

◆ PRACTICE AND PATIENT INFO

DOCTOR: _____ LOCATION: _____

PATIENT NAME: _____

TODAY'S DATE: _____ TOOTH NUMBER: _____

REQUESTED RETURN DATE: _____ INSERT DATE: _____ TIME: _____

◆ FIXED RESTORATIONS

NOTE: SEE REVERSE FOR IN-LAB TIMES

ALL CERAMIC

- FULL CONTOUR ZIRCONIA
- MICRO LAYERED ZIRCONIA
- LAYERED ZIRCONIA
- 3/4 VENEERED ZIRCONIA
- E.MAX

METAL-BASED

- CLASSIC PFM, BASE ALLOY
- CLASSIC PFM, NOBLE ALLOY
- CLASSIC PFM, HIGH NOBLE ALLOY
- FULL GOLD CROWN, 2% ALLOY
- FULL GOLD CROWN, 58% ALLOY

TREATMENT PLANNING/OTHER PRODUCTS

- FRAMEWORK TRY-IN
- TEMPORARY CROWN
- DIAGNOSTIC WAX-UP
- DOCTOR DIE TRIM
- ADD A CONTACT
- ADD PORCELAIN

RESTORATION SPECIAL REQUESTS

- CALL ME AT: _____
- PORCELAIN MARGIN
- METAL MARGIN

◆ REMOVABLE RESTORATIONS

NOTE: SEE REVERSE FOR IN-LAB TIMES, AND TOOTH OPTIONS

PRODUCT SELECTION

- CUSTOM TRAY
- TITANIUM PARTIAL DENTURE
- FULL DENTURE
- IMMEDIATE DENTURE
- BITE BLOCK
- FLEXIBLE PARTIAL DENTURE
- PARTIAL DENTURE
- FLIPPER (1-3 TEETH)

STAGE SELECTION

- FRAME
- WAX SET-UP
- RESET
- FINISH

GUARDS AND OTHER PRODUCTS

PLEASE INDICATE ARCH: UPPER LOWER BOTH

- COMFORTECH HARD/SOFT GUARD
- COMFORTECH ATHLETIC GUARD
- COMFORTECH HARD GUARD
- RETAINERS
- BLEACHING TRAY
- ESSIX RETAINER

◆ IMPLANT SUPPORTED RESTORATIONS

IMPLANT TYPE

MANUFACTURER: _____

PLATFORM TYPE: _____ PLATFORM SIZE: _____

ABUTMENT MARGIN DEPTH

MESIAL (0.5MM DEFAULT): _____ LINGUAL (0.5MM DEFAULT): _____

DISTAL (0.5MM DEFAULT): _____ BUCCAL (1.0 MM DEFAULT): _____

CEMENT-RETAINED ABUTMENT*

- TITANIUM CUSTOM CAD/CAM ABUTMENT
- GOLD HUE CUSTOM CAD/CAM ABUTMENT
- STOCK/TIBASE ABUTMENT
 - LAB TO ORDER
 - DR. PROVIDED PARTS
- OEM - ADDITIONAL CHARGE AND LAB TIME

SCREW-RETAINED ABUTMENT*

- CROWN CEMENTED IN LAB
 - TIBASE (DEFAULT)
 - CUSTOM ABUTMENT
- CROWN CEMENTED CHAIRSIDE

* PLEASE ALSO INDICATE A CROWN TYPE ON THE FIXED SECTION OF THE RX

OFFICE PROVIDED COMPONENTS

- IMPRESSION COPING W/ FIXING PIN
- ABUTMENTS
- SURGEONS REPORT
- ANALOG
- ABUTMENT SCREWS

◆ TOOTH AND SHADE INFO

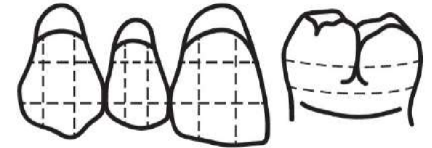
SHADE: _____ TISSUE SHADE: _____

- PATIENT WILL COME TO CDL FOR CUSTOM SHADE
- UPLOAD PHOTOS VIA WEBSITE

IF APPLICABLE, PLEASE MARK BELOW:



SCAN THE QR CODE OR VISIT:
CONCORDDENTALLAB.COM/DOCTORS
SCROLL DOWN FOR PHOTO UPLOAD



TOOTH SELECTION (REMOVABLES)

- TIER 1 (DEFAULT, INCLUDED IN BASE PRICE)
- TIER 2
- TIER 3

OCCUSAL STAIN

- NONE
- DARK
- LIGHT

◆ ADDITIONAL INFO/CASE NOTES

