PROTEC DENTAL LABORATORIES LTD.

Crown & Bridge • Dentures • Orthodontics

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SCAN QR FOR SHIPPING INSTRUCTIONS

☐ PLEASE PHONE ME CONCERNING THIS CASE

☐ SEND ME GOOD2GO VIRTUAL TREATMENT PREVIEW FOR COMMENTS AND APPROVAL

DOCTOR _____ DATE SENT _____

E-MAIL ADDRESS _____ DATE WANTED _____

ADDRESS _____

CITY _____ PROVINCE _____

POSTAL CODE _____ TELEPHONE _____

PATIENT'S NAME _____ PATIENT'S AGE _____
(please print)

Clear Fields

Print Form

PLEASE SEND SUPPLIES:

☐ RX SHEETS ☐ SHIPPING BAGS
☐ SHIPPING BOXES ☐ PLASTIC BAGS

FIXED PROSTHETICS

TYPE OF CROWN:
☐ Full Metal ☐ Implant ☐ Porcelain to Metal
☐ Bioceram® ☐ Nobleceram® ☐ Biocap®
☐ IPS e.max® ☐ IPS Empress® ☐ Noblecap®
☐ BruxZir® ☐ BruxZir Anterior® ☐ ZHTesthetic®
☐ iZir-BruxZir® ☐ Zceram ☐ ZceramFC
☐ Post and Core ☐ DigiTemps PMMA ☐ DigiTemps Telio CAD

CUSTOM IMPLANT ABUTMENT:
☐ Zirconia ☐ Zirconia with Titanium Base
☐ Titanium ☐ GoldHue Titanium
Brand _____

FULL METAL ALLOY: ☐ White Non-precious ☐ Yellow Low Gold ☐ Yellow High Gold

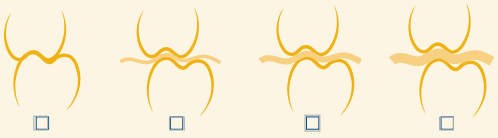
CERAMIC ALLOY: ☐ White Non-precious ☐ White Low Gold ☐ White High Gold

OCCLUSION: ☐ Metal ☐ Porcelain ☐ Combination

LABIAL MARGIN: ☐ Metal ☐ Combination ☐ Porcelain Butt

INTERPROXIMAL CONTACTS:

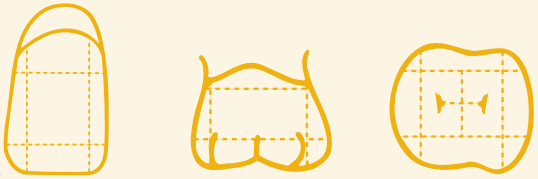
OCCLUSAL CONTACTS:



PONTIC DESIGN:

SHADE: _____

STUMPF: _____



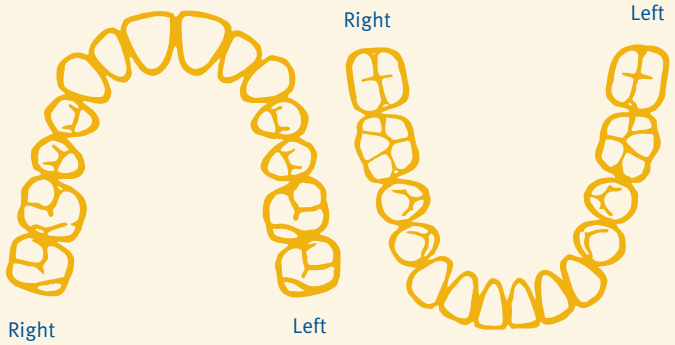
REMOVABLE PROSTHETICS

TYPE OF DENTURE:
☐ Complete Denture ☐ Soft Liner Denture
☐ DigiTec CAD Denture ☐ AvaDent Digital Denture
☐ Cast Metal Partial ☐ Acrylic Partial
☐ Valplast® Partial ☐ Valplast® / Cast Metal Partial
☐ TCS® Partial ☐ DuraFlex® Partial
☐ Over Denture ☐ Implant Denture

PROCEDURE:
☐ Bite Block ☐ Custom Tray
☐ Frame Try-in ☐ Setup Try-in
☐ Acrylic Finish ☐ Valplast® Finish
☐ TCS® Finish ☐ DuraFlex® Finish
☐ Acrylic Reline ☐ Soft Reline
☐ Rebase ☐ Repair

TEETH: ☐ Acrylic Premium ☐ Acrylic Economy
Shade _____ Mold _____
Brand _____ Type _____

DESIGN:



SPECIAL INSTRUCTIONS:

DOCTOR'S SIGNATURE: _____

TOP - LABORATORY COPY BOTTOM - DOCTOR'S COPY