

Prezi-Dental

Dental Laboratory

TRY-IN
Date _____

BISQUE TRY-IN
Date _____

PLEASE SEND
 Rx Forms
 Case Bags

96-18 63rd Drive, Suite 100
Rego Park, NY 11374 / Phone: 347-997-3060

Doctor _____ Phone _____

Patient (Please Print) _____

Date Prepared _____ Appointment Date _____

Date Due - Deliver By _____

ALL-CERAMIC

Full Zirconia Crown IPS e.max Full Contour Crown

Porcelain Fused to Zirconia IPS e.max Layered Crown

Zirconia Veneer IPS e.max Veneer

Zirconia Inlay/Onlay IPS e.max Inlay/Onlay

Zirconia Custom Abutment IPS e.max Ffeldspathic

ADDITIONAL SERVICE

Diagnostic Wax-Up

Processed Temporary

Maryland Bridge

Metal Occlusal Surface

Metal Lingual

PFM (BEGO)

Wirobond C (Co,Cr) High Noble Yellow (98% Au)

Wirocer Plus (Ni, Cr) High Noble Yellow (90% Au)

Wirion 99 (Be Free) High Noble White (75% Au)

Wiro Light (Oxide, Be Free) High Noble White (40% Au)

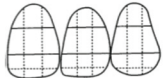
ENCLOSED

Impression Bite

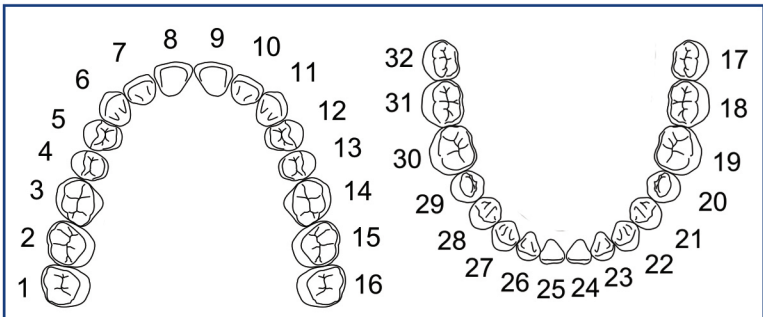
Analog Models

Photos Old Crown

Further Rx Instructions: _____



SHADE



ATTENTION

Please Call Doctor before proceeding with case

LAB USE ONLY
