



DENTAL LABORATORY

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RUSH CASE

ID: _____

DUE DATE: _____

Doctor's Name: _____

Office: _____

Patient's Name: _____ Sex: M F

Today's Date: _____

CROWN & BRIDGE INSTRUCTIONS

- Single Crown
- Bridge
- Metal Coping Try-In
- Other: _____

- PFM Restorations
 - Non-Precious
 - Semi-Precious
- Full Cast Restorations
 - Yellow Gold
 - White Gold

All-Ceramic Restorations:

- BruxZir®
- PFZ (Porcelain-Fused-to-Zirconia)
- IPS e.max®
- Full-Contour Zirconia

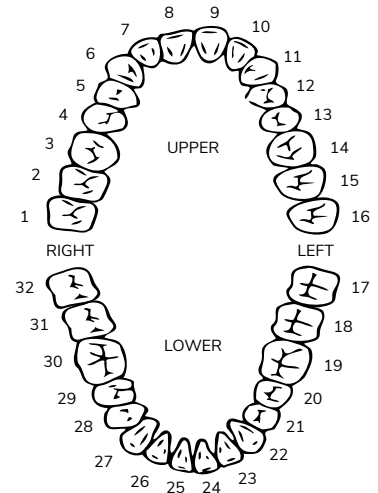
- Wide Embrasures
- No Metal Collar
- Diagnostic Wax-Up
- Provisional Crown

If No Occlusal Clearance:

- Metal Occlusion
- Reduce Abutment
- Reduce Opposing

Tooth #: _____

Tooth Shade: _____



REMOVABLE INSTRUCTIONS

Full Denture

- Upper
- Lower

Partial Denture

- Valplast® Flexible
- Partial
- Acrylic Partial
- Cast Partial

Removable Services

- Custom Tray
- Bite Block
- Teeth Setup
- Teeth Reset
- Finish
- Framework
- Try-In
- Repair

ADDITIONAL INSTRUCTIONS

IMPLANT INSTRUCTIONS

Implant Type

- Screw-Retained
- Cement-Retained

Dr. Signature: _____ Date: _____