



Doctor: _____ Phone: _____

Address: _____

Date Required: _____ Order No. _____

CROWNS & BRIDGES

- Crown
- Joined Crowns
- Implant Crown
- Post/Core & Crown
 - Separate
 - In one Piece
- Bridge
- Cantilever Bridge
- Maryland bridge
- Implant Bridge
- Inlay/Onlay
- Veneer

Design

- Porcelain Bonded to Metal
- Precious Metal
- Semi-Precious Metal
- Non-Precious Metal
- Non-Precious Metal (-)
(Nikel Free)
- Labial Porcelain Margin
- 360° Porcelain Margin
- Full Porcelain Emax Crown/Bridge
- Full Porcelain Zirconia Crown/Bridge
- Full Metal Crown/bridge
- 360° Metal Margin
- Occlusal Rest
- Retention Wing
- Porcelain Shoulder
- Double Die Spacer

Embrasure

-
- Open
 - Closed
 - Ridge lap
 - Modified
 - Ovate Pontic
 - Modified Ovate Pontic

Pontic Design

Proximal Contact

-
- Normal
 - Extended

Occlusal Contact

- Heavy
- Light
- Open

Abutment Condition

- Vital
- Non-Vital
- Dentine or Compostile
- Metallic Post & Core

Occlusal Design

- Spot Metal Occlusal
- Full Procelain Occlusal
- Half Metal Occlusal
- Full Metal Occlusal

Patient's Name: _____

Male Female Age: _____

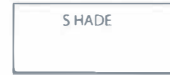
Shade

Vita

- Lumin-Vacuum
- Vitaphan 3D-Master
- Lumin Acry1 V

Occlusal Staining

- None
- Light
- Medium
- Dark



Other Instructions

Signature: _____

Date: _____

DENTURES

- Co Cr/Metal
- Upper F/-
- Lower -/F
- Set up teeth
- Re-try
- Process & Finish
- Acrylic
- Special Tray
- Upper P/-
- Lower -/P
- Try-in
- Bite Block

Design

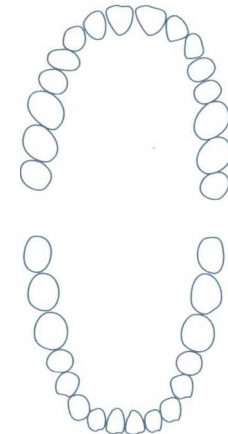
- Full Plate
- Upper Partial Plate
- Lower Partial Plate
- Retention Pins
- Unilateral
- Full Mesh

8	7	6	5	3	4	2	1	1	2	3	4	5	6	7	8
8	7	6	5	3	4	2	1	1	2	3	4	5	6	7	8

R.H.S

Upper

L.H.S



R.H.S

Lower

L.H.S