

REQUIRED INFORMATION

Case Due Date _____ Time _____
 Doctor Name _____
 Practice Name _____
 Address _____
 Phone _____ Rx Date _____
 Patient Name _____ Sex _____ Age _____
 Shade _____ Shade Guide Used _____ Stump _____

FIXED RESTORATIONS

Crown & Bridge

- Aesthetic Zirconia
- Glass Ceramics (ie: Emax..)
- Veneer Restorations
- Inlay/Onlay
- Full Metal
- Non Precious
- Noble White
- PMMA Temporary
- Diagnostic Wax-up
- Post and Core
- Layered
- Layered
- Porcelain Fused to Metal
- Noble Yellow
- High Noble Yellow

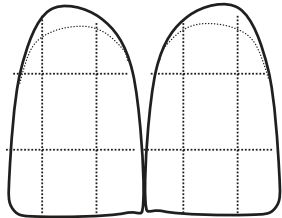
Implant Based

- Aesthetic Ti-Based Zirconia
- CAD|CAM Custom Abutment
- Ti-Based PMMA Temporary
- Ti-Based Zirconia Hybrid Bridge
- Ti-Bar/Acrylic Hybrid Bridge
- Ti-Based/Trilor/Crystal Ultra Hybrid Bridge
- Ti-Bar Thimble C&B Hybrid Bridge
- Surgical Guide
- Layered
- Ti
- Zi
- Verification Jig

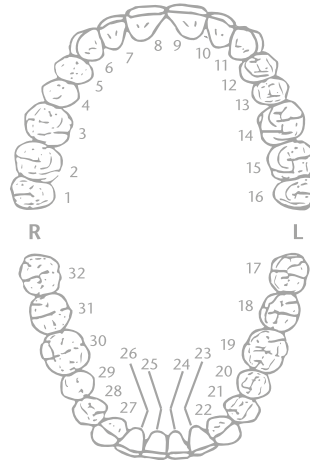
Implant Systems _____
 Implant Sizes _____
 Abutments Design Notes _____
 Other Info _____

SPECIFIC INSTRUCTIONS

Characterizations



Pontic Design



Included Items

- Impressions _____
- Pre Op Models _____
- Bite Registration _____
- Photos _____
- Other _____

If Insufficient Room

- Trim opposing *
- Call to discuss
- Reduction coping

Occlusal Contact

- Light*
- Open
- Tight

Interproximal Contact

- Light*
- Medium
- Heavy

Return for

- Die trim
- Bisque
- Finish*

**Standard design if an option is not selected*

REMOVABLE RESTORATIONS

Complete Dentures

- Economy
- Premium
- Custom Tray
- Set Up
- Immediate
- Transitional
- Base/Wax Rim
- Finish

Speciality Products

- Essix Retainer
- Hard NightGuard
- Bleaching Tray
- Hard/Soft NightGuard

Partial Dentures

- Metal Frame
- Flexible
- Unilateral (NESBIT)
- Frame Try In
- Try In With Teeth
- Acrylic Flipper
- Acrylic With Clasps
- Bite Block
- Finish

Repairs

- Reline
- Tooth
- Fracture
- Clasp

GUM Shade

- Original
- Ethnic



Your Implant Specialists

1403 W. 10th Place, Suite B-104, Tempe, Az 85281
 480-567-4720 customer_service@jbdentalaz.com