

Phone: (+61) 0492 916 060

ORDER FORM



www.edentalab.com.au

Email: Info@edentalab.com.au

Dentist

Clinic's name

Address

Patient ID

Phone

Suburb

Postcode

Age

Gender

☐ Male ☐ Female

Date sent

Date due

by 5pm

Enclosed ☐ Impression ☐ Model ☐ Bite ☐ Other

☐ Bridge
☐ Crown

☐ Maryland bridge
☐ Veneer

RESTORATION TYPE

☐ Inlay/Onlay

☐ Post/core

☐ Implant crown
☐ Implant bridge

INSTRUCTION

17	16	15	14	13	12	11	21	22	23	24	25	26	27
47	46	45	44	43	42	41	31	32	33	34	35	36	37

MATERIAL TYPE

ZIRCONIA

- ☐ Full zirconia crown
☐ Porcelain fused to zirconia
☐ Zirconia inlay/onlay
☐ Other

EMAX

- ☐ Emax full crown
☐ Emax crown layering
☐ Emax inlay/onlay
☐ Emax veneer
☐ Emax CAD

METAL

- ☐ PFM
☐ FGC
☐ Partial crown
☐ Maryland bridge

MARGIN/METAL DESIGN

- ☐ Buccal porcelain margin
☐ 360 metal margin

METAL OCCLUSAL

- ☐ Half metal occlusal
☐ Full metal occlusal

IMPLANT WORK

Implant system

Implant diameter

- ☐ Implant screw-retained
☐ Implant cement-retained
☐ Implant planning
☐ Implant surgical guide
☐ Temporary implant
☐ Implant bar

ABUTMENT

- ☐ Customized metal
☐ Zirconia aesthetic abutment - with ti-base
☐ Customized cast abutment
☐ Abutments supplied by dentist
☐ Implant parts supplied by lab

OTHER PRODUCTS

- ☐ Occlusal splint (CAD-mill)
☐ Sleeping/ snoring appliance
☐ Diagnostic wax up
☐ Digital Smile Design
☐ Digital design Crown/Bridge/Implant
☐ 3D printed model

Temporary crown: ☐ PMMA ☐ 3D printing

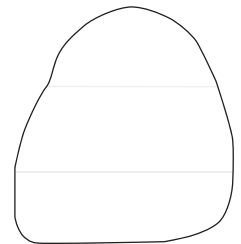
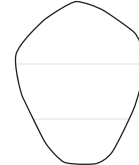
TOOTH SHADE

☐ Photos emailed to info@edentalab.com.au

Stump shade (prepped toothshade) required for all ceramic cases

TIPS FOR SHADE TAKING

- Decide quickly by comparing the shade sample A-D with natural tooth
- Only the middle of shade sample tooth should be observed
- Natural light environment or daylight lamp (5500k-6500k)
- Use neutral background, avoid: lipstick, sunglass, bright color clothes
- Before preparation (no dehydration of the prep)
- Your eyes at tooth level - 1 arm length away



VITA CLASSIC SHADE

A = Redish-Brownish

B = Redish-Yellowish

C = Grayish

D = Redish-Grayish

1 = least chromatic, highest value

4 = highest chromatic, lowest value

4

5

6

7

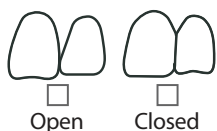
1

2

3

Indicate enamel thickness

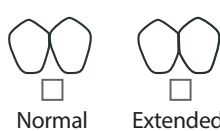
EMBRASURE



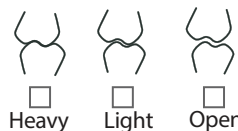
PONTIC CONTACT



PROXIMAL CONTACT



OCCLUSAL CONTACT



IF INSUFFICIENT OCCLUSAL CLEARANCE

- ☐ Call me
☐ Metal occlusal
☐ Adjust opposing