



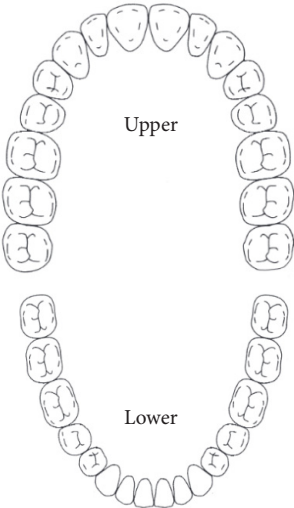
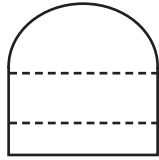
392 Fore St. Portland, ME 04101 • Lab # (207)536-0082 • Cell # (207)317-7042 • info@vkdentalstudio.com

Patient Name: _____ Date in Lab: _____

Patient Age: _____ Due Date: _____

Female Male Feminine Masculine

Practice Number & Name: _____ Doctors Name (please print clearly): _____

Tooth Shade:	Tissue Shade:	Stump Shade:	
<p>Instructions:</p> <div style="text-align: center; margin-top: 20px;">  </div>			<p style="text-align: center;">Dentures:</p> <p> <input type="checkbox"/> Upper <input type="checkbox"/> Full Denture <input type="checkbox"/> Acrylic Partial <input type="checkbox"/> Custom Tray <input type="checkbox"/> Lower <input type="checkbox"/> Immediate Denture <input type="checkbox"/> Cast Partial <input type="checkbox"/> Bite Rims <input type="checkbox"/> Reline <input type="checkbox"/> Repair <input type="checkbox"/> Try-In <input type="checkbox"/> Finish </p>
			<p style="text-align: center;">Implant Retained Dentures</p> <p> <input type="checkbox"/> Implant Supported Overdenture <input type="checkbox"/> All on 4 Conversion Denture <input type="checkbox"/> Titanium Bar <input type="checkbox"/> MKI Bar <input type="checkbox"/> Hybrid Denture <input type="checkbox"/> PMMA <input type="checkbox"/> Zirconia </p>
			<p style="text-align: center;">Implant Systems:</p> <p> <input type="checkbox"/> Straumann <input type="checkbox"/> Nobel <input type="checkbox"/> Zimmer <input type="checkbox"/> Bio Horizon <input type="checkbox"/> Megagen </p>
			<p style="text-align: center;">Crown & Bridge</p> <p> <input type="checkbox"/> Zirconia <input type="checkbox"/> Emax <input type="checkbox"/> PMMA <input type="checkbox"/> Implant Crown <input type="checkbox"/> Screw Retained <input type="checkbox"/> Cement Retained </p> <div style="text-align: center; margin-top: 10px;"> <p>Crown Design</p>  </div>
			<p style="text-align: center;">Miscellaneous</p> <p> <input type="checkbox"/> Surgical Guide <input type="checkbox"/> Night Guard <input type="checkbox"/> 3D Printed Models </p>
Doctors Signature			