



Digital Case Entry Form

Lab / Office Name: _____ Account #: _____ Case ID: _____

Phone #: _____ Email: _____

Address: _____ Deliver by: _____

- Digital Files Uploaded Physical Model (To be sent)

Fixed

Removable

- Full Contour Crown (Zirconia) #6660016
- Custom Abutment Implant Crown #6660019
- Custom Abutment Only #6660020

Custom Abutment Material

- Titanium Gold Hue

- Economy Printed Denture #6660021
- Premium Milled Denture #6660023

Denture Tooth Shade: A1 A2 A3 A3.5 B1 BL2

Denture Tooth Shade: Original
 Light Pink
 Dark Pink

Tooth #: _____ Tooth Shade: _____

Implant Brand: _____ Implant Line: _____

Restorative Platform Diameter: _____

Emergence Profile:

-  No Gingival Support
-  Contoured Gingiva
-  Anatomical Supported

Denture Procedures:

Item

- Scan #6660007
- Design #6660008
- 3D Printed Try-In #6660014
- Mill #6660009
- Finish #6660011
- Prep-work #6660012
- Implant Overdenture #6660013

Special Instructions:

Signature: _____

License #: _____ (Clinicians Only)

<p>Internal Use: Work Order #: _____</p>
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