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Phone: 450.686.9373
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Date: _____ Dentist: _____

Patient: _____

Due Date: _____

Appointment Date & Time: _____

Final Shade: _____ Stump Shade: _____



I used **LAB** for my pictures:
Please email pictures to info@styledent.com

In lab shade taking: _____
Please provide patient's phone: _____

ADDITIONAL INFO

Materials:

- E.max** Full Contour Layered
- Zirconia HS** Full Contour Layered
- Zirconia HT** Full Contour Layered

Type:

- Crown Bridge
- Inlay Veneer

Implants:

- Brand: _____
- Platform: _____
- Dentist will order parts
- Lab will order parts
- Original components
- Compatible components
- Scanbody reference: _____
- Screw-retained
- Cement-retained
- Hybrid Custom Abutment
- Atlantis

Other:

- Diagnostic wax-up
- Temporary crown
- PMMA prototype

Full Arch Solutions

- Micro-layered Full Contour Zirconia Bridge
- Micro-layered Double Structure Bridge
- BDT Technique (Peek/e.max)

Acrylic on bar: Titanium CoCr

- Wrap Around
- Dolder
- ReBourke
- Montreal
- Other: _____

If There is Not Enough Clearance:

- Adjust opposing tooth
- Reduction Coping
- Call or text me: _____

Interproximal Contacts:

- Light
- Medium
- Heavy

Occlusal Contacts:

- Out of occlusion
- Light
- Shimstock

Signature: _____ License: _____

PLEASE KEEP PINK COPY.