

Case Submitted Online

DOCTOR _____

ADDRESS _____

PHONE _____

EMAIL ADDRESS _____

SIGNATURE _____ DATE _____

Please construct and deliver the dental restoration described herein to me.

PATIENT'S NAME _____ M F

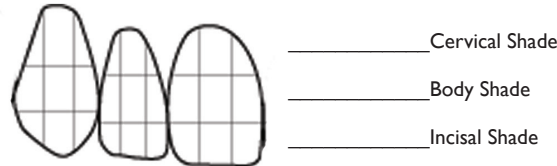
PLEASE SEND: Rx Fixed Restoration Removable
 AIRBILLS BOXES

AGE _____

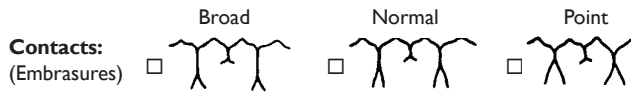
DATE DUE	LAB USE ONLY	
SHIPPING GUIDELINES ON THE BACK	CASE NO.	SHIP DATE
	NOTICE SENT	

CASE REQUIREMENTS

Basic Shade: _____ Core Shade: _____ Shade Guide Used: _____



Cervical Warming: .5mm 1mm Other _____



Describe Occlusion Desired: _____

DESIGN PREFERENCES

- Porcelain-to-margin
- Porcelain Butt Margin (shoulder prep required)
- Lingual Collar _____ mm
- Full Metal Collar _____ mm
- Sanitary (off the ridge)
- Ridge Lap
- Ovate Pontic
- Modified

SUGGESTED FOR ANTERIOR OR LARGE CASES

- Full-Arch Impression(s)
- AACD Series Photos
- Marked Cast Model Indicating Tissue Recontouring
- Bite Registration
- Pre-Op model(s)
- Diagnostic White Wax-Up
- Adjusted Temps
- Photo of Temps
- Soft Tissue Corrections: Symmetry Zenith

SMILE DESIGN (Recommendations For Anterior Cases)

Desired: Central Width: _____ mm
Central Length: _____ mm

Smile Selection: Natural Softened Enhanced
 Hollywood Other: _____

Shimbashi Vertical Measurement:
Goal: #8:25 _____ mm #9:24 _____ mm
 Stick-Bite Facebow

ABUTMENT PREFERENCES

Abutment Emergence: Full Standard Straight
Do you have a laser for contouring tissue? Yes No
Implant System: _____ Size: _____
Abutment Material:
 Titanium Ceramic Gold Hue TiZir Hybrid
Margin Depth: F/B: _____ M: _____ D: _____ L: _____
Milling: Brand Name: _____
 Economy (3rd party)

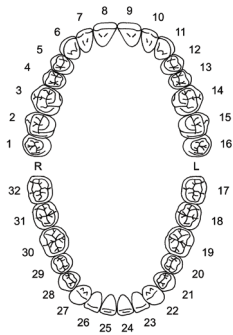
SPECIAL INSTRUCTIONS

May we adjust opposing if necessary? Yes No
May we adjust preps if necessary? Yes No
May we adjust the draw if necessary? Yes No
Opposing to be restored in the future? Yes No

NOTES: _____

LEVEL OF AESTHETICS

- ELITE** tooth #(s) _____
Highest Level: The most vibrant and lifelike restoration. Handcrafted by master technicians using the latest technology. Specifically tailored for each patient. Can be used with any material selection.
- BELLA** tooth #(s) _____
Mid Level: A technician adds characterization to the incisal 1/3 for a nice aesthetic appearance.
- TRADITIONAL** tooth#(s) _____
Standard Level: For any patient's budget. Quality for any practice.



SPECIFIC RESTORATIVE MATERIALS

- ALL-CERAMIC**
 - Lithium Disilicate: e.max[®] CAD e.max[®] Press
 - Zirconia: Zir-Max[®] (layered) ZirCrown Aesthetic[™] (850 MPa) Most translucent & aesthetic Prime (1200 MPa) Strongest, gradient translucency Feldspathic: Radiant[™] Veneers
- PORCELAIN-TO-METAL**
 - High Noble (yellow)
 - High Noble (white)
 - Noble Plus (white)
- FULL CAST CROWN(S)**
 - High Noble (yellow)
 - High Noble (white)
 - Noble (yellow)
 - Noble (white)
- OTHER MATERIALS**
 - Indirect Composite
 - Provisionals
 - Snowcaps
 - Appliance (splint therapy)
 - Nightguards Hard Soft
 - Bleaching Tray

ELITE CHARACTERIZATION GUIDE

Incisal Translucency: Heavy Medium (standard) Light None
Surface Texture: Yes No
Occlusal Anatomy: Primary Secondary

