

REQUIRED INFORMATION

Dr: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____ Order Date: _____

Patient's Name: _____

Due Date (by 5 pm): _____ Authorized Signature: _____



2155 S James Rd
Columbus, OH 43232
(800) 334-1746
(614) 443-0328
Fax (614) 443-7311
contactccd@gmail.com
capcitydentallab.com

CROWN & BRIDGE

SELECT: Crown Bridge
 Inlay/Onlay Veneer

ZIRCONIA

- Full Contour Zirconia
- Layered Zirconia

PFM

- Non-Precious
- Semi-Precious

ALL CERAMIC

- IPS e.max CAD
- IPS e.max Press
- IPS Empress
- Composite

White Gold

- White Gold
- Yellow Gold HN
- Maryland Bridge
- NP SP

FULL CAST

- Non-Precious
- Semi-Precious
- Gold 46%
- Gold 60%
- White Gold
- Yellow Gold HN

C & B EXTRAS

- Rest
- Wing
- Fit to Partial
- Diagnostic Wax-Up
- Acrylic Temporary

IMPLANTS (Servicing all major implant brands)

- Stock Custom Parts Supplied by Doctor
- Size _____
- Manufacturer _____

REMOVABLE

SELECT: Full Denture Partial Unilateral Upgrade to Premium Teeth

CAST METAL PARTIALS

- NobilStar Vitallium
- Select Stage:
 - Complete (One Stage)
 - Frame Try-in
 - Frame with Bite Rim
 - Wax Try-in with Teeth
 - Process/Finish

METAL-FREE PARTIALS

- Flexible Partial Valplast
- Select Stage:
 - Complete (One Stage)
 - Wax Bite Rim
 - Wax Try-in with Teeth
 - Process/Finish

FULL DENTURES

- Standard Premium
- Select Stage:
 - Complete (One Stage)
 - Wax Bite Rim
 - Wax Try-in with Teeth
 - Process/Finish

COMBO PARTIALS

- NobilStar w/ Valplast
- Select Stage:
 - Complete (One Stage)
 - Frame Try-in
 - Set to Enclosed Frame
 - Wax Try-in with Teeth
 - Process/Finish

CLASP DESIGN

- Lab Select RPI
- Roach Akers

MAJOR CONNECTOR

- Lab Select Palatal Strap
- Full Palate Lingual Plate
- Horseshoe A-P Bar
- Lingual Bar

REMOVABLE EXTRAS

- Wax Bite Rim Rebase
- Custom Tray Hard Reline
- Bleach Tray Soft Reline
- Cusil # _____

IMMEDIATES

- Extract All
- Extract Tooth # _____

NIGHT GUARDS

- Hard
- Soft
- Hard/Soft

ATHLETIC GUARDS

- Athletic Guard

CROWN & BRIDGE CASE SPECIFICATIONS

SELECT Complete Coping
STAGE: Porcelain Bake Bisque Bake
 Glaze/Polish Finish

BUCCAL MARGIN

- Porcelain Butt Margin
- 360° Porcelain Butt Margin

STAINING

- Light
- Medium
- Heavy
- None

METAL DESIGN



PONTIC DESIGN



OCCUSAL CLEARANCE

- Light Full/In Occlusion Out of Occlusion

IF INSUFFICIENT ROOM

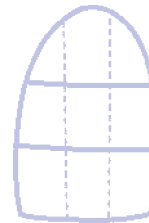
- Adjust Opposing
- Reduction Coping
- Metal Occlusal/Lingual
- Call

CONTACT

- Standard/Normal
- Medium/Broad
- Point

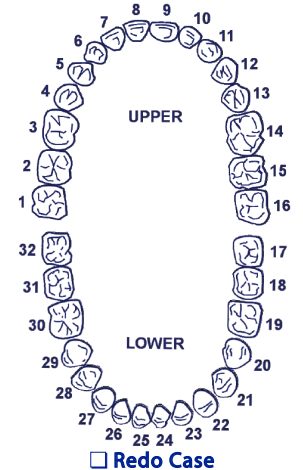
SPECIAL INSTRUCTIONS

TISSUE SHADE: Pink Ethnic Light Pink
SHADE: _____
STUMP SHADE: _____



TOOTH # _____

CIRCLE TEETH / ARCH



CASE MATERIALS ENCLOSED:

- Impressions Bite Registration Models Implant Parts

MATERIAL REQUESTS:

- Prescriptions Shipping Labels Boxes Other _____