

# Fixed & Removable RX

# OralArts

DENTAL LABORATORIES

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 9040 Airport Blvd. P.O. Box 850035 Mobile, AL 36608 (800) 327-4047  
[www.oralartsdental.com](http://www.oralartsdental.com)

Dr. Name \_\_\_\_\_ Dr. Phone # \_\_\_\_\_ Dr. Account # \_\_\_\_\_  
 Address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_  
 Email Address \_\_\_\_\_  
 Date Written \_\_\_\_\_ Patient \_\_\_\_\_  Male  Female

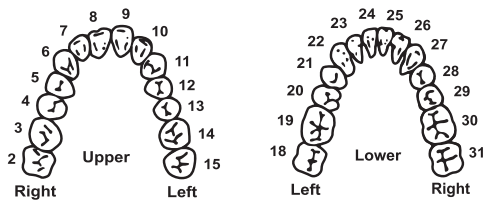
**Enclosed #** \_\_\_\_\_ Model \_\_\_\_\_  
 \_\_\_\_\_ Shade Tab \_\_\_\_\_ Impression \_\_\_\_\_  
 \_\_\_\_\_ Articulator \_\_\_\_\_ Bite \_\_\_\_\_  
 \_\_\_\_\_ Crown \_\_\_\_\_ Photos \_\_\_\_\_  
 Other: \_\_\_\_\_

**Due Date** (Please Specify Date) \_\_\_\_\_

Rush dates not guaranteed without prior approval.

**Please Send:**

- Study Model for Anterior Cases
- Stump Shade for All-Ceramic/Ultra-Z Esthetic



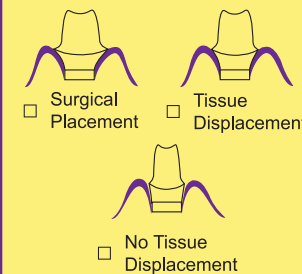
Check Here For  
**ORAL ARTS  
 SELECT™**

Indicate Implant System \_\_\_\_\_

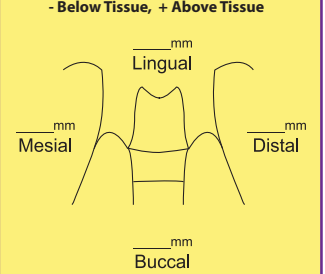
**Implant Abutment**

- OAL Custom Titanium Abutment     OAL Custom Gold Hue Abutment  
 OAL Custom Zirconia w/Ti Insert     Prep Stock Abutment

**Abutment Emergence Profile**



**Abutment Margin Depth**  
 - Below Tissue, + Above Tissue



**QC Stamp:**

**If No Occlusal Clearance:**

- Adjust Opposing     Phone Call  
 Reduction Coping     Make this permanent preference

Dr. Signature \_\_\_\_\_

License # \_\_\_\_\_

**Shade Instructions: Shade** \_\_\_\_\_

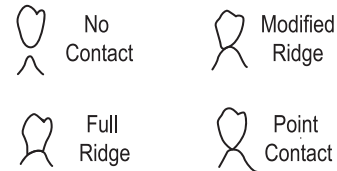
**Stump Shade** \_\_\_\_\_

Attach shade photos to your case via the OA Customer Portal.



**Occlusal Staining:** \_\_\_ None \_\_\_ Light \_\_\_ Medium \_\_\_ Dark

**Pontics (circle preference)**



**Dentures/ Flexible Partial**

- Denture     IvoBase Premium Injection Denture  
 Duplicate Denture     Flipper/ Acrylic Partial  
 DuraFlex Partial     TCS Unbreakable Partial  
 DuraFlex/ Metal Combo     TCS Unbreakable/ Metal Combo  
 Custom Tray     Bite Rim     Try-in Setup  
 Name in Appliance \_\_\_\_\_

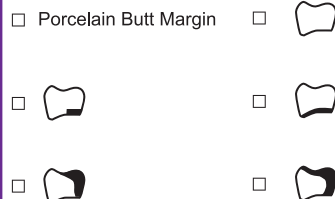
**Premium Cast Partial**

- Frame Try-In     Frame with Bite Rim  
 Frame with Setup     Process/ Finish
- Saddle Areas    Tooth # \_\_\_\_\_  
 Lab Design  
 Metal Dummy  
 Metal Dummy/Veneer
- Rest Areas  
 Lab Design \_\_\_\_\_  
 Indicated on Diagram \_\_\_\_\_

**Zirconia/ Ceramic Crowns/ Provisionals**

- Element-Z     IPS e.Max  
 Ultra-Z Esthetic     Indirect Composite  
 Element-Z Lingual     Empress Esthetic  
 Lava - Porc. to Zr.     Add Fiber Force REINF  
 Forte YZr- Porc.to Zr.  
 CAD/CAM Oral Temps  
 Element-Z Screw Retained Hybrid

**Margin & Metal Design**



**Set Up/ Teeth**

- Ideal     Study Model     Characterized  
 Premium Teeth     Economy Teeth

Shade \_\_\_\_\_ Mould \_\_\_\_\_

**Tissue/ Acrylic Shade**

- Acrylic:**     Light     Original     Dark  
**Ethnic:**     Light     Medium     Dark  
**DuraFlex:**     Clear     Light Pink     Medium Pink     Dark Pink  
**TCS Unbreakable:**     Light Pink     Standard Pink  
 Light/ Dark Pink     Dark Pink

**Night Guards/Bite Splints/Mouthguards**

- AstronCLEAR     Comfort HS     Sprinkled Acrylic Splint  
 AstronCOLOR     Day Guard  
 BiteSoft Ant.Splint     DuraSoft Splint     Soft EVA  
 Comfort Hard     Gelb Splint     Variflex HS  
 Comfort HS Color     IvoBase Clear Injected Splint

Specify Colors on RX

**Sleep Apnea & Ortho Devices**

- dreamTAP     QuietNite     TAP 3 Elite TL  
 EMA     SomnoDent  
 myTAP     Specify Ortho Device on RX

**Full-Cast Crowns**

- Base Metal     WN  
 Argenco Y+ Yellow Noble     WHN  
 Yellow Noble     YHN

**Post & Core**

- One Piece     Separate

**PFM Crowns**

- Base Metal     Noble  
 Capttek     WHN     YHN

The statement balance is due and payable by the fifteenth of the month following purchase. A service charge of 1.5% per month (annual rate of 18%) will be applied to any unpaid balance. Accounts with outstanding balances over 45 days will be subject to COD status. If you have any questions please contact Kathy Henley at [kathy.henley@oralartsdental.com](mailto:kathy.henley@oralartsdental.com). Any case inquiries, questions, or concerns should be directed to [info@oralartsdental.com](mailto:info@oralartsdental.com)