

Date: _____

Doctor: _____

Patient: _____

Time Wanted: _____ Sex: _____ Age: _____



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evergreendentalartstudio@gmail.com

PFM Zirconia Emax/Empress Full Gold Wax-up Other

R_x_____

SHADE _____ STUMP _____

OCCLUSAL STAINING None Light Medium Dark

- ALLOY High Gold Semi Precious
 - OCCLUSION Gold Porcelain
 - LABIAL MARGIN Fine Gold Collar Porcelain Butt Margin Porcelain to Margin
 - CENTRIC CONTACT Positive Contact Light Positive
 - Foil Relief Out of Occlusion
 - LATERAL EXCURSION Cuspid Guidance Group Function
 - CONTACT Normal Broad Point
 - PONTIC DESIGN Harmony Cone Hygenic Ovate Ridge lap
-
- IF INSUFFICIENT CLEARANCE Reduce Prep Reduce Opposing
 - Reduce Both Please Call

Doctor's Signature _____

● Lab Use Only

- Impression Opposing Bite Study Model Other