

Doctor's Name

Doctor's License Number

Date

Practice / Business Name

Practice Manager / Lead Assistant

Best Contact Email

Office Phone

Mobile Phone

Preferred Contact Method:

(check all that apply)

- Phone
- Fax
- Doctor Email
- Office Email
- Text (please provide cell phone #)

Metal PFM type:

- White HN (default)
- Semi-precious
- Non-precious
- Yellow HN

Occlusal contact:

- Light (default)
- Open
- Tight

Insufficient room:

- Trim opposing (default)
- Call to discuss
- Metal occlusal
- Reduction coping
- Metal island
- Trim prep no coping

PLEASE NOTE: If margins are in question, the lab will call to discuss

Interproximal contact:

- Light & Broad (default)
- Medium
- Heavy

Margin design: Please circle your choice(s) of margin combination



Show no metal 360°* (default)



All porcelain shoulder 360°*

***MUST prep for this**



Metal collar 360°



Facial porcelain shoulder 180°



Lingual metal collar (traditional)



Metal or Zirconia occlusal



Metal or Zirconia lingual

Pontic Design:

- Full Ridge Lap
- Modified Ridge Lap
- Ovate
- Bullet
- Sanitary
- Others _____

Under Cuts In Prep:

- Call Doctor
- Trim Prep with Reduction Coping*
- Adjust Prep without Reduction Coping (Mark in Red)
- Others _____

Impression Issue:

- Call Doctor
- Go Ahead (No Guarantee)*

*No Guarantee... We suggest a framework try-in

Please email your preferences to Diverse Dental Lab at Preferences@DiverseDentalLab.com



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