

647 Veterans Blvd Ste B
Redwood City, Ca 94063
www.biodentdentallab.com

Dr. Name: _____ Due Date: _____
Address: _____
City: _____ ST: _____ Zip: _____
Patient Name: _____ Male / Female Age _____

Tel: 650-802-8069

Email: biodentalab@yahoo.com

Teeth To Be Restored

UPPER: 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16
LOWER: 32 31 30 29 28 27 26 25 24 23 22 21 20 19 18 17



Stump: _____

Custom Shade
In-Lab ___ In Dr. Office ___ Photo ___

Cervical ___ Body ___ Incisal ___

All Ceramics

- ☐ layered IPS e.max Veneers
- ☐ Cutback IPS e.max Crowns
- ☐ Stained IPS e.max Crowns
- ☐ Feldspathic
- ☐ PFZ (Porcelain Fused to Zircornia)
- ☐ Cutback Zircornia
- ☐ Classic FCZ (Full Contour Zircornia)
- ☐ Econo FCZ (Full Contour Zircornia)
- ☐ LAVA Zircornia

Porcelain Fused To Metal

- ☐ PFM To Non-Precious
- ☐ PFM To Semi-Precious
- ☐ PFM To White High Noble

Full Metal

- ☐ Semi-Precious White
- ☐ Semi-Precious Yellow
- ☐ High Noble White
- ☐ High Noble Yellow ___52%

Characterization

- Translucency Volume ☐Light ☐Medium ☐Heavy
Lobing ☐Light ☐Medium ☐Heavy
Texture ☐Smooth ☐Medium ☐Heavy
Stain Color ☐Yellow ☐Ochre ☐Brown ☐Black
Pit Stain ☐No ☐Yes ☐Fissure
☐Fissure & Groove
- Length of Centrals _____mm
(from Cervical Margin of #8)

Vertical Index(CEJ to CEJ)

Anterior _____mm
Posterior(R) _____mm
Posterior(L) _____mm

Occlusion & Contour

- Occlusion Embrasures
☐Touching ☐Closed
☐Slightly ☐Open
☐Open by _____mm

Proximal Contact

☐Normal ☐Broad/Wide ☐Tight

Pontic Design

- Sanitary Half Ridge lap
 Bullet Full Ridge lap
 Ovate

Margin Design

- ☐Lingual Band Only
- ☐Porcelain Facial Margin
- ☐360 Porcelain Margin
- ☐360 Metal Margin

If No Occlusal Clearance

- ☐Please Call
- ☐Reduction Coping
- ☐Reduce Opposing

Metal Lingual Design

☐ Full ☐ 3/4 ☐ 1/2

Metal Occlusal Design

☐ Full ☐ 3/4 ☐ 1/2 ☐ Island

Diagnostic Wax-Up

- ☐Prep Model
- ☐Bite Matrix

Temporary

PMMA

Shape

Smile Guide Design # _____
Match Photographs or Ideal

Instructions:

SIGNATURE OF DENTIST

The person signing this authorization accepts sole responsibility for full payment, all legal fees and collection costs.

DENTIST LICENCE NO.

Crown & Bridge Rx

Thank you!