

RX Date: ..... Due Date: .....

Doctor: ..... Phone: .....

Address: .....

Patient: ..... Age: ..... Sex: .....

Please Send:  RX pads  Shipping boxes  Mailing labels

### Type of Restoration

#### ALL-CERAMIC

- IPS e.max monolithic
- IPS e.max layered
- IPS Empress
- e.max pressed to zirconia

#### PORCELAIN FUSED TO METAL

- PFM high noble yellow
- PFM high noble white
- PFM semi precious
- PFM non precious

#### IMPLANTS

- Titanium abutment
- Zirconia abutment
- Screw retained
- Cement retained

#### ZIRCONIA

- Full zirconia
- Ot Implant zirconia (translucent zirconia)
- Porcelain layered zirconia

#### FULL METAL

- High noble yellow
- Noble yellow
- Noble white
- Non-Precious

#### PROVISIONALS

- Esthetic temporaries
- Diagnostic wax-up
- Preparation guide
- Temporary stent

#### PONTIC DESIGN



#### MARGIN

- Porcelain Butt
- Porcelain Metal
- Fine metal band 360°

- No metal showing
- High lingual
- Small lingual band
- Metal Occlusion

#### INTERPROXIMAL CONTACT

- Broad
- Point
- Natural

#### OCCLUSAL CONTACT

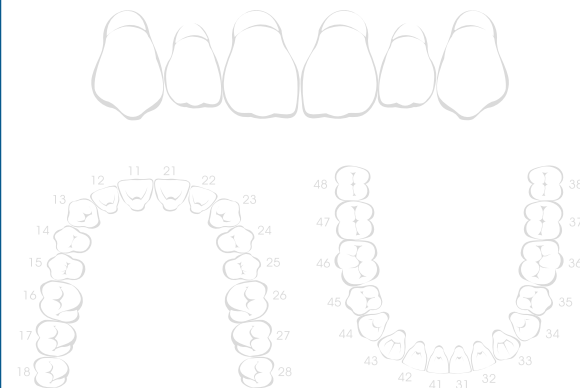
- Foil relief
- Cusp Fossa
- Positive

#### IF NO OCCLUSAL CLEARANCE

- Adjust opposing
- Metal Island
- Follow Dr's Preferences
- Reduction coping
- Metal Occlusion
- Call me

#### Shade

#### Stump shade



#### OCCLUSAL STAIN

- None
- Light
- Medium
- Dark

#### SURFACE TEXTURES

- Smooth
- Medium
- Heavy

#### RX INSTRUCTIONS

Call Doctor

Doctor's Signature .....

Photos sent to: [digital@otimplantlab.ca](mailto:digital@otimplantlab.ca)