



**ORDER FORM - CROWN and BRIDGEWORK**

Account Number

Dentist .....

Invoice Name .....

Date .....

Address .....

Phone .....

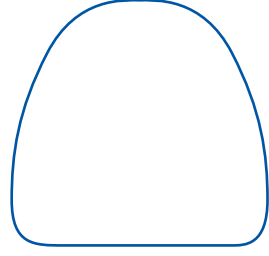
Email .....

Patient Name .....


Due Date ..... by 5pm

INSTRUCTIONS

SHADE



DIAGNOSTIC WAX-UP



**SPECIFY TURN AROUND TIME**

- Normal 10 working days
- Rush - Call Lab (Incurs surcharge)
- Call Dr. upon receipt to discuss case

**RESTORATION TYPE**

- Crown
- Bridge
- Inlay/Onlay
- Bonded Bridge/Wing
- Post and Core
- Veneer

**MUST SELECT ONE**

- Standard
- Premium

**VALUE**

- High  Medium  Low

**PORCELAIN FUSED TO METAL**

- High Noble/Precious
- Semi Precious
- Non Precious
- Non Precious (Ni Free)

**MARGIN TYPE**

- Classic PFM
- Fine Metal Margin
- Buccal Porcelain Margin
- 360° Porcelain Margin

**ALL CERAMIC**

- e.Max (Empress II)
- e.Max Zirpress
- Empress Esthetic (veneers)
- Lava Zirconia
- Adoro Composite

**FULL CAST**

- Yellow Gold
- Non Precious (Ni Free)
- Semi Precious
- Non Precious

**OCCLUSAL STAINING**

- None  Light
- Medium  Dark

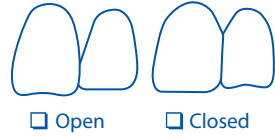
**IMPLANT CROWN**

- Cement retained
  - Screw retained
- System \_\_\_\_\_
- Platform Diameter \_\_\_\_\_

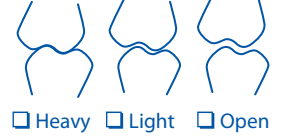
**ABUTMENT TYPE**

- Cast Gold
- Titanium
- Zirconia

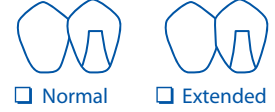
**EMBRASURE**



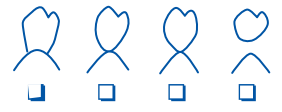
**OCCLUSAL CONTACT**



**PROXIMAL CONTACT**



**PONTIC DESIGN**



**PLEASE COMPLETE TO AVOID SHADE DISCREPANCIES FOR ALL CERAMIC RESTORATIONS**

- Vital
- Non Vital (dentine or composite)
- Non Vital (metallic post and core)
- Stamp Shade .....

**FAST TRACK - PLEASE TICK TO MINIMISE DELAYS IN CASE OF A PROBLEM**

- Insufficient Occlusal Clearance**
- Adjust the opposing and mark on model
  - Make a reduction coping to show where to adjust the preparation
  - Call me
- Margins not clear**
- Estimate and attach a note
  - Email me an image of problem area
  - Call and email me

OFFICE USE ONLY:

PLEASE EMAIL DIGITAL IMAGES TO [usa@scdlab.com](mailto:usa@scdlab.com)

Signature..... License No.....