| PHONE: PATIENT NAME: Sex: | | | | |
|--|---|--|-------------------------|--|
| Address: SHADE: PHONE: | 42603 Garfield Rd., Clinton Twp, MI 48038 | | | |
| PHONE: PATIENT NAME: Sex: | Dr. | D | DUE DATE: | |
| PATIENT NAME: Sex: | Address: | *** *** *** *** *** *** *** *** *** ** | SHADE: | |
| PATIENT NAME: Sex: | | | | |
| Sex: M F Opposing Restored Finish Custom Shade in Lab | PHONE: | Land to TAS ORG | | |
| □ Splinted □ Try In □ Bisque Bake □ Finish □ Custom Shade in Lab CROWN AND BRIDGE IMPLANTS ALLOY PVC Abutment High Noble □ w/butt margin □ Titanium □ Yellow □ w/buccal band □ Zirconia □ White □ w/metal oclusal □ White □ ALL CAST CROWN Alloy □ Alloy ALL CERAMIC Parts □ X-Ray □ Emax □ Impression Post □ X-Ray □ Zirconia □ Analog □ Letter □ Empress □ Abutment Stump Shade □ Soft Tissue Tech's Initials □ ERMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U _ L _ Baseplate U _ L _ Shade: | | | | |
| PVC Abutment High Noble □ w/butt margin □ Titanium □ Yellow □ w/buccal band □ Zirconia □ White □ w/metal oclusal □ Alloy □ Alloy □ ALL CAST CROWN Alloy □ Alloy ALL CERAMIC Parts □ X-Ray □ Emax □ Impression Post □ X-Ray □ Zirconia □ Analog □ Letter □ Empress □ Abutment Stump Shade □ Soft Tissue Tech's Initials □ Stump Shade □ Soft Tissue □ Tech's Initials □ SemuntS □ REMOVABLE DENTURES PARTIALS BITE SPLINTS □ Denture U L □ Baseplate U L Shade: □ Imprediate □ L □ Wax Try-In U L Shade: □ Mould: □ Temp. Partial U L Soft Liner Mould: □ Mould: □ Flex. Partial U L Remount/Reset U L □ Mould: □ Implant Surgical Guide U L □ Alloy □ Mould: □ Implant Surgical Guide U L □ Implant Surgical Guide U L □ Implant Surgical Guide U L_ | | | | |
| □ w/butt margin □ Titanium □ Yellow □ w/buccal band □ Zirconia □ White □ w/metal oclusal □ Alloy □ Alloy □ ALL CAST CROWN Alloy □ Alloy ALL CERAMIC Parts □ Impression Post □ X-Ray □ Zirconia □ Analog □ Letter □ Empress □ Abutment Stump Shade □ Soft Tissue Stump Shade □ Soft Tissue Tech's Initials □ REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U_ L_ Baseplate U_ L_ Shade: □ Cast Partial U_ L_ Wax Try-In U_ L_ Shade: □ Immediate U_ L_ Process U_ L_ Mould: □ Temp. Partial U_ L_ Remount/Reset U_ L_ Noth Colored Clasps U_ L_ U Occlusal Guards U_ L_ Implant Surgical Guide U_ L_ Hard Implant Surgical Guide U_ L_ Hard Implant Surgical Guide U_ L_ | CROWN AND BRIDGE | IMPLANTS | ALLOY | |
| □ w/buccal band □ Zirconia □ White □ w/metal oclusal □ AlL CAST CROWN Alloy □ ALL CAST CROWN Alloy Alloy ALL CERAMIC Parts □ Impression Post □ X-Ray □ Impression Post □ Analog □ Letter □ Empress □ Abutment □ Soft Tissue Tech's Initials Stump Shade □ Soft Tissue Tech's Initials □ REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U_ L_ Baseplate U_ L_ Shade: □ Immediate U_ L_ Wax Try-In U_ L_ Shade: □ Immediate U_ L_ Process U_ L_ Mould: □ Flex. Partial U_ L_ Remount/Reset U_ L_ Hould: □ Reline U_ L_ Tooth Colored Clasps U_ L_ U_ L_ Hard Implant Surgical Guide U_ L_< | PVC | Abutment | High Noble | |
| □ w/metal oclusal □ Alloy □ ALL CAST CROWN Alloy ALL CERAMIC Parts □ Emax □ Impression Post □ X-Ray □ Zirconia □ Analog □ Letter □ Empress □ Abutment Stump Shade □ Soft Tissue Tech's Initials ■ REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U L Baseplate U L Shade: □ Immediate □ Cast Partial U L Wax Try-In U L Shade: □ Mould: □ Mould: □ Temp. Partial U L Soft Liner Mould: □ Mould: □ Mould: □ Mould: □ Mould: □ Mould: □ Implant Surgical Guide U L | | ☐ Titanium | Yellow | |
| □ ALL CAST CROWN Alloy ALL CERAMIC Parts □ Emax □ Impression Post □ X-Ray □ Zirconia □ Analog □ Letter □ Empress □ Abutment Stump Shade □ Soft Tissue Tech's Initials ■ REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U L Baseplate U L Shade: □ Cast Partial U L Wax Try-In U L Shade: □ Immediate U L Process U L Mould: □ Temp. Partial U L Soft Liner Mould: □ Flex. Partial U L Remount/Reset U L □ Reline U L Tooth Colored Clasps U L □ Occlusal Guards U L Implant Surgical Guide U L Hard | | Zirconia | ☐ White | |
| Cast Partial U | | | | |
| □ Emax □ Impression Post □ X-Ray □ Zirconia □ Analog □ Letter □ Empress □ Abutment Stump Shade □ Soft Tissue Tech's Initials REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U_ L_ Baseplate U_ L_ Cast Partial U_ L_ Shade: □ Immediate U_ L_ Process U_ L_ Mould: Immediate U_ L_ □ Temp. Partial U_ L_ Soft Liner Mould: Mould: □ Flex. Partial U_ L_ Remount/Reset U_ L_ L_ Reline U_ L_ Tooth Colored Clasps U_ L_ Implant Surgical Guide U_ L_ Hard Soft Soft | ☐ ALL CAST CROWN | | Alloy | |
| ☐ Zirconia ☐ Analog ☐ Letter ☐ Empress ☐ Abutment Stump Shade ☐ Soft Tissue Tech's Initials REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U L Baseplate U L Shade: Cast Partial U L Wax Try-In U L Shade: Immediate U L Process U L Temp. Partial U L Soft Liner Mould: Flex. Partial U L Remount/Reset U L Reline U L Tooth Colored Clasps U L Occlusal Guards U L Implant Surgical Guide U L Hard Soft | ALL CERAMIC | Parts | | |
| □ Empress □ Abutment Stump Shade □ Soft Tissue Tech's Initials REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U_ L_ Baseplate U_ L_ Shade: □ Impreciate U_ □ I | ☐ Emax | ☐ Impression Post | ☐ X-Ray | |
| REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U_ L_ Baseplate U_ L_ L_ Cast Partial U_ L_ Wax Try-In U_ L_ Shade: | Zirconia | ☐ Analog | ☐ Letter | |
| REMOVABLE DENTURES PARTIALS BITE SPLINTS Denture U L Baseplate U L Shade: | ☐ Empress | | | |
| Denture U L Baseplate U L Cast Partial U L Wax Try-In U L Shade: Immediate U L Process U L Mould: Temp. Partial U L Soft Liner Mould: Flex. Partial U L Remount/Reset U L Flex. Partial U L Reline U L Tooth Colored Clasps U L L Occlusal Guards U L Implant Surgical Guide U L Hard Soft | Stump Shade | ☐ Soft Tissue | Tech's Initials | |
| Cast Partial U L Wax Try-In U L Shade: | | | ALS BITE SPLINTS | |
| Immediate U L Process U L Temp. Partial U L Soft Liner Mould: Flex. Partial U L Remount/Reset U L Reline U L Tooth Colored Clasps U L Occlusal Guards U L Implant Surgical Guide U L Hard Soft Soft | | | | |
| Temp. Partial U L Soft Liner Mould: Flex. Partial U L Remount/Reset U L Reline U L Tooth Colored Clasps U L Occlusal Guards U L Implant Surgical Guide U L Hard Soft Soft | | | Shade: | |
| Flex. Partial U L Remount/Reset U L Reline U L Tooth Colored Clasps U L Occlusal Guards U L Implant Surgical Guide U L Hard Soft Soft | | | Mould: | |
| Reline U L Tooth Colored Clasps U L Occlusal Guards U L Implant Surgical Guide U L Hard Soft | | the state of the s | | |
| Occlusal Guards U L Implant Surgical Guide U L Hard Soft | | ACATA NATURAL A MARINA NATURAN | | |
| Hard Soft | | | | |
| NOTES: | Hard Soft | | n la plu ca managas, s, | |
| | NOTES: | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| | | | | |
| Dentist Signature License #: | Dentist Signature | | License # | |