Doctor _____ Signature _____

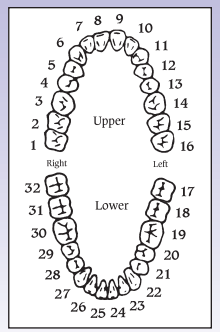
Address _____ Date Prepped _____

City, State, Zip _____ PATIENT _____

PHONE # _____ Fax # _____ Male Female Age _____

License # _____ **RETURN DATE** _____

E-mail _____ SUPPLIES NEEDED: ☐ Rx's ☐ Bags ☐ Boxes




TRY IN

☐ METAL
☐ BISQUE

Lab Use Only

**TOOTH NUMBERS** _____

## CERAMICS

- PFM/HIGH NOBLE ALLOY
- PFM/NOBLE ALLOY
- PFM/BASE ALLOY
- **ULTIMATE CROWN** (BASE ALLOY/22K GOLD PLATED)
- MARYLAND BRIDGE (BASE ALLOY ONLY)
- **IMPLANT** TYPE _____

SIZE _____ SPECIALIST _____

- SOFT TISSUE REPLICA

## EXTRAS

- 360° METAL COLLAR
- 360° PORCELAIN COLLAR
- PORCELAIN BUTT JOINT
- METAL OCCLUSAL OR LINGUAL
- REST FOR FUTURE PARTIAL ☐ METAL ☐ PORCELAIN
- FIT TO EXISTING PARTIAL

## CROWN & BRIDGE

- FULL CAST CROWN/BASE ALLOY
- FULL CAST CROWN/YELLOW GOLD
- FULL CAST INLAY/ONLAY/YELLOW GOLD
- POST & CORE
  ☐ BASE ALLOY ☐ WHITE GOLD ☐ YELLOW GOLD
- BILLY POST & CORE (OPAKED) **SHADE** _____

## COMMUNICATION:

CALLED DR. / DATE: _____ INIT _____

TALKED TO: _____

MESSAGE: _____

DR. CALLED / DATE: _____ INIT _____

TALKED TO: _____

MESSAGE: _____

## PATIENT EXPECTATIONS: _____

## ADDITIONAL COMMENTS: _____

Additional Room to Write on Back.

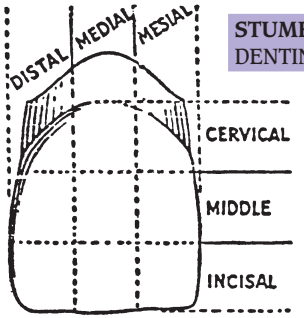
## COSMETICS

- EMPRESS LVI TECHNIQUE ☐ CROWN ☐ VENEER
- IPS EMPRESS
  ☐ CROWN ☐ INLAY/ONLAY ☐ VENEER
- IPS e.max LAYERED CROWN
- IPS e.max MONOLITHIC
  ☐ CROWN ☐ INLAY/ONLAY ☐ VENEER
- PROCERA
- ZIRCONIA
- BELLEGLASS/SINFONY
  ☐ CROWN ☐ INLAY/ONLAY ☐ VENEER
- TARGIS VECTRIS BRIDGE
- WHITE WAX ☐ WITH PINK TISSUE
- TEMPORARY ☐ COSMOPOST

**NEW!** ☐ SNAP-ON SMILE (6-14 UNITS) ☐ SNAP-IT SMILE (UP TO 5 UNITS)

**IS THIS A VITAL TOOTH?** ☐ YES ☐ NO

**DO YOU INTEND TO BOND?** ☐ YES ☐ NO




**STUMPF SHADE:** _____
DENTIN ☐ YELLOW ☐ GRAY ☐ BLACK

**SHADE:** _____

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