

### **RX please include:**

- 1) Office/Doctor
- 2) Patient Name
- 3) Return Date/Time
- 4) Material Type
- 5) Tooth Number
- 6) Shade
- 7) Instructions

*Please preschedule rush cases 541.779.6503*

### **Crown and Bridge**

- 1) Completed RX
- 2) Impression – Full arch on all bridges
- 3) Opposing
- 4) Bite with every case including triple tray impression

#### **Anterior Cases also include**

- 1) Study model of approved temps
- 2) Prep/Stumpf shade
- 3) Photos \*If difficult shade  
Schedule custom shade appointment

### **Implant Cases**

- 1) Completed RX including Implant Brand, Type, & Size
- 2) Impression including:
- 3) Impression Copings
- 4) Lab Analogs
- 5) Opposing
- 6) Bite Registration \*If anterior, please include a study model and photo

### **Partial**

#### **First Appointment**

- 1) Completed RX
- 2) Preliminary Impression  
\*to be used for custom tray
- 3) Opposing

#### **Second Appointment**

- 1) Completed RX with design notes
- 2) Bite Registration
- 3) Master impression with custom tray

#### **Third Appointment**

- 1) Framework try in, shade selection

#### **Fourth Appointment**

- 1) Wax teeth try in and shade approval  
\*Opposing mockup if needed

#### **Fifth Appointment**

- 1) Deliver final completed partial

### **Denture**

#### **First Appointment**

- 1) Completed Denture RX
- 2) Preliminary impression using denture impression tray

#### **Second Appointment**

- 1) Master impression using custom tray
- 2) Opposing impression

#### **Third Appointment**

- 1) Try in base plate/wax rim
- 2) Record Kois transfer and bite

#### **Fourth Appointment**

- 1) Try in denture setup

#### **Fifth Appointment**

- 1) Final denture delivery