



# NEW CERA DENTAL LAB

#21 (2nd Floor), 3871 N Fraser Way,  
Burnaby, B.C. V5J 5G6

Tel. 778-990-2804

E-mail: [newceralab@gmail.com](mailto:newceralab@gmail.com)

DOCTOR \_\_\_\_\_ DATE SENT: \_\_\_\_\_

PATIENT \_\_\_\_\_ Tel \_\_\_\_\_

DUE DATE: \_\_\_\_\_ / <sup>AM</sup> / <sup>PM</sup> ☐ Try-in ☐ Finish

Shade	Stump Shade	All Ceramic	Ceramic /Metal(PFM)	Full Metal Cast
	<input type="checkbox"/> Photo e-mailed <input type="checkbox"/> Endo Treated	<input type="checkbox"/> e.max® Zir CAD/CAM <input type="checkbox"/> e.max® Press <input type="checkbox"/> Full Zirconia	<input type="checkbox"/> Yellow High Noble <input type="checkbox"/> White Semi-Precious <input type="checkbox"/> White Non-Precious	<input type="checkbox"/> Yellow Gold <input type="checkbox"/> White Gold <input type="checkbox"/> White Non-Precious

**PFM Margins** ☐ Porcelain Butt ☐ Porcelain To Margin ☐ Lingual Metal (Fine, Heavy) ☐ 360° Metal

**Metal Design** ☐ Metal Lingual ☐ Metal Occlusion ☐ Metal Island

Pontic Design					Occlusal Contact	If insufficient room
<input type="checkbox"/> Ridge Lap	<input type="checkbox"/> Saddle	<input type="checkbox"/> Ovate	<input type="checkbox"/> Cone	<input type="checkbox"/> Hygienic	<input type="checkbox"/> Positive <input type="checkbox"/> Foil Relief <input type="checkbox"/> Extra Relief	<input type="checkbox"/> Metal Occlusion <input type="checkbox"/> Reduction Coping <input type="checkbox"/> Adjust Opposing

**Contacts** (Embrasures) ☐ Broad ☐ Normal ☐ Point

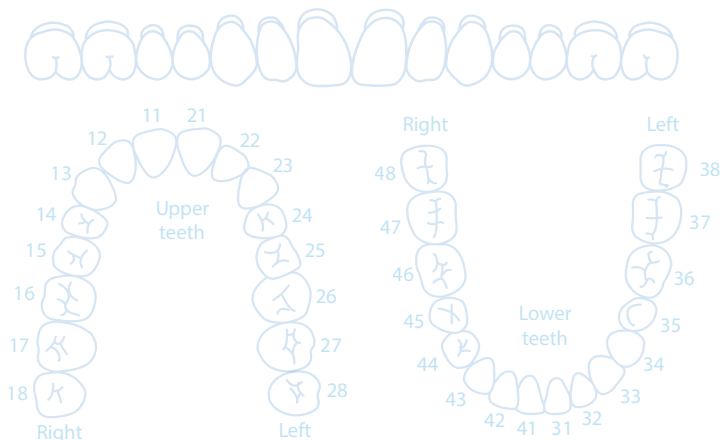
**Denture Type** ☐ BPS SR IVOCAP® Complete & Partial ☐ BEGO Wironium® Cast Metal Partial  
☐ Acrylic Partial ☐ Valplast Partial ☐ Complete ☐ Immediate

**Procedure** ☐ Custom Tray ☐ Bite Block ☐ Frame Try-in ☐ Setup try-in ☐ Reline ☐ Rebase ☐ Repair

**Miscellanies** ☐ Dual-flex Splint ☐ Soft Acrylic Splint ☐ Hard Acrylic Splint ☐ Gelb Splint ☐ Essix Retainer  
☐ Bleaching Tray ☐ Study Model ☐ Diagnostic Wax-up ☐ Sleep Well™ Sleep Appliance  
☐ Single Layer Sports Guard ☐ Play Safe Sports Guard(Multi Layers)

**Ortho Appliance** ☐ Hawley Retainer ☐ 3 to 3 Lingual Wire ☐ Band and Loop  
☐ TPA ☐ LLA ☐ Nance Holding Arch ☐ RPE

Rx



Please Send: ☐ Prescription Pad ☐ Bag ☐ Shipping Box ☐ Please Call Doctor