

5/28

Route: RCC

Pan #:

B14

Wednesday

Case#: **147830**

Account: 167687

DR DANIEL SNOWDEN

620-442-0320

Shade: D2

Mould: empres

CBPINBAE Artulate/pin/base/secti Mon, 19
 CBDIEPRE die trim/die spacer Tue, 20
 CBWAXCC c&b coping waxup Wed, 21
 cbinvest CB sprue and invest Wed, 21
 PBIULDPC porcelain buildup Thu, 22
 ACTRIM AC Trim / Finish Wed, 28
 PSTNGLZ stain and glaze Wed, 28
 PPOLISH porcelain polishing Wed, 28
 ACQC AC Quality control All C Wed, 28

Patient: Samms,

Recieved: 05/16/2008

Dr Due Date: May 27 12:00 am

Ship By Date: 05/28/2008

Date Entry: cperkins

#9
Empress
Crown

Doctor Preferences

Department Instructions

* PORCELAIN (PORCELAIN):
 PNT OPP/DIE RLF/CONT SLD MODL
 NORM CONTACTS/COPY EXIST ANA
 OCCL STAIN/LT OCCL CONTACT
 MUST HAVE OCCL CONTACT
 LEAVE MARGINS IN SOLID MODEL!
 DON'T OVERDITCH SOLID MODEL!!
 WATCH THE PROX. CONTACTS!!!!
 make sure margins arent short
 PNT OPP/DIE RLF/CONT SLD MODL
 NORM CONTACTS/COPY EXIST ANA
 ***46**HI NOBLE WHITIE ON SINGLES**
 OCCL STAIN/LT OCCL CONTACT
 MUST HAVE OCCL CONTACT
 LEAVE MARGINS ON SOLID MODEL
 DON'T OVERDITCH SOLID MODEL
 WATCH THE PROX. CONTACTS!!!!
 make sure margins arent short

#. 3oned 6/2
Melinda
cp

5/28

Route: RCC

Pan #:

B14

Wednesday

Case#: **147830**

Patient: Samms,

Account: 167687

DR DANIEL SNOWDEN

220 W Central
 Arkansas City, KS 67005
 620-442-0320

Recieved: 05/16/2008

Dr Due Date: May 27 12:00 am

Ship By Date: 05/28/2008

Date Entry: cperkins

Doctor Alerts

Materials

Case Description

QTY	Description	QTY	Description
1.00	Empress Crown		

Qty	Product ID	Description	Tooth #'s
1	SHANDL	Infection Control and Handling	
1	PEMPRESS	Empress Crown	

Invoice Notes:

117074

Dr. SNOWDEN DENTIST

City Anne City State KS Zip 67005

Patient Name SAMMIS Date Wanted 5/27/08

DENTURE - PARTIAL

Type of Work

- ☐ TRI DENTURE
- ☐ FULL UPPER
- ☐ FULL LOWER
- ☐ CAST PARTIAL UPPER
- ☐ CAST PARTIAL LOWER
- ☐ ACRYLIC PARTIAL UPPER
- ☐ ACRYLIC PARTIAL LOWER

- ☐ TWIN DENTURE SERVICE
- ☐ RELINE
- ☐ REBASE /REPRODUCE
- ☐ SOFT LINER
- ☐ IMMEDIATE

- ☐ TRY IN
- ☐ FINISH

TEETH

SHADE D-2 MOLD _____ LABORATORY SELECT _____
Plastic ☐ Porcelain ☐

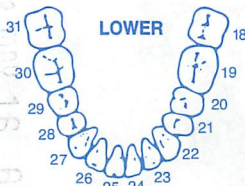
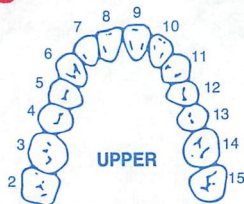
SPECIAL REMOVABLE APPLIANCES

- ☐ VALPLAST
- ☐ CUSIL
- ☐ VIRGINIA
- ☐ IMPLANT STINT
- ☐ BRUXEZE
- ☐ REMEDEZE
- ☐ ORTHODONTIC TMJ SPLINT
- ☐ SOFT MOUTH GUARD

- ☐ ADJUSTABLE PM POSITIONER (Snoring Appliances)
- ☐ TAPP APPLIANCE (Snoring Appliances)
- ☐ BLEACHING TRAY

Process Selection

- ☐ STANDARD
- ☐ CHOICE
- ☐ PREMIUM
- ☐ INJECTION



Crown & Bridge Metal Work

- ☐ HIGH NOBLE 58% GOLD
- ☐ NOBLE 46% GOLD
- ☐ NOBLE 20% GOLD
- ☐ YELLOW/WHITE NON-PRECIOUS

Porcelain Metal Work

- ☐ NON-PRECIOUS NICKEL & BERYLLIUM FREE
- ☐ NOBLE
- ☐ HIGH NOBLE
- ☐ CAPTEK

Specialty Services

- ☐ EMPRESS 1 OR 2
- ☐ PROCERA
- ☐ LAMINATE VENEER
- ☐ D-SIGN
- ☐ INCERAM
- ☐ COMPOSITE REINFORCED GLASS
- ☐ FIBER REINFORCED
- ☐ INLAY-ONLAY
- ☐ TEMP CROWN - BRIDGE
- ☐ DIAGNOSTIC WHITE WAX

SPECIAL INSTRUCTIONS _____

SPECIAL SHADE INSTRUCTIONS

Empress I
- #9



BASIC SHADE _____ AGE _____

Doctor's Signature _____

Send Boxes ☐

Labels ☐

RX Forms ☐

CALL ME ☐