Applegate Dental Ceramics Inc.

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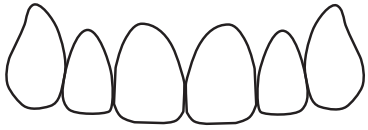
Nickolas G. Boosalis, CDT

DOCTOR		DUE DATE:
PATIENT		By 5 p.m. (no a.m.)
APPROX. AGE	SEX M F	PAN #

INVOICE:

PATIENT'S RIGHT SIDE — PATIENT'S LEFT SIDE

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17



SHADE

STUMP

☐ DELICATE ☐ MEDIUM ☐ VIGOROUS

VALUE: ☐ High ☐ Medium ☐ Low

OCCLUSAL STAIN:
☐ None ☐ Light ☐ Medium ☐ Dark

DEGREE OF TRANSLUCENCY:
☐ Minimal ☐ Moderate ☐ Maximum

RETURN: ☐ Die Trim ☐ Bisque ☐ Metal Try-In ☐ Individual ☐ Splinted

NON-METAL RESTORATION:
☐ IPS e.max / Empress ☐ Lava-Cerec ☐ Procera

COPING DESIGN: (Please Circle One)

Full Porcelain Coverage | Full Metal Collar | Buccal Cusp (Porcelain/ Metal Occlusal) | Full Metal Occlusal (Veneer) | Full Coverage Lingual | 2/3 Coverage Lingual

PONTIC DESIGN: (Please Circle One)

Sanitary | Full Ridge | Modified | Bullet | Ovate

MARGIN DESIGN: ☐ No Metal To Show ☐ Hairline Metal Margin ☐ Porcelain Butt

IF NO OCCLUSAL CLEARANCE: ☐ Call
☐ Metal Occlusion ☐ Adjust Opposing
☐ Reduction Coping ☐ Ideal Occlusion

DR. SIGNATURE	LICENSE NO.	DATE

LAB USE ONLY

DATE RECEIVED:

ITEMS RECEIVED:

____ IMPRESSIONS ____ OPPOSING
____ BITE REGISTER ____ STUDY MODELS
____ PHOTOS ____ PARTS (See list below)

METAL _____

GR _____

INITIALS

INSTRUCTIONS:

Booked
Models
Die Trims
Bite
Wax
Metal Finish
Opaque 1st / 2nd
Porc. Margin
Build, Grind Glaze
FGC Finishing
Quality Control
Billed
Bagged