

1/29

Tuesday

Route: RCC

Pan #:

388

Case#: 132273



Patient: Puchalla, Michel

Account: 167687

DR DANIEL SNOWDEN

620-442-0320

Shade: B1

Mould: p/arge 80

CBPINBA\$ Artulate/pin/base/secti Mon, 21
CBDIEPRE die trim/die spacer Mon, 21
CBWAXCC c&b coping waxup Tue, 22
cbinvest CB sprue and invest Tue, 22
cbcast c&b casting Wed, 23
cbdivest c&b divesting Wed, 23
CBWEIGH weigh gold Wed, 23
CBTRIMC trim metal coping/proce Wed, 23
POPAQUE opaque metal\ceramic\ Thu, 24
PBIULDPC porcelain buildup Fri, 25
PPORCTR porcelain trimming Mon, 28
PSTNGLZ stain and glaze Tue, 29
PPOLISH porcelain polishing Tue, 29
PQC Quality Control - Porcel Tue, 29

MR
#14 - style 7

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

80 - 17

1/29

Tuesday

Route: RCC

Pan #:

388

Case#: 132273



Patient: Puchalla, Michel

Account: 167687

DR DANIEL SNOWDEN

220 W Central

Arkansas City, KS 67005

620-442-0320

Recieved: 01/21/2008

Dr Due Date: Jan 31 12:00 am

Ship By Date: 01/29/2008

Date Entry: cperkins

Doctor Alerts

Materials

Case Description

QTY	Description
1.00	Porcelain to Noble Unit Fee

QTY	Description
-----	-------------

Qty	Product ID	Description	Tooth #'s
1	SHANDL	Infection Control and Handling	
1	PPFMNOBLEUF	Porcelain to Noble Unit Fee	14

Invoice Notes:

065711

DSG Heumann & Associates Dental Laboratory

A DENTAL SERVICES GROUP LABORATORY

Toll Free Works Line
(Kansas Only) 800-432-8586
(Nationwide) 800-255-2412

Box 33, 520 E. Fifth St.
Topeka, Kansas 66601
(FAX) 785-235-0978

Date 1-17-08Dr. Daniel Snowden Lic. No. 5187City 220 W. Central State Ks Zip 67005Patient Name Michelle Puchalla Date Wanted 1/31/08

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

SHADE B-1 MOLD

TEETH

LABORATORY SELECT
Plastic ☐ Porcelain ☐

SPECIAL REMOVABLE APPLIANCES

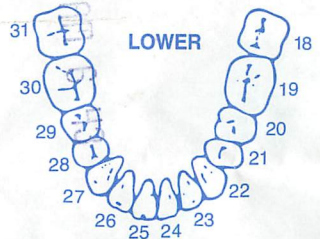
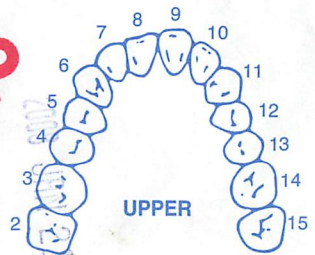
- ☐ VALPLAST
☐ CUSIL
☐ VIRGINIA
☐ IMPLANT STINT

- ☐ BRUXEZE
☐ REMEDEZE
☐ ORTHODONTIC TMJ SPLINT
☐ SOFT MOUTH GUARD

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

Process Selection

- ☐ STANDARD
☐ CHOICE
☐ PREMIUM
☐ INJECTION



Crown & Bridge Metal Work Porcelain Metal Work

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

- ☐ NON-PRECIOUS NICKEL
& BERYLLIUM FREE
☐ NOBLE
☐ HIGH NOBLE
☐ GOLD COPE - HIGH NOBLE
(24K Gold Electroformed System)

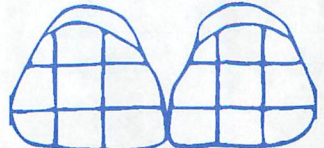
- ☐ EMPRESS 1 OR 2
☐ PROCERA
☐ LAMINATE VENEER
☐ LOW FUSING
☐ INCERAM

- ☐ CEROMER
☐ TO FIBER
☐ INLAY-ONLAY
☐ TEMP CROWN

SPECIAL INSTRUCTIONS

PFM #14

SPECIAL SHADE INSTRUCTIONS

BASIC SHADE B1 AGE

Doctor's Signature

CALL ME ☐Send Boxes ☐Labels ☐RX Forms ☐