

Professional Dental Company
 611 Omaha St.
 P.O. Box 1257
 Sioux City, IA 51102
 712-252-4034
 800-831-0936
 Fax 712-252-3037

Billings Dental Laboratories
 6108 Maple Street
 P.O. Box 4258
 Omaha, NE 68104
 402-551-5954
 800-747-5441
 Fax 402-551-0498

Jaeger Dental Company
 2218 West 2nd Street
 P.O. Box 4908
 Grand Island, NE 68802
 308-382-0235
 800-289-3525
 Fax 308-382-2208

Dr. _____ Address _____ City _____

Patient's Name _____ Age _____ Sex _____

Date Sent: _____

Please send:

- Boxes Order Forms
 Mailing Labels

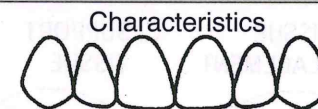
Next Appt _____ Time _____ A.M.
 P.M.

Delivery Preference Route Mail UPS

CROWN AND BRIDGE

- Porcelain Fused to Metal
 Phoenix/High Noble Yellow
 Noble White
 Base Metal (N.P.)

- All Metal
 Mini Gold (Y+)
 High Noble Yellow (Firmilay)
 Noble Yellow (Midas)
 Noble White (Albacast)
 Base Metal (N.P.)



Shade _____

Stump Shade _____

- Reason for Treatment
 Closing Diastema Discolored Teeth
 Misalignment Lengthen

ALL CERAMIC

- Zirconia:**
 FCZ (Full Contour Zirconia)
 Esthetic FCZ HT (High Translucent)
 PFZ (Porcelain Fused Zirconia)
 Porcelain Veneer Inlay/Onlay
 Monodont Emax

IMPLANTS

- Brand _____ Type _____
 Diameter _____ Cuff _____
 Titanium Gold Hue
 Abutment: CAD/CAM Manufacturers
 Implant Surgical Guide

DENTURES AND PARTIALS

- TRIAL FINISH
 Premium Denture Service
 Economy Denture Service
 Immediate Denture Service Premium
 Economy
 Treatment Denture Service (pink posteriors)
 I.D. Tab
 Flexible Clear Splint
 Nightguard Clear Hard Splint
 Dual Laminate Processed
 Dual Laminate Vacuum Formed
 Mouthguard (color optional)

- Flipper with wire clasp(s)
 Essex Partial Soft Gasket Partial
 Valplast Soft liner
 Duraflex
 Tray Intra-oral Tracer
 Bite Block Esthetic Control Base

- Reline Repair
 Rebase

TEETH

- Surgical Template
 Bleaching Tray
 Ivoclar Blueline
 Trubyte Portrait
 Trubyte Classic

CASE DESIGN

- Wax Presentations Occlusal Staining Occlusal Contact
 Full Crown Yes Foil # of layers _____
 3/4 Crown No In Occlusion
 Inlay/Onlay Anatomy If insufficient room Reduce and mark
 Temporary Crown Match Adjacent Please call
 Porcelain Butt Margin Primary Interproximal Contacts
 Secondary Scrape Adjacent
 Contact - Heavy Light

PONTIC DESIGN

- Full Ridge Partial Ridge No Ridge Point Contact No Contact

METAL DESIGN

- (A) (B) (C) (D) (E) (F) (G) (H) (I) (J) (K) (L) (M) (N)

ORTHO/SLEEP APPLIANCES

- SLEEP APPLIANCES
 Oasys Somnodent Myerson EMA
 Respire EMA First Step
- ORTHO Hawley Retainer Vacuum Formed Retainer
 Other _____

ADDITIONAL INSTRUCTIONS

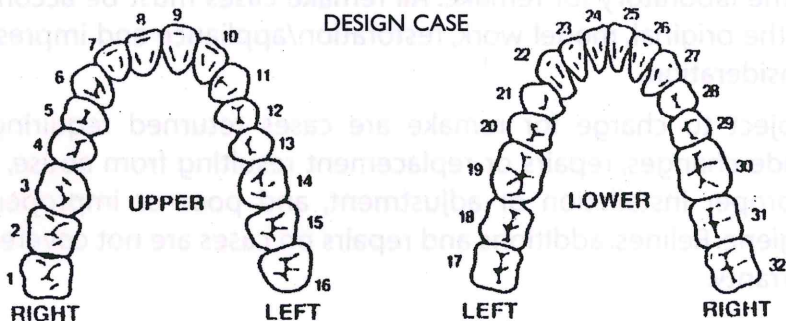
- Call Upon Receipt of Case Return to Dr. for Die Trim

Shade _____ Mould _____ Plastic _____ Porcelain _____

- Design and Estimate Only
 Vitallium Plus 2000 Lifetime Warranty
 Micro Mesh Partial
 Boys Town Partial
 Laser Weld

All Vitallium partials use Vitallium 2000 plus.

- Saddle Lock Hidden Clasp
 D.E. Hinges
 Framework Only Teeth in wax
 Bite rim Finish
 Composite Cure-ins
 Veneer Clasps



Signature _____ License # _____