





REMOVABLE PROSTHODONTICS

						Invoice Name			
	Inv	voice Add	Address			Suburb Postcode			
	Te	I			Email				
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BATCH # (Office only)	1 0	ticiit ib	ricase do not ase patient s name amess cons	crit is prov	іаса, апа арр	propriate formys have been completed.			
New Case Continuation	on/Remake		Account Number		Wor	k Required by Day	Month		
SCD RANGE *If Range has not been so	elected it will de	efault to SCI) Range			QUEST RANGE (")*If Range has no	ot heen selected it will	default to SCD Ra	
For turnaround times please refer to						For turnaround times please refer to p			
·									
Denture Preparation	U	L	Occlusal Splints	U	L	Denture Preparation	U	L	
Special Tray Wax Rim	0	0	Flat Plane Hard Flat Plane Hard/Soft	0	0	Special Tray Wax Rim		0	
WdX KIIII	0		Michigan (Canine Rise) Hard	Ö	Ö		<u> </u>	0	
Metal Partials			Michigan (Canine Rise) Hard/Soft	Ŏ	Ŏ	Acrylic Flexible Denture	O Digital		
Casting (Frame)	0	0	Soft Splint	\circ	\bigcirc	Partial:	_		
Casting (Frame) with wax rim	0	0	Gelb		\circ	Try-in	0	0	
Casting & Try-in with teeth	0	0	NTI	0		Finish	O	0	
Casting Process/Finish	0	\circ				Full: (Non Flexible)	\bigcirc	\bigcirc	
○ Acrylic ○ Flexible Denture	○ Digi	ital				Try-in Finish	Ö	Õ	
(Default) Orthodontic Appliances							_		
Partial:			Active ROA (Draw Design Below)	\circ	\circ	Replica DentureStandard			
Try-in	\circ	\circ	Fixed Devices (Draw Design Below)	\circ	\bigcirc	StandardHigh-Impact Acrylic			
Finish	\circ	\circ	Essix Retainer	\circ	\circ	O riigii iiripace, ter yiic			
Full: (Non Flexible)			Hawley Retainer	0	0	Metal Partials			
Try-in		\circ	Memosil lingual wire stent	\circ	\circ	Casting (Frame)	0	0	
Finish	0	0	Anti-Snoring Device EMA			Casting (Frame) with wax rim	0		
Replica Denture			Silensor SL		\equiv	Casting & Try-in with teeth			
Standard			Moses (Snoring +/- sleep apnoea)		\equiv	Casting Process/Finish	0		
O High-Impact Acrylic			Miscellaneous			Other Products			
○ Immediate Replacement —			Mouthguard Junior (3mm)	\circ	\circ	Occlusal Splint (Hard/Soft)	0	0	
- Immediate replacement			Mouthguard Standard (5mm)	\circ	\circ	Occlusal Splint (Hard)	0	0	
○ Tooth-Coloured Clasps —			Mouthguard Professional (6mm + 3mm)	0	0	Occlusal Splint Nightguard (Soft)	0	0	
Shade:	ı		Bleaching Trays	0	0	Bleaching Splint	0		
_	1		Denture repair	0	\circ	Mouthguard Junior (3mm) Mouthguard Standard (5mm)	Ö	$\tilde{\circ}$	
Clear Clasps —						Mouthguard Professional (6mm + 3mm)	Ŏ	Ŏ	
						Denture repair	Ō	Ō	
TEETH CHART			ADDITIONAL INST	RUCTIO	NS				
TEETH CHART			ADDITIONALING	Ruciio	113	SHADE (please email images)			
	-Chi								
11 21))		
13 12	23								
C 7 14	25					MATERIAL ENCLOSED			
(E) Uppe	er ~	(4)							
16	26					Please tick 🕜			
17	27						DR	SCD	
18	2	8				Denture Teeth		O	
						Upper Teeth set on Wax		0	
Right		Left				Lower Teeth Set on Wax		0	
						Upper Model or Impression Lower Model or Impression		0	
48	3					Upper Wax Rim		0	
	27					Lower Wax Rim	·····	0	
C;)⁴ ⁷ Lowe	er 37					Bite Registration	Ō	Ö	
46	36	H				Upper Framework		Ö	
4.2	<u> </u>	3				Lower Framework		Ö	
(,) 45	35	i				Articulator	\cap	Ō	
43,12	3233)				Upper Final Denture to Adjust		0	
42 41 31				Lower Final Denture to Adjust		Ö			
						Upper or Lower previous		0	
			PROMO CODE			Denture to return as a guide		\bigcirc	
			FROMO CODE			Voucher Attached # Images to be emailed		\cup	
						ges to be cirialica			