



Where reliability meets simplicity

LABORATORY PRESCRIPTION

Doctor Name
Practice Name
Full Address
Phone

Patient Name
Patient Chart #
Rx Date
Rush Case
Is this case a Remake?

Remake Reason
Tooth Shade
Shade Guide
Stump Shade
Pink Tissue Shade

CROWN & BRIDGE RX

Complete the left side of the Rx, where applicable, for fixed cases.

REMOVABLE PROSTHETICS RX

Complete the right side of the Rx, where applicable, for removable cases.

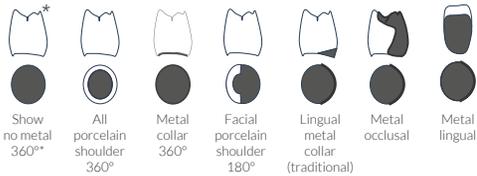
Please CIRCLE single units and BRACKET splinted units

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16
32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17

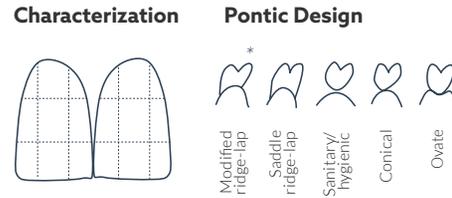
- All Ceramic: Solid Zirconia, High Translucent, Lithium Disilicate
PFM: High Noble White, High Noble Yellow, Noble/Semi Precious, Base/Non-precious, FC Noble 2%
Full Cast: High Noble White, High Noble Yellow, Noble/Semi Precious, Base/Non-precious, FC Noble 2%

MARGIN DESIGN

Please circle your choice(s) of margin combination



CROWN DESIGN



IF INSUFFICIENT ROOM

- Trim opposing
Call to discuss
Metal occlusal
Reduction coping
Metal island
Trim prep no coping

OCCUSAL CONTACT

- Light
Open
Tight
INTERPROXIMAL CONTACT: Light, Medium, Heavy

Return for

- Finish
Die trim
Bisque
Metal try-in
Rest Seats
Crown under partial

Restoration

- Crown
Veneer
Bridge
Inlay/Onlay
Implant
Post & Core
No-prep veneer

Choose Case Type

- Full Denture, Partial, Unilateral, Immediate, Flipper

Choose Arch

- Upper, Lower, Both

Teeth Type

- Elite, Premier

Choose Stage

- Custom Tray, Cast Metal Framework, Base Plate, Occlusal Rim, Try In, Finish, Repair, Reline, Rebase

Choose Material

- Acrylic, Metal, CustomFlex Partial, Valplast Partial, Chrome Cobalt, Vitallium

Add On

- Patient ID, Cosmetic Clasp, Wire Mesh, Wire reinforcement, Metal mesh, Soft liner

Acrylic Shade

- Lucitone, Light Meharry, Light Pink, Meharry

Nightguard

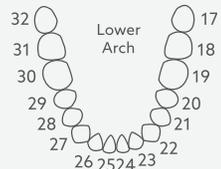
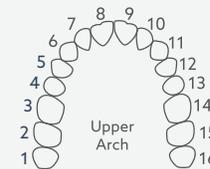
- Upper, Lower, Flexiguard, Hard, Soft

Partial Design

- Horseshoe palate, Full palatal metal coverage, A-P strap, Lingual bar

Extract Now

- Yes, No



SPECIAL INSTRUCTIONS

Dentist Signature