

RIVER CITY DENTAL LABORATORY

1509 RAPIDS DR. • SUITE 308 • RACINE, WI 53404

PHONE: (312) 256-6860 • EMAIL:rivercitydentallab8@gmail.com

Dr. *(Required)*

Patient Name *(Required)*

Today's Date

Due Date by 5 p.m

Case Materials Enclosed

- ☐ Impressions
- ☐ Bite Registration
- ☐ Models

Supply Requests

- ☐ Rx Forms
- ☐ Shipping Labels
- ☐ Boxes
- ☐ Other:

Signature



Fixed Restoration

- ☐ Economy Denture Set
- ☐ Upper
- ☐ Lower
- ☐ Premium Denture Set
- ☐ Upper
- ☐ Lower
- ☐ Immediate Denture Set
- ☐ Acrylic Partial Denture
- ☐ Flipper 1-3 Teeth
- ☐ Metal Frame (Allow 2 weeks)
- ☐ Reline Per Plate
- ☐ Wax Bite (4 days in lab)
- ☐ Custom Trays (4 days in lab)
- ☐ Night Guard/3D Splint
- ☐ Denture Repair Starting at
- ☐ Clasp
- ☐ Ball Clasp
- ☐ Wire Clasp
- ☐ Other

Crown & Bridge

- ☐ Occu Stain
- ☐ Light
- ☐ Dark
- ☐ Medium
- ☐ HT Solid Zirconia
- ☐ Multi-layered Zirconia
- ☐ Extreme Solid Zirconia
- ☐ Stardust - Multi Strength Zirconia
- ☐ E-Max Solid Crown
- ☐ E-Max Inlay/Onlay
- ☐ Multilayer PMMA Crown (Zirconia 7 days in lab)
- ☐ Porcelain Fused to Semi Precious White Gold
- ☐ Porcelain Fused to Metal
- ☐ Porcelain Fused to high Noble Yellow Golden
- ☐ Full Cast Yellow Gold Crown
- ☐ Yellow Gold Onlay Inlay (PFM is 15 days in lab)

Tooth#

Shade:

Stump Shade:

Tissue Shade:

- ☐ Pink
- ☐ Light Pink
- ☐ Meharry

gingival / incisal

Teeth's Selection

- ☐ 1
- ☐ 2
- ☐ 3
- ☐ 4
- ☐ 5
- ☐ 6
- ☐ 7
- ☐ 8
- ☐ 9
- ☐ 10
- ☐ 11
- ☐ 12
- ☐ 13
- ☐ 14
- ☐ 15
- ☐ 16
- ☐ 17
- ☐ 18
- ☐ 19
- ☐ 20
- ☐ 21
- ☐ 22
- ☐ 23
- ☐ 24
- ☐ 25
- ☐ 26
- ☐ 27
- ☐ 28
- ☐ 29
- ☐ 30
- ☐ 31
- ☐ 32

Tick the tooth numbers according to the mentioned below described picture.

