

PRESCRIPTION PAD

| | | | |
|-------------|-----------|---------|--|
| DATE SENT | | DENTIST | |
| RETURN DATE | APPT TIME | PATIENT | |
| PRACTICE | | | |
| PHONE | AGE | M/F | |

STANDARD

Single Shade

- IPS e.max** Crown
- Zirconia** Monolithic Crown

PREMIUM

Multiple shades, layered options

- IPS e.max** Monolithic crown
- Zirconia** Monolithic crown
- Zirconia** Ultra high Translucent
- Lava Plus** Zirconia 3m Espe
- Add layered ceramic

METAL BASED CROWN AND BRIDGE

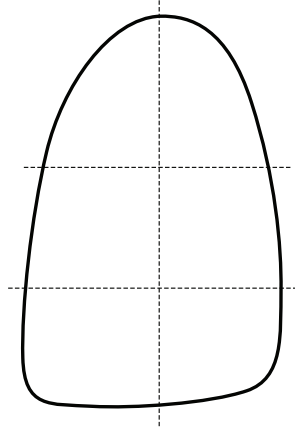
- PFM*** Precious Metal
- Porcelain margin**
- Gold Crown/Onlay**
- Post and Core**

IMPLANTS

Custom/Branded components

- Screw retained Crown/Bridge**
- Custom Zirconia abutment**
- Custom Titanium abutment**

SHADE DETAILS



18 17 16 15 14 13 12 11 21 22 23 24 25 26 27 28
48 47 46 45 44 43 42 41 31 32 33 34 35 36 37 38

INSTRUCTIONS

Occlusal contact: -0.3mm -0.1mm 0.0mm

Adjust opposing if required: Y/N

Tick for Branded implant components.

DENTISTS SIGNATURE