

Dr Name: _____

Surgery Address: _____

Surgery Phone: _____

Surgery Email: _____

Scanner Brand: _____

Scan ID: _____

Patient Name/ID: _____

Dr Signature: _____

Due Date: _____

EXPRESS DELIVERY

Special Instructions: _____

PLEASE TICK OPTIONS BELOW

RESTORATION

- Crown
- Bridge
- Inlay/Onlay
- Veneer
- Post & Core
- Maryland Bridge
- Cantilever Bridge

Wax Up

- Digital wax up

Pink Gum

- Porcelain

CROWN OPTIONS

PFM

- Non-Precious
- Semi-Precious
- High-Precious (40% Gold)
- High-Precious (74% Gold)

Margin

- 180° Porcelain Buccal Margin
- 360° Porcelain Margin

ALL CERAMIC

Lithium Disilicate

- IPS e.max (layered)
- IPS e.max Press (monolithic)
- IPS e.max CAD
- IPS e.max Veneers

Zirconia

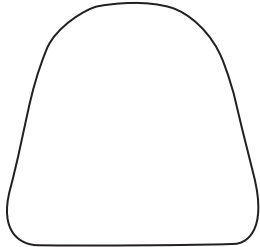
- PFZ (layered)
- FMZ (monolithic)
- FMZ-T (translucent)
- Zirconia Veneers

MAC (Metal reinforced all ceramic)

- MAC Crown

PEEK Biocompatible Hybrid

- PEEK Crown



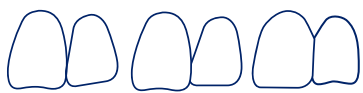
SHADE INSTRUCTIONS

Basic Shade: _____

Stump Shade: _____

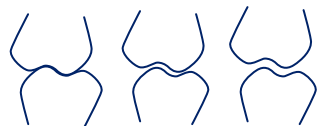
Tooth Number(s): _____

EMBRASURE



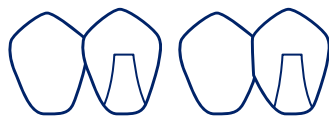
- Natural★
- Open
- Closed

OCCLUSAL CONTACT



- Heavy
- Light★
- Open

PROXIMAL CONTACT



- Normal
- Extended★

PONTIC DESIGN



-
-
-
-

★ Indicates option default if none selected

Please send your order form to contact@eocalab.com.au