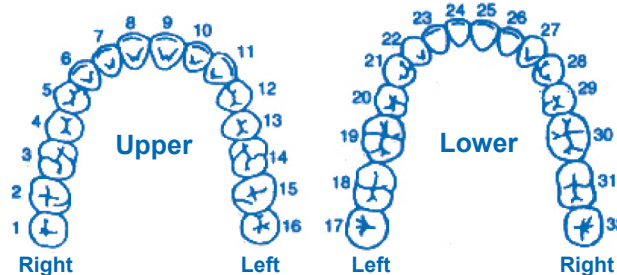




GREAT SOUTHWEST DENTAL LABORATORY

3824 North MacArthur • Oklahoma City, OK 73122
405-787-5852 • 1-800-777-1522

Texas Registration # 2581



PLEASE PRINT

Patient Name _____ Male Female
Address _____ Age _____
Due Date _____

FIXED

PFM's

- Captek™
- High Noble White
- High Noble Yellow
- Noble White
- Predominantly Base

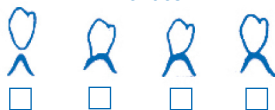
CERAMICS

- Lava™
- Empress®
- Procera®

FULL CAST

- High Noble
- Noble Yellow
- Noble White
- Predominantly Base

Pontics



PORCELAIN BUTT MARGIN Yes No

DR. TO TRIM DIE Yes No

PORCELAIN TO METAL DESIGN



IF INSUFFICIENT OCCLUSAL CLEARANCE

- Please Call
- Reduce / Mark on Opposing

Shade _____ Try-In Finish

DATE _____ LICENSE NO. _____

DR.'s SIGNATURE _____

DENTURES Upper Lower

- Custom Tray
- Occlusal Rim
- Esthetic Control Base
- Perforated Tray
- Intra-oral Tracer
- Neutral Zone

SET-UP

- Ideal
- Lingualized Occlusion
- Balance Occlusion
- Follow Study Model

TEETH

- Premium
- Economy
- Deluxe

PROCESS

Acrylic Type

- High Impact
- Ivocap
- Soft Liner

Acrylic Shade

- Standard Pink
- Ethnic Mild
- Ethnic Moderate
- Ethnic Heavy

PARTIALS Upper Lower

Valplast®

- Try-in
- Set and Finish
- Add Metal Frame (Combo)

Metal Framework

- Frame Try-in
- Frame with Set-up
- Frame with Bite Block
- Frame with Finish

Ortho • Guards

OCCLUSAL GUARDS

- Thermo-Guard™
- Acrylic Night Guard
- Dual Night Guard

FIXED / REMOVABLE ORTHO

- Lingual Arch
- Band and Loop
- Hawley _____
- Other _____



For Lab Use Only

Case # _____ Pan # _____

SEND MORE

- RX's
- Labels
- Boxes

Net amount of invoice is due within 30 days of order; all balances beyond 30 days are subject to finance charge of 1.5%. I agree to pay reasonable attorneys fees and collection costs if this account is referred to collection.