



Commander In Teeth

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Doctor _____ Phone # : _____

PLEASE PRINT CLEARLY

Address _____

Patient _____ Sex : ☐ M ☐ F Age : _____

Date : _____

Due Date : _____ / _____ / _____

PORCELAIN FUSED

- ☐ Non-Precious ☐ High Noble
☐ Semi-Precious ☐ Noble
☐ Maryland Bridge ☐ Post & Core
☐ Integrated Crown Post & Core

BUCCAL MARGIN DESIGN

- ☐ Porcelain Butt Margin
☐ Metal Margin _____ mm

METAL DESIGN

- ☐ 3/4 Metal Occlusal
☐ Full Metal Occlusal
☐ Full Metal Occlusal
☐ 1/2 Anterior Metal Lingual
☐ No Metal Collar
☐ Metal Lingual Collar
☐ 360° Metal Collar

PONTIC DESIGN

- ☐ No Contact
☐ Full Ridge
☐ Modified Ridge
☐ Point Contact
☐ Ovate Ridge

ALL METAL RESTORATION

- ☐ 40% Gold ☐ Non-Precious
☐ Noble ☐ Semi-Precious

ALL CERAMIC RESTORATION

- ☐ E.Max Press ☐ Zirconia Layered
☐ E.Max CAD ☐ Zirconia Full
☐ Bruxzir ☐ Contour
☐ Composite ☐ Aesthetic Bruxzir
☐ Temporary Crowns

VENEERS

- ☐ E.Max Veneers
☐ Layered Zirconia Veneers
☐ Empress Veneers

ONLAY / INLAY

- ☐ Empress ☐ NP
☐ Zirconia ☐ SP

IMPLANT

- ☐ Non-Precious ☐ Zirconia
☐ Semi-Precious ☐ Cementable
☐ Screw Retained

NIGHTGUARDS

- ☐ Hard/Soft ☐ Hard ☐ Soft

PARTIAL & DENTURE

- ☐ FUD ☐ FLD ☐ Reline
☐ PUD ☐ PLD ☐ Repair
☐ Valplast ☐ Flexite
☐ Vitallium Framework

GUM SHADE

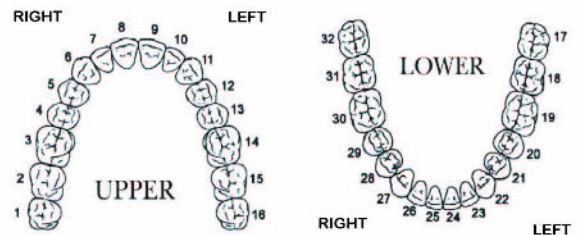
- ☐ Light Lucitone 199
☐ Medium Lucitone 199
☐ Light Meharry ☐ Dark Meharry
☐ Medium Meharry

PLEASE CHECK ONE

- ☐ Bite Block ☐ Metal Try-In
☐ Teeth Try-In ☐ Custom Tray
☐ Finish ☐ Hard Base Plate



SHADE



SPECIFIC INSTRUCTION

Dr. Signature : _____ D.D.S. License No. _____