



201 FINNEY DRIVE SW
 HUNTSVILLE, AL 35824
 P: 1-800-376-6884
 F: 1-256-232-7360
 BARKSDALEDENTALLAB.COM

DOCTOR'S NAME _____

LICENSE # _____

ADDRESS _____

PHONE # _____

CITY / STATE / ZIP _____

EMAIL _____

PATIENT'S NAME _____

AGE _____

DATE WRITTEN _____

GENDER _____

Please deliver the day before patient appointment.

PATIENT APPT _____

DUE DATE _____

Approved RUSH! I spoke with _____

Date/Time of Conversation: _____

FIXED RX

QC

B

CROWN & BRIDGE

RESTORATION TYPE

TOOTH

- | | |
|-----------|--|
| CERAMIC | <input type="checkbox"/> IPS Emax _____ |
| | <input type="checkbox"/> Full Contour Zirconia (FCZ) _____ |
| | <input type="checkbox"/> Vivid Esthetic Zirconia _____ |
| | <input type="checkbox"/> Porcelain Fused to Zirconia (PFZ) _____ |
| | <input type="checkbox"/> CAD/CAM Provisional Temp _____ |
| PFM | <input type="checkbox"/> Base <input type="checkbox"/> Noble* <input type="checkbox"/> Hi Noble* _____ |
| | <input type="checkbox"/> Porcelain Butt Margin _____ |
| | <input type="checkbox"/> Metal Lingual _____ |
| | <input type="checkbox"/> Occlusal/Metal Island _____ |
| FULL CAST | <input type="checkbox"/> White <input type="checkbox"/> Yellow _____ |
| | <input type="checkbox"/> Base <input type="checkbox"/> Noble* <input type="checkbox"/> Hi Noble* _____ |

* Alloy Surcharges Applied

Check for Signature Department

IMPLANTS

Implant System / Size: _____

ABUTMENTS

- Cement Retained Screw Retained
 Leave Access Hole, Do Not Cement In-Lab

CUSTOM ABUTMENT

- Titanium Zirconia Ti Base
 Gold Hue

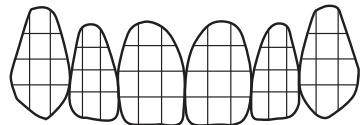
PREP STOCK ABUTMENT

- Supplied Lab Provided

INSTRUCTIONS



SHADE MAP



SHADE _____

DOCTOR'S SIGNATURE _____

OFFICE CHECKLIST

- IMPRESSION PHOTOS
 BITE SHADE TABS
 ARTICULATOR IMPLANT PARTS
 STUDY / PRE-OP MODELS
 OTHER _____

Rush dates not guaranteed without prior approval. Working time for cases refers to M-F 8A-5P, not including holidays, weekends, or transit time to/from lab. Accounts with outstanding balances 90+ are subject to automatic COD status if unreachable. Our 2-Year Warranty covers material failure or workmanship on most of our products. All remakes must be returned with original model work and all case materials for evaluation. If a case is returned for remake without the necessary evaluation items, the remake will be processed at full charge. Client agrees to pay any collection costs incurred in the collection of any delinquent account including reasonable attorney fees. These terms are subject to change without notice. Please do not hesitate to give us a call if you have questions or concerns at 800-376-6884. Revision 3/23/21