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 Registration #02558

Removable Rx

DR. DATE

DUE DATE

NOTE : If no due date is assigned a standard due date will be applied.

DR. NAME / ADDRESS

PATIENT NAME

DR. PHONE

SEX : M / F AGE _____

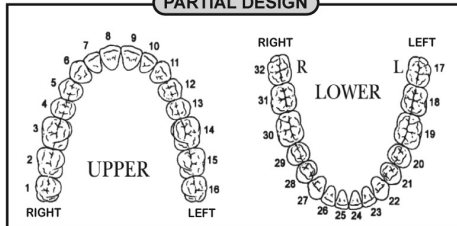
SIGNATURE OF DENTIST

DENTIST LICENSE #

Person signing this authorization accepts sole responsibility for payment and agrees to pay all legal and collection costs in the event of suit, including reasonable fees.

- Call me (before proceeding with case)
 Please evaluate my preps and impressions
 FINISH
 FRAMEWORK TRY-IN
 FRAMEWORK/TEETH TRY-IN
 SPOT OPPOSING
 WAX BITE ON FRAME

PARTIAL DESIGN



SHADE _____

SMILE TYPE

- Vigorous
 Soft
 Natural

OCCUSAL CLASS

- I
 II
 III

ANTERIOR TEETH

Brand _____ Mold _____ Shade _____

PAPILLAMETER READING _____ mm
 (InteliDent)

POSTERIOR TEETH

Brand _____ Mold _____ Shade _____

CASE DESIGN & CONSTRUCTION

- Lab Select-Complete Design

METAL

- Cr-Co NobilStar
 Combination Metal w/Resin
 Other

METAL FREE

- FRS
 All Acrylic

SADDLE AREA

- Mesh / Location _____
 Bed & Posts / Location _____
 Valplast Pontic / Location _____
 Metal Facing / Location _____
 Metal Pontic / Location _____
 Dental D / Pontic _____

CLASPING

- Akers / Location _____
 Ring / Location _____
 I Bar - Location _____
 T-Dar / Location _____
 Modified T-Bar / Location _____
 Lab Select
 Valplast Clasp

INSTRUCTIONS

RESTS

- Mesial / Location _____
 Distal / Location _____
 Cingulum / Location _____
 Channel / Location _____
 Lab Select

MAJOR CONNECTOR

MAXILLARY

- Horseshoe
 Palatal Strap
 A-P Strap
 Full
 Lab Select

MANDIBULAR

- Lingual Bar
 Lingual Apron
 Kennedy Bar
 Lab Select

TEMPORARIES

- All Acrylic
 Cast Metal
 Reinforcement
 Surgical Stint
 Radiographic Stint

DENTURES

- Premium Teeth
 Standard Teeth
 Immediate

ALL-ON-4

- Wrap Around
 Bar / Over Denture

OTHER PROSTHETICS

- Precision Cast Metal Partial
 FRS / Resin Frame
 FRS / Metal Frame
 Stay Plate
 Custom Tray
 Bite Rims
 ProTec™ Permanent Soft Reline
 Pro-Cil™ (additional Gaskets) _____

HAVE YOU INCLUDED THE FOLLOWING?

- Impression or Pre-Op Model
 Bite
 Opposing
 Photos