challenges with any of the implant systems above? \_\_\_\_\_

\_\_\_\_\_.

3. Do you need anything from us for the system? (i.e. Education, Impression Copings, Tools, etc.)

\_\_\_\_\_.

4. What is your preferred implant level impression?

\_\_\_\_\_ Digital Impression at Adara Surgical Institute  
\_\_\_\_\_ Digital Impression at your office  
\_\_\_\_\_ Manual Impression in your office

If you prefer Manual Impressions, we will help coordinate with the implant representative. If you have any difficulties, please let us know right away.

5. Do you have any questions about Digital Impressions taken in our office? (i.e. Workflow, the process, etc.)

\_\_\_\_\_.

6. What Lab do you prefer to use for implant restorations? This enables us to communicate with the lab, particularly for Digital Impressions)

Anterior Implant Lab Preference : \_\_\_\_\_

Posterior Implant Lab Preference: \_\_\_\_\_

7. Did you know we make custom healing abutments for ALL of our Implants? Do you have any questions or concerns about custom healing abutments? \_\_\_\_\_

\_\_\_\_\_.



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(Custom Abutment: This is a case 4 months after an immediate extraction with immediate implant placement and custom healing abutment. You can see how Papilla heights and gingival contour have been maintained throughout the healing phase. It can also help with long term bone maintenance by maximizing soft tissue quality and quantity.

8. Did you know we have a 3D printer in our office for making guides?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

9. Did you know we use dynamic, live navigation for precise implant placement?

\_\_\_\_\_ Yes  
\_\_\_\_\_ No

10. Do you have any implant questions or concerns that you would like to discuss with Dr. Dhaliwal? If so, please indicate how you would like to discuss your questions or concerns.

\_\_\_\_\_ Email  
\_\_\_\_\_ Phone Call  
\_\_\_\_\_ Lunch Meeting

11. How does your office prefer to be contacted?

Email(s) \_\_\_\_\_  
Phone \_\_\_\_\_