

Sr No.

Pink City Ceramic Dental Lab

17, MOHAN NAGAR, MOHRU NAGAR, MANYAWAS, JAIPUR 302020

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DOCTOR'S DETAILS

ORDER FORM

PATIENT'S DETAILS

Name:.....
Clinic:.....
Phone:.....

Name:
☐ Male ☐ Female Order Date:
Age: Required Date:
Tryin- WAX ☐ Coping ☐ Bisque ☐

Implant Prosthesis

Cement / Screw
Retained / Retained
PFM

* Alloy used
Ni-Cr / Ni-Free / Ti-Alloy
Nexzr_Cad_Cam_PFM

ZIRCONIA

- ☐ NEXZR_PLUS_(10YR) (LAYERED)
☐ NEXZR_BASIC_(8YR) (LAYERED)
☐ NEXZR_T_(15YR) (MONOLITHIC)
☐ NEXXSTAR_(15YR) (LAYERED/MONOLITHIC)
☐ NEXGRAF (10YRS WARRANTY)

TEMPORARIES

- ☐ COLD_CURE TEMP
☐ HEAT_CURE TEMP
☐ MOCK UP
☐ DIAGNOSTIC WAXUP
☐ NEXZR CAD CAM TEMP

PFM

- ☐ Nexzr_Cad_Cam_PFM- 5YR
☐ Nexzr_Cad_Cam_PFM- 10YR
☐ PFM_CROWN/BRIDGE
☐ FULL_METAL
☐ BUCCAL_FACING
☐ METAL_INLAY/ONLAY
☐ MARYLAND BRIDGE

Ni-Cr / Ni-Free / Ti-Alloy
☐ ☐ ☐

LAVA

- ☐ LAVA_PREMIUM_(20YR) (L/M)
☐ LAVA_TRANSLUCENT_(15YR) (L/M)
☐ LAVA_MAX_(10YR) (M)
☐ LAVA_ESSENTIAL_(10YR) (L/M)
☐ LAVA_MONOLITHIC_(5YR) (M)

E-MAX

- ☐ CROWN
☐ VENEER
☐ INLAY/ONLAY
☐ Nexzr_Cad_Cam_E-MAX (5YR)

VACUUM FORMES APPLIANCES

- ☐ NIGHT GAURD ☐ SOFT ☐ HARD
☐ 1MM ☐ 2MM ☐ 3MM
☐ BITE SPLINT
☐ CLEAR_ORTHO_RETAINER
☐ NEXZR_SMART_ALIGNER
☐ SMILE DESIGN
☐ NEXZR_SURGICAL_DRILL_GUIDE

DENTURE

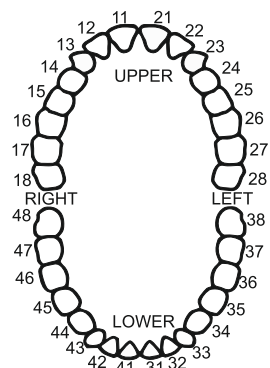
- ☐ LUCITONE 199
☐ FLEXIBLE DENTURE
☐ CAST_PARTIAL_DENTURE
☐ PRECISION ATTACHMENT
☐ SOFT RELINING
☐ HARD RELINING
☐ ACRYLIZATION Cast_Partial/HYBRID
☐ INJECTION MODELING DENTURE

OTHERS

- ☐ NEXZR_CUSTOMIZED ABUTMENT
☐ TIT-MILLED ☐ CR-CO ABUTMENT
☐ IMPLANT HYBRID
☐ CR-CO ☐ Tit-MILLED ☐ TI ALLOY
☐ NEXZR_TITANIUM CROWN
☐ NEXZR_PALO_MALLO

NEXZR_PEEK

- ☐ CAST_PARTIAL
☐ HYBRID
☐ TELESCOPIC_DENTURE



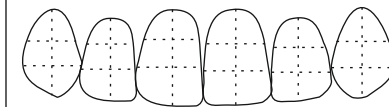
NOTATION :

☐ Individual ☐ Splinted (Joined)
Contact- ☐ Broad / Point ☐

Shade.....

Cervical __ Middle __ Incisal __

Digital photo/ E-mail/WhatsApp ☐



DMLS

- ☐ PFM Crown
☐ Full Metal Crown
☐ Paulo Malo
☐ Hybrid Denture
☐ Implant Screw/Retained Crown

Special Instructions

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.....
.....

Discoloration

Gingiva Colour ☐ Yes ☐ No

Pontic Design (Please tick one)

☐ ☐ ☐ ☐ ☐
Sanitary Full Ridge Modified Bullet Ovate

Enclosures

- ☐ Impression ☐ Bite ☐ Articulator ☐ Shade Tab ☐ Shade Tooth ☐ Pre-Op Models ☐ Additional Model ☐ Model- with- Temporary- on
☐ Old Work (Adjust/Remake) ☐ Tray Enclosed

In case of any clarification. Please contact Dr. Contact No.

Name & Signature of Doctor/Clinic Staff