

(FOR LAB USE ONLY) (FOR LAB USE ONLY)
Pt. # _____ Finish Date _____

ARTIDENTAL LAB INC.
Classic



ARTIDENTAL
2100 Main St., Suite 101
Irvine, CA 92614
Toll Free (833) 752-8100
Tel (949) 336-5453
Fax (949) 336-5241
info@artidentallab.com

PREP DATE _____ **DUE DATE** _____
Patient Appointment Date _____ Time _____
/ (:)



All Restorations
Made in the USA

DENTAL OFFICE : _____ PHONE (_____) _____

DR. NAME : _____

PATIENT NAME : _____ AGE: _____ M F

CROWN & BRIDGE CASE SPECIFICATIONS

SELECT STAGE : Metal Try-In Bisque Bake Finish

BUCCAL MARGIN

- Porcelain Margin
- 360° Porcelain Margin

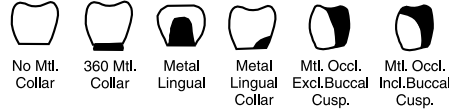
PROXIMAL CONTACT

- Broad Light
- Point Medium
- Heavy

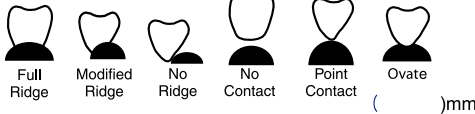
OCCLUSAL CONTACT

- Open
- Light
- Tight

METAL DESIGN



PONTIC DESIGN



ABUTMENT EMERGENCE



IF INSUFFICIENT ROOM

- Adjust Opposing
- Reduction Coping
- Metal Occlusal / Lingual

C&B EXTRAS NIGHT GUARDS

- Rest Design & Print
- Wing Print
- Fit to Partial
- Diagnostic Wax-Up
- Provisional Restoration

CROWN & BRIDGE

ZIRCONIA

- Full Contour HS (High Strength)
- Full Contour XT (Extra Translucent)

Facial Layer HS

- Full Layer HS

LITHIUM DISILICATE

- e.max (Staining)
- e.max (Layering)

PFM

- Semi-Precious
- High Precious White
- High Precious Yellow

FULL CAST

- Semi-Precious 40%
- High-Precious 77%
- Post

Single

Splint

TOOTH # : _____

IMPLANTS

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- Cement Type Screw Type (UCLA)
- Crown w/access hole (Lab Cement Y / N)

System & Size _____

- Dr. will order all necessary parts
- Lab will order all necessary parts

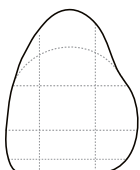
ABUTMENTS

- UCLA Zirconia Hybrid Stock
- ASC Titanium Technician's Choice Ti - base

Send pic. to : artidentalpic@gmail.com

SHADE _____

STUMP SHADE _____

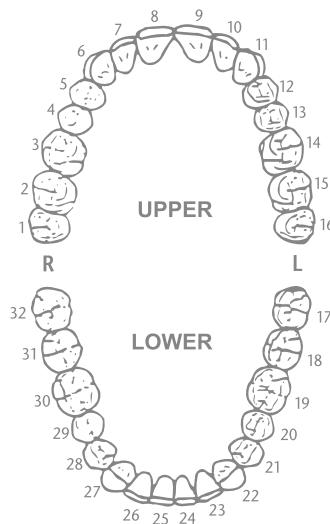


STAINING

- Light
- Medium
- Heavy
- None

REQUEST SUPPLIES : Rx Forms FedEx Labels

White, Yellow Copy - Lab / Pink Copy - Doctor



Dr's Signature _____ License # _____

FOR LAB USE ONLY			
Impression	Individual Die	Implant Parts with Imp	
Bite Registration	Solid Model	Implant Parts in Imp	
Opposing Model	Study Model	Articulator	
Master Model	Picture / USB	Abutment	
	Crown / Bridge		

Receive Date _____