

**DSG LK Dental Studio**  
3420 Fostoria Way, #G202  
Danville, CA 94526  
(925) 901-0262  
Email photos to  
studio@dentalservices.net

**DSG Clearwater**  
[ X-Line Products ]  
14333 58th Street N  
Clearwater, FL 33760  
(727) 530-9444  
Email photos to  
clwpics@dentalservices.net

**DSG Fine Arts**  
[ Fine Arts Studio ]  
1355 N University Ave #340  
Provo, Utah 84604  
(801) 377-5229  
Email photos to  
fineartshades@dentalservices.net

RX DATE \_\_\_\_\_ **DUE DATE** \_\_\_\_\_ **BY 5PM**

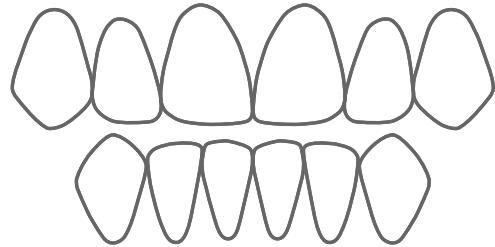
**DR NAME** \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_ PHONE \_\_\_\_\_

**PT NAME** \_\_\_\_\_ AGE \_\_\_\_\_  FEMALE  MALE

TOOTH NUMBER PLEASE INDICATE TOOTH NUMBER(S) TO BE RESTORED															
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17



**CHARACTERIZATION**

Translucency  HEAVY  MEDIUM  MINIMUM  NONE

Lobing  YES  NO

Surface Texture  HEAVY  MEDIUM  LIGHT  NONE

Occlusion Stain

Hypo-Calcification

Occlusion Stain Color \_\_\_\_\_

**VALUE**

High  Medium  Low

**SHADE INSTRUCTIONS**

Stump/Prep Shade \_\_\_\_\_

Gingival Shade \_\_\_\_\_

Body Shade \_\_\_\_\_

Incisal Shade \_\_\_\_\_

**VERTICAL DIMENSION**

Open Bite \_\_\_\_\_ mm

**CENTRAL LENGTH**

CEJ tooth # \_\_\_\_\_ to CEJ tooth # \_\_\_\_\_

**METAL-FREE RESTORATIONS**

IPS e.max\*  IPS e.max\* CAD  
 IPS Empress\* Esthetic  Prettau\*  
 IPS e.max\* ZirCAD\* Prime  Composite  
 Layered Zirconia (DSz™)  
 Monolithic Zirconia (DSmz™/DSez™)  
 Other (PLEASE SPECIFY) \_\_\_\_\_

**FULL METAL**

Noble  High Noble  Call to Discuss

**PORCELAIN TO METAL**

Non Precious (Nickel Free)  
 Semi Precious  White High Noble  
 Yellow High Noble  Metal Try-in

**PONTIC DESIGN**

SANITARY  HALF RIDGE LAP  FULL RIDGE LAP  BULLET  OVATE

**IMPLANTS**

System \_\_\_\_\_ Diameter \_\_\_\_\_

Screw Retained  Cement Retained  
 Doctor to provide components  
 Lab to provide components  
 Resin - Abutment Seating Index  
 Surgical Guide  
 Radiographic Surgical Guide

**ENCLOSED WITH CASE**

Model  Bite  Die Trim  
 Metal Trays  Impressions  Evaluation  
 Teeth  Photo  Wax Check  
 Shade Tab  Other (SPECIFY BELOW)  Metal Try-in  
 Articulator  Bisque  Finish

**DIAGNOSTIC WAX-UP**

Prep Model  Bite Matrix  Temp Matrix

**SHAPE**

Smile Guide Design # \_\_\_\_\_  
 Match Photographs \_\_\_\_\_

**SOFT TISSUE MODEL**

**If Insufficient Room**

CALL  REDUCE PREP  REDUCE OPPOSING  
 CLOSE DIASTEMA






**Occlusion Clearance**

IN OCCLUSION  OUT OF OCCLUSION  FOIL RELIEF

**Mold of Crown**

FOLLOW STUDY MODEL  MATCH EXISTING  IDEAL

**MARGIN DESIGN**

Facial All Porcelain Margin   
 360° All Porcelain Margin   
 Facial Show No Metal with small lingual collar   
 360° Show No Metal   
 Metal Lingual/Metal Occlusal 

**ATTACHMENT DESIGN**

ERA  Keyway  Other \_\_\_\_\_

**TEMPORARIES**

**REMOVABLE APPLIANCE\***

Partial  Denture  
 Orthotic  Flipper  
 Night Guard  Hawley Retainer  
 KeySplint

\*CALL US FOR MORE OPTIONS

**For Warranty Information:**  
Please review the DSG  
Warranty Policy online at  
dentalservices.net/dsg-warranty

**Terms:** Net 15th of month. A  
finance charge of 1½% per month  
(18% annual) will be added to  
past due invoices

**INSTRUCTIONS** **CALL ME**

**DR SIGNATURE** \_\_\_\_\_

DR LICENSE # \_\_\_\_\_