

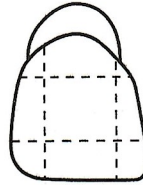
Patient Name : _____	Doctor Name : _____
Today's Date : _____	Due Date : _____

FIXED RESTORATION

Full Cast Alloy

- ☐ Yellow Noble ☐ White Noble
☐ Yellow High Noble ☐ Non Precious

Tooth :
 Shade :



☐ Male ☐ Female

- ☐ Singles
☐ Metal Try-In
☐ Splinted
☐ Finish

Implant Type & Size

Porcelain Alloy

- ☐ Yellow Noble ☐ High Noble
☐ Non Precious ☐ White Noble

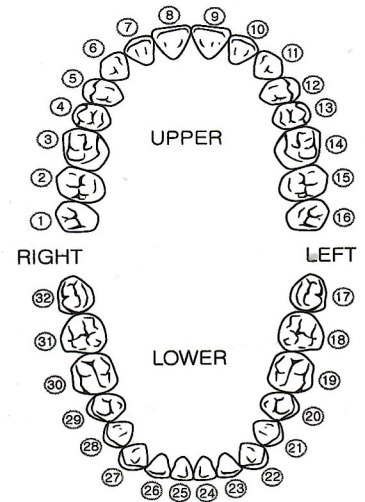
Metal Free

- ☐ ZR Full Contour ☐ ZR Layered
 Esthetic ☐ BruxZir
☐ E.max Layered
☐ E.max (Inlay/Onlay)
☐ E.max Veneer
☐ PMMA Temporary
☐ E.max Full Contour (Press / CAD)

Proximal Contact

- ☐ Broad (B/L) ☐ Light
☐ Deep (I/G) ☐ Medium
☐ Diastema _____ mm ☐ Heavy

R_x SPECIFIC INSTRUCTIONS :



Dr. Signature _____ License # _____

Metal Collars

- ☐ Very Small Lingual Collar
☐ No Metal to Show 360°
☐ Very Small Collar 360°
☐ Porcelain Butt Margin
☐ Other : _____

Occlusal Contact

- ☐ In Occlusion ☐ In Light Occlusion
☐ Out (0.5mm) ☐ Way Out (0.75mm)

Metal Occlusal

- ☐ Metal Occlusal
☐ Metal Island
☐ Metal Lingual

Pontic Design



REMOVABLE

Partials

- ☐ Framework
☐ Framework w/ Bite

Denture

- ☐ Processed Denture
☐ Printed Denture
☐ Bite Rim
☐ Custom Tray

Metal Free Partials

- ☐ Flipper 1~3 Teeth
 - Replacing Teeth #'s : _____
☐ Flipper 4 or more teeth
 - Replacing Teeth #'s : _____
☐ Valplast Partial

SPLINTS

Night Guards

- ☐ Soft ☐ Dual Night
☐ Hard ☐ Bleach / Fluoride Tray

IMPLANTS

- ☐ Cementable ☐ Screw Retained
 (Cement in Lab)

Tissue Displacement

- ☐ No Blanch ☐ Med Blanch
☐ Full Blanch

Final Abutment Type

- ☐ Stock
☐ Custom Titanium
☐ Custom Milled Nitride
 (gold shaded)
☐ CAD / CAM Zirconia