# AW DENTAL LABORATORY

CROWN AND BRIDGE EXPERTS

10866 Washington Blvd #405
Culver City, CA 90232
**(310) 902-0005**

Dr. ______________________________ **Return Date:** ______________

Patient: ______________________________ Date Sent: ______________

Male ☐ Female ☐ Age: ______________ Facial Shape: ______________

Stumpf Shade: __________

Shade Desired: __________

Mould: __________

**Surface:**

- Smooth ☐
- Moderate ☐
- Heavy ☐

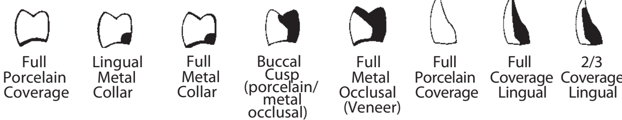
**Occlusal Stain:**

- None ☐
- Light ☐
- Medium ☐
- Dark ☐

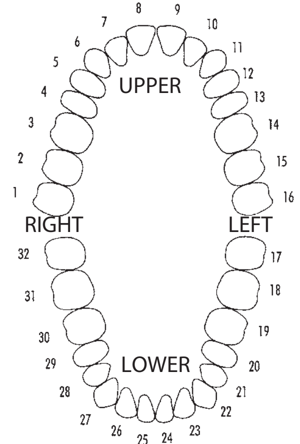
**Degree of Translucency:** Minimum ☐ Moderate ☐ Maximum ☐

**Return:** Metal ☐ Bisque ☐ Finished ☐ Individual ☐ Splinted ☐

**Coping Design** (please circle one):



Full Porcelain Coverage | Lingual Metal Collar | Full Metal Collar | Buccal Cusp (porcelain/ metal occlusal) | Full Metal Occlusal (Veneer) | Full Porcelain Coverage | Full Coverage Lingual | 2/3 Coverage Lingual




**Pontic Design** (please circle one):

Sanitary | Full Ridge | Modified | Bullet | Ovate

**Margin Design:** No metal to show ☐

Hairline metal margin ☐ Porcelain Butt ☐

**If No Occlusal Clearance:**

Metal Occlusion ☐ Adjust Opposing ☐

Reduction Coping ☐

Instructions:

Signature: ______________________________ License: ______________

***We Need:*** *Boxes* ☐ *Rx Pads* ☐ *Airbills* ☐ *Mailing Labels* ☐

COST OF COLLECTION OF ANY ACCOUNT WILL BE PAID BY THE CUSTOMER.TERMS: NET 30 DAYS; 1.5% SERVICE CHARGE OVER 30 DAYS