

ACCOUNT # _____ PHONE # (_____) _____
DR. _____
PATIENT _____ / _____ / _____
(LAST) (FIRST)
DELIVERY DATE _____
(ALL DELIVERIES GUARANTEED BY 5PM)

PLEASE FILL OUT

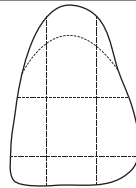
OFFICE USE ONLY

DR. TO TRIM DIE BISQUE BAKE TRY-IN
 METAL TRY-IN FINISH*

SPECIAL ENCLOSURES
 PHOTOS SHADE TAB
 STUDY MODELS OPPOSING MODEL
 OTHER _____

SHADE INSTRUCTIONS

DESIRED SHADE _____



*PLEASE E-MAIL PHOTOS TO MRCROWN@MRCROWN.COM

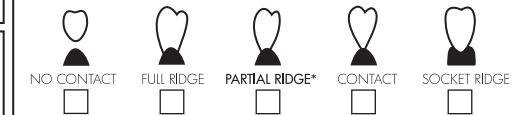
PORCELAIN FUSED TO METAL/GOLD

- NORITAKE FUSED TO NON-PRECIOUS*
- NORITAKE FUSED TO SEMI-PRECIOUS
- NORITAKE FUSED TO WHITE HIGH NOBLE
- NORITAKE FUSED TO YELLOW HIGH NOBLE
- CAPTEK™

BUCCAL DESIGN

- PORCELAIN JUNCTION MARGIN*
- HAIR LINE METAL MARGIN _____ MM
- PORCELAIN BUTT MARGIN (90° SHOULDER REQ.)

PONTIC DESIGN



FULL CAST RESTORATIONS

- HIGH NOBLE 62 (FULL GOLD CROWN)*
- FULL CAST WHITE HIGH NOBLE
- FULL CAST NON-PRECIOUS
- GOLD INLAY/ONLAY

COPING DESIGN

- ALL PORCELAIN COVERAGE
- METAL LINGUAL COLLAR*
- METAL OCCLUSAL EXCLUDING BUCCAL CUSP
- METAL OCCLUSAL INCLUDING BUCCAL CUSP

ALL-CERAMIC & COMPOSITE RESTORATIONS

- ZENO ZIRCONIA BRUXZIR®
- PROCERA® ALUMINA TARGIS/VECTRIS
- PROCERA® ZIRCONIA LAVA
- E.MAX® ESTHETICS PORCELAIN LAMINATE VENEER
- E.MAX® FULL CONTOUR

ANTERIOR LINGUAL DESIGN



PRO-TEMPS (TEMPORARY CROWNS)

- SINGLE UNIT TEMP SPLINTED*
- CAST METAL FRAME WIRE

OCCLUSAL STAINING

- NONE
- LIGHT*
- MEDIUM
- DARK

GINGIVAL EMBRASURES



IF NOT ENOUGH OCCLUSAL CLEARANCE

- CALL* METAL ISLAND SPOT OPPOSING
- SPOT PREP/REDUCTION COPING** SPOT PREP/MARK MODEL
- METAL OCCLUSAL/METAL LINGUAL**

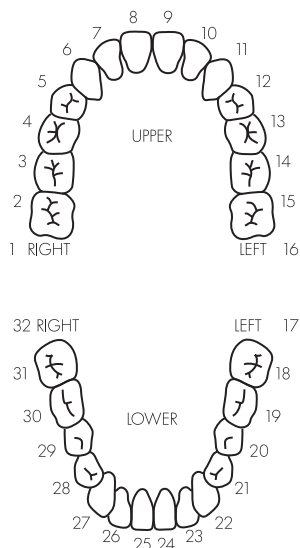
OCCLUSAL CONTACT

- IN-OCCLUSION OUT OF OCCLUSION*

PLEASE SEND THE FOLLOWING

- RX FORMS BOXES/BAGS
- MAILING LABELS OTHER _____

Rx PLEASE PRINT INSTRUCTIONS CLEARLY



**TEMP LABSLIP
PLEASE SEND MORE**

SIGNATURE _____ D.D.S. LICENSE # _____