

Laboratory Order Form

Doctor: _____ Cust. Ref: _____

Address: _____ Tel: _____

Return Date: _____ Time: _____ AM / PM

PATIENT INFORMATION Name: _____ Age: _____ Male Female

RACE DENTAL NZBN 9429041636015
20-24 Crummer Road, Grey Lynn, Auckland 1021
T: (09) 887 0327 | www.racedental.co.nz
E: customersupport@racedental.co.nz

CROWN / BRIDGE

RESTORATION TYPE

- Crown
- Bridge
- Inlay / Onlay
- Veneer
- Diagnostic Print

Embrasure

- Natural Closed Open

Occlusal Contact

- Heavy Light Open

Proximal Contact

- Normal Broad

Pontic Design

- Ovate Ridge Lap Hygienic
- Modified Ridge Lap

MATERIAL TYPE

Metal-Free

- Crystalite™
(Monolithic Super Translucent Zirconia)
- Opalite™
(Monolithic Translucent Zirconia)
- Zirconia Layered
- e.max® CAD
- e.max® Press
- VITA® Enamic
- Temporary PMMA

PFM

- Premium PFM:
 - Non-Precious (CoCr)
 - Precious (Yellow Gold)
- Standard PFM:
 - Non-Precious (CoCr)
 - Precious (Yellow Gold)

FGC

- Full Gold Crown:
 - Non-Precious (Gold)
 - Precious (Yellow Gold)
- Full Metal Crown:
 - Non-Precious (CoCr)

OCCLUSAL STAINING

- None
- Light
- Medium
- Dark

POST & CORE

- Post & Core (Only)
- Post & Crown (Separate)
 - Non-Precious (CoCr)
 - Precious (Yellow Gold)

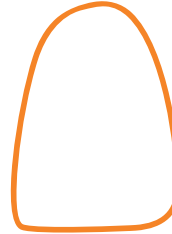
IF INSUFFICIENT ROOM:

- Reduce opposing & mark model
- Send back for re-prep
- Other: _____

Basic Shade: _____

Stump Shade: _____

Tooth Number(s): _____



SHADE INSTRUCTIONS



Photos Sent

- via Race Dental Portal
- images@racedental.com.au

IMPLANTS

BRAND: _____

PLATFORM SIZE: _____

- Screw Retained
- Cement Retained

RESTORATION TYPE

- Crown Bridge Splinted

TISSUE COMPRESSION

- Heavy Light None

CUSTOM Ti ABUTMENT

CROWN SHAPE

- Implant Protected Occlusion
- Full Body

COMPONENTS

- Branded
- Core3D (Free if compatible)
*See website for compatibility

SPECIAL INSTRUCTIONS

Turn Over For Additional Instructions

ORTHODONTICS

RETAINER

Upper Lower

- Hawley
- Begg
- Trutain
- Spring Hawley
- Spring Aligner
- Lingual Arch 3x3
- Other _____

OCCLUSAL SPLINTS

- High Impact
- Comfort
- Hard / Soft
- Hard / Soft with Acrylic
- Soft
- Hard / Soft Mini
- Clear Splint
- Other _____

REMOVABLE

- Schwartz
- Sagittal / Schwartz
- 3D
- Twin Block
- Bionator
- Other _____

FIXED

- Herbst
- RME (Banded)
- RME (Acrylic)
- Superscrew
- Quad Helix
- Lingual Arch 6x6
- Space Maintainer
- Other _____

MISCELLANEOUS

- Bleaching Tray
- Snoring Device
- Junior Race Guard
- Race Guard Light
- Race Guard Medium
- Race Guard Heavy
- Colour** _____
- Other _____

CHROME

CHROME CASTING

P/- -/P

- Special Tray
- Frame Only
- With Wax Bite
- Separate Wax Bite
- With Try-in
- Separate Try-in
- Finish
- Titanium Casting
- Backings / Onlays
- Teeth numbers: _____
- Other _____

ACRYLIC

ACRYLIC DENTURE

FLEXIBLE DENTURE

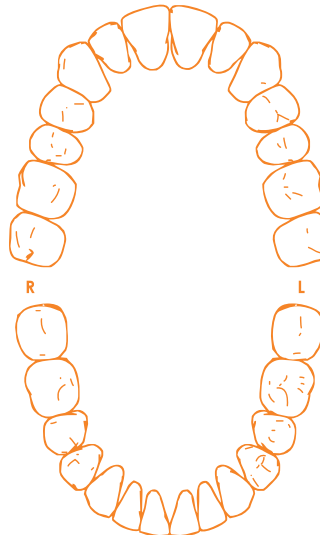
- F/- -/F
- P/- -/P
- Special Tray
- Wax Bite
- Try-in
- Finish
- Other
- CLASPS**
- Stainless Steel Clasps
Teeth numbers: _____
- Tooth-Coloured Clasps
Teeth numbers: _____
- Clear Clasps
Teeth numbers: _____
- Pink Clasps (Flexible)
Teeth numbers: _____

REPAIRS

F/- -/F

P/- -/P

- Fracture
- Addition
Tooth number: _____
- Imm Exo Addition
Tooth number: _____
- Clasp (Addition)
Tooth number: _____
- Strengthen
- Other _____



DENTURE SHADE:

SPECIAL INSTRUCTIONS

PATIENT APPOINTMENTS

Date 1 _____ Time: _____ am/pm

Date 2 _____ Time: _____ am/pm

Date 3 _____ Time: _____ am/pm

Date 4 _____ Time: _____ am/pm

Date 5 _____ Time: _____ am/pm

Date 6 _____ Time: _____ am/pm

Turn Over For Additional Instructions

ADDITIONAL COMMENTS

Office Use Only

Date received: _____

impression	model	bite	tray	
articulator	teeth	wax try-in	c/c	
key	wax up	articulator box	ortho appliance	
crown	splint	denture	veneer	
implant h/w		broken model		
CD	photo	die		