

Dr. \_\_\_\_\_ DATE SENT \_\_\_\_\_

DATE DUE \_\_\_\_\_

PATIENT \_\_\_\_\_ TIME \_\_\_\_\_

AGE \_\_\_ MALE \_\_\_ FEMALE \_\_\_ PLEASE ALLOW 10 WORKING DAYS FOR STANDARD RESTORATIONS.

**PORCELAIN RESTORATIONS**

- No. of Units
- \_\_\_ Porcelain Fused to Metal
- \_\_\_ Porcelain Fused to Zirconia
- \_\_\_ VIVID
- \_\_\_ Lithium Disilicate Press
- \_\_\_ CAPTEK

Please Check one if needed

- \_\_\_ Metal Occlusion
- \_\_\_ Full Metal Margin
- \_\_\_ Porcelain Butt Margin
- \_\_\_ Zirconia Occlusion

**PFM ALLOY**

- \_\_\_ Noble: Palladium
- \_\_\_ High Noble Yellow

**FULL CAST RESTORATIONS**

- \_\_\_ FCC
- \_\_\_ Inlay/Onlay
- \_\_\_ ZirCrown (All Zirconia)

**FCC ALLOYS**

- \_\_\_ 50% FCC Gold
- \_\_\_ Noble Silver

**CONTACTS**

- \_\_\_ Closed
- \_\_\_ Open:  Mesial  Distal

**TYPE OF PREP**

- \_\_\_ Chamfer \_\_\_\_\_ Feather Edge
- \_\_\_ Shoulder \_\_\_\_\_ Shoulder/Bevel

**IMPLANTS**

Manufacturer: \_\_\_\_\_

Diameter: \_\_\_\_\_

Ref. #: \_\_\_\_\_

Healing Abutment: \_\_\_\_\_

**CUSTOM ABUTMENT**

- \_\_\_ Titanium
- \_\_\_ Zirconia Hybrid

**GUIDED IMPLANT SURGERY**

- Please call to Treatment Plan
- 3D Print Guide from Doctor's Plan

**NIGHT GUARDS**

- Hard Splint
- Max.  Mand.



424 W. 5th Street  
Red Wing, MN 55066  
(651) 388-8220  
1-800-659-8220

CreationDentalCrowns.com

All restorations are made in the U.S.A. Creation Dental does not outsource.

- Please send **R<sub>x</sub>** forms
- Please send mailing boxes

**PONTIC DESIGN**

- |               |                  |             |                  |               |
|---------------|------------------|-------------|------------------|---------------|
| FULL<br>RIDGE | PARTIAL<br>RIDGE | NO<br>RIDGE | POINT<br>CONTACT | NO<br>CONTACT |
|               |                  |             |                  |               |

**RIDGE RELIEF**

- None
- Slight
- Med
- Heavy

Shade \_\_\_\_\_

Gingival neck color  Yes  No

Photos sent to  
Yuko@creationdentalcrowns.com

Additional information and notes:

**CHARACTERIZATION**



- Please call regarding this case.
- Please be present at the seating of this case.

SIGNATURE \_\_\_\_\_

LICENSE NUMBER \_\_\_\_\_