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LAB. USE

Case No. \_\_\_\_\_

Pan No. \_\_\_\_\_

Lab Date \_\_\_\_\_

Dr. \_\_\_\_\_

Patient \_\_\_\_\_

Age \_\_\_ Gender M F Teeth Restored or Replaced \_\_\_\_\_

Prep Date: \_\_\_\_\_ Seat Date: \_\_\_\_\_ Seat Time: \_\_\_\_\_

Restorations by Advanced Technical Department (L.V.I. and P.A.C.-live trained)

**TYPE OF RESTORATION**

For all anterior cases please provide the following items and mark they have been sent

- Pre-Op Model  Wax Presentation Model or Model of Temps  Stick Bite  Face Bow
- Measurement of Central  Underlying Tooth Color (prep shade)  Photos for Shade

**ALL PORCELAIN VENEERS**

- \_\_\_ IPS e.max
- \_\_\_ IPS Empress
- \_\_\_ Authentic
- \_\_\_ GC Initial LiSi
- \_\_\_ Refractory

**PORCELAIN TO METAL**

- \_\_\_ Porcelain-to-metal
- \_\_\_ Porcelain Butt Margin

**GOLD**

- \_\_\_ Gold Crown
- \_\_\_ Gold Inlay/Onlay

**FULL CROWN/BRIDGE**

- \_\_\_ Lava™ Hand Stack
- \_\_\_ Lava™ Press
- \_\_\_ Bad AZ - Monolithic Zirconia High Translucency 700-800 MPA Single units & up to 3 unit anterior bridge
- \_\_\_ Full Zirconia - Monolithic Zirconia 1200-1300 MPA
- \_\_\_ Authentic
- \_\_\_ IPS Empress
- \_\_\_ IPS e.max (Crown)
- \_\_\_ GC Initial LiSi

**ALLOYS-CERAMIC**

- High Nobel Yellow Gold 89.5%
- High Nobel   (High Noble 62)
- Predominately Base (Tilite)

**ALLOYS FOR GOLD WORK**

- High Nobel 60% Yellow Gold
- High Nobel White Gold
- High Nobel Inlay/Onlay 77%
- Nobel Y+Yellow/Rose

**INLAY/ONLAY**

- \_\_\_ IPS e.max
- \_\_\_ GC Initial LiSi
- \_\_\_ Lava™ Press
- \_\_\_ Sinfony

**METAL DESIGN**

- (Our standard is no collar)
- \_\_\_ No Collar
- \_\_\_ Small Lingual Collar
- \_\_\_ Small Lingual & Buccal Collar
- \_\_\_ Metal Lingual/Metal Occlusal

**GOAL OF FINAL CASE**

- \_\_\_ Close Diastema
- \_\_\_ "Youthenize" Smile
- \_\_\_ Change Shape
- \_\_\_ (Duplicate Temp Shape)
- \_\_\_ Move Midline
- \_\_\_ Feminize Smile
- \_\_\_ Change Shade
- \_\_\_ Lengthen Teeth
- \_\_\_ Eliminate Crossbite
- \_\_\_ Widen Buccal Corridor

**DR. REQUEST**

- \_\_\_ Diagnostic Wax-up
- \_\_\_ Request DieTrim
- \_\_\_ Request Framework Try-in
- \_\_\_ Request Bisque Try-in

**IF INSUFFICIENT ROOM**

- \_\_\_ Reduce Opposing & Mark
- \_\_\_ Reduce Prep & Make Reduction Coping

**PONTIC DESIGN**

- Full Ridge
- Partial Ridge
- No Ridge
- Point Contact
- No Contact
- Ovate

**RIDGE RELIEF**

- None  Slight
- Med.  Heavy

Gingival Shade \_\_\_\_\_

Body Shade \_\_\_\_\_

Incisal Shade \_\_\_\_\_

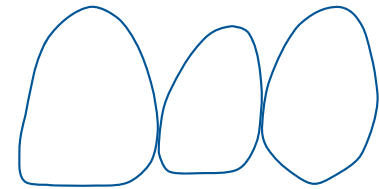
Prepped Tooth Shade \_\_\_\_\_  
 (All-Porcelain & Lava)

Occlusal Stain: \_\_\_ None \_\_\_ Light \_\_\_ Medium \_\_\_Dark

Incisal Translucency: \_\_\_None \_\_\_ Minimal (0.5) \_\_\_Moderate(1.0) \_\_\_Maximum(1.5)

Shade of Translucency: \_\_\_ Clear (Blue) \_\_\_ Smoke (Grey) \_\_\_ Frosted (Chalky White) \_\_\_ Amber (Orange)

Surface Texture: \_\_\_Heavy \_\_\_ Medium \_\_\_Light \_\_\_ Smooth (No surface texture)



**SPECIFIC INSTRUCTIONS:** \_\_\_ Please call me \_\_\_ Please evaluate my preps & impressions  
 \_\_\_ Please send me a card to evaluate the technicians completed work

Please send:  Rx Forms  Mailing Boxes  Mailing Labels  Product Info on \_\_\_\_\_

Terms: Net 30 days. A 2% a month finance charge is added to all past due accounts. Accounts over 30 days past due will be placed on COD including outstanding balance due with shipment of case. Dentist will be responsible for all collection costs, including attorney's fee to collect past due balance. By signing below you are legally obligated to these terms.

Dentists Signature \_\_\_\_\_ License # \_\_\_\_\_