

A Framework for Success

**Required Information**

Lab \_\_\_\_\_ Address \_\_\_\_\_  
 Patient Name \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Today's Date \_\_\_\_\_ Phone Number \_\_\_\_\_  
 Due Date (by 5:00 pm) \_\_\_\_\_ Signature \_\_\_\_\_

**Case Materials Enclosed**

Impressions  Bite Registration  Models  Implant Parts

**Supply Requests**

Prescriptions  Shipping Labels  Boxes  Other:

**Partials & Frameworks**

1 Select type:  Framework  Partial  
 \_\_\_\_\_  
 2 Select one:  Cast\*  Flexible (TCS)  
 Acrylic  Combo  
 \_\_\_\_\_  
 3 \* Select metal (if applicable):  
 Nobileum  Vitallium  
 \_\_\_\_\_  
 4 Select clasp(s):  
 Metal Clasp Tooth # \_\_\_\_\_  
 Flexible Clasp Tooth # \_\_\_\_\_  
 Clear Flexible Clasp Tooth # \_\_\_\_\_  
 \_\_\_\_\_  
 5 Select stage:  
 Frame and Set Up  Frame  
 Frame with Bite Rim  Set-Up  
 Complete (One Step)  Process/Finish

**Dentures**

1 Select type:  Full  Immediate  
 \_\_\_\_\_  
 2 Select stage:  
 Complete (One Step)  Wax Bite Rim  
 Set Up  Process/Finish

**Orthodontic Guards**

1 Select type:  Night Guard\*  Athletic  
 \_\_\_\_\_  
 2 \* Select one (if applicable):  
 Hard  Hard/Soft  Soft

**Removable Extras**

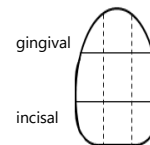
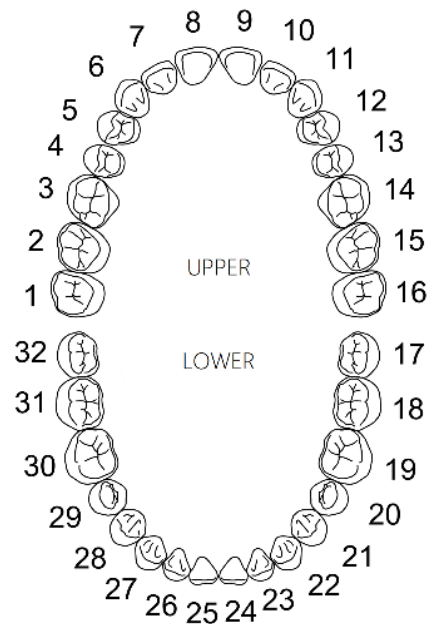
Custom Tray  Rebase  
 Hard Reline  Soft Reline

**Crown & Bridge**

1 Select one:  Crown  Bridge  
 Inlay/Onlay  Veneer  Coping  
 \_\_\_\_\_  
 2 Select type:  
 Porcelain Fused Metal (PFM)\*  
 Full Cast\*  
 Full Contour Zirconia  Layered Zirconia  
 Emax CAD  Emax Press  Empress  
 \_\_\_\_\_  
 3 \* Select alloy (if applicable):  
 Non-Precious  
 Semi-Precious  
 Noble Yellow (not applicable for PFMs)  
 White Gold (High Noble)  
 Yellow Gold (High Noble)  
 \_\_\_\_\_  
 4  Implant (if applicable):  
 Abutment:  Stock  Custom  Supplied  
 Size: \_\_\_\_\_  
 Manufacturer: \_\_\_\_\_

**Design & Instructions**

Tooth #: \_\_\_\_\_ Shade: \_\_\_\_\_ Stump Shade: \_\_\_\_\_



- Tissue Shade:**
- Light Pink
  - Standard Pink
  - Light Meharry
  - Meharry