

DOCTOR: \_\_\_\_\_

DATE: \_\_\_\_\_

ADDRESS: \_\_\_\_\_

DATE AND TIME TO BE RETURNED

TYPE OF RESTORATION: \_\_\_\_\_

PATIENT'S NAME \_\_\_\_\_ AGE \_\_\_\_\_  M  F

SHADE: \_\_\_\_\_  SEE OVER STUMP SHADE: \_\_\_\_\_ MOULD: \_\_\_\_\_

**CROWN AND BRIDGE:**

**RESTORATION:**

- ZIRCONIA
- E.MAX PRESS®
- EMPRESS®
- PFM
- FULL GOLD UNIT
- POST AND CORE
- ACRYLIC (TEMP)
- STUDY WAX-UP

**ALLOY:**

- HIGH NOBLE
- YELLOW
- WHITE
- SEMI-PRECIOUS
- NON-PRECIOUS
- TYPE III
- TYPE IV
- SILVER PALLADIUM

**OCCCLUSION:**

- METAL
- BUCCAL CUSP
- LINGUAL CUSP
- ISLAND
- PORCELAIN
- FOIL RELIEF X \_\_\_\_\_
- POSITIVE CONTACT

**IF SPACE NEEDED:**

- TRIM OPPOSING AND IDENTIFY
- TRIM PREP AND IDENTIFY
- REDUCTION COPING\*

**DIE SPACER**

- YES
- NO

**MARGINS:**

- PORCELAIN BUTT MARGIN
- 360° BUTT MARGIN
- PORCELAIN TO MARGIN
- METAL COLLAR

**PONTIC**

- MODIFIED RIDGE LAP
- BULLET
- HYGENIC
- OVATE

**ATTACHMENTS: TYPE** \_\_\_\_\_

**IMPLANTS: BRAND** \_\_\_\_\_ **SIZE** \_\_\_\_\_

- CEMENT RETAINED
- SCREW RETAINED
- OCCLUSAL
- LINGUAL\*

\*EXTRA CHARGE

**DENTURE:**

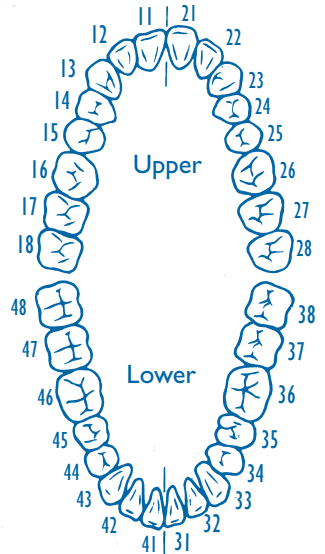
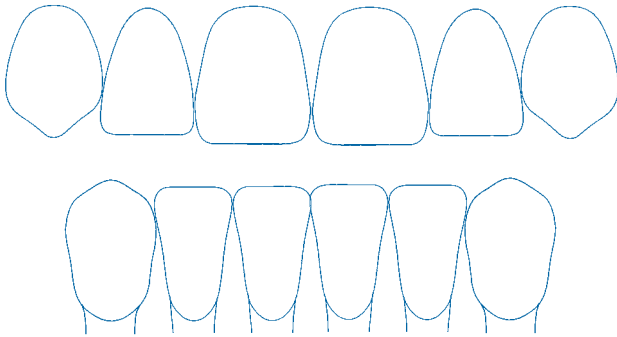
- CUSTOM TRAY
- STABILIZED BASE & OCCLUSAL RIMS
- SET-UP
- RESET
- PROCESS & FINISH
- VALPLAST
- FLIPPER
- CAST FRAMEWORK
- WAX BITE BLOCKS

- REPAIR
- LAZER WELD
- RELINE
- REBASE
- SOFTLINER
- MOUTHGUARD
- BLEACHING TRAY
- SURGICAL STENT

**ORTHODONTICS:**

- UPPER
- LOWER
- BITEPLANE
- HARD
- DUAL
- CLEAR RETAINER
- HAWLEY
- SPRING RETAINER
- SPACE MAINTAINER
- OTHER (OVER)

INSTRUCTIONS:



ENCLOSED:

- SHADE TAB
- PHOTOS
- PARTS: \_\_\_\_\_
- DIAGRAM
- PHOTOS EMAILED
- \_\_\_\_\_

PLEASE SEND:

- BOXES
- RX FORMS

SIGNATURE \_\_\_\_\_ DDS