

SHADING CHART

Shade
Desired:

Rx DATE _____ DELIVER BY 5:00 PM ON _____

DOCTOR'S NAME _____ (PLEASE PRINT)

DOCTOR'S ADDRESS _____ PHONE _____

PATIENT'S NAME (First Initial/Last Name) _____ SEX **M / F** AGE _____

FIXED - FEE REMOVABLES

CAST PARTIALS

- REGAL CAST PARTIAL COMPLETE: \$279/ARCH
Includes: Articulation, cast frame, Artic teeth, try-in, high impact finish.
- PREMIUM CAST PARTIAL COMPLETE: \$329/ARCH
Includes: Articulation, cast frame, IPN teeth, try-in, processed finish.
- ESTHETIC CAST PARTIAL COMPLETE: \$389/ARCH
Includes: Articulation, cast frame, IPN or BlueLine teeth, try-in, Ivocap finish.

DENTURES

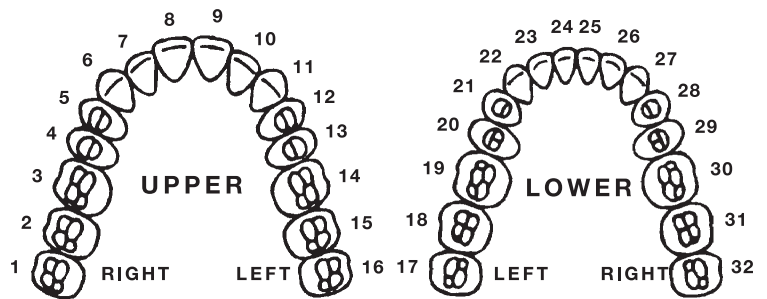
- REGAL DENTURE COMPLETE: \$209/ARCH
Includes: Articulation, Artic teeth, try-in, high impact finish & one reset.
- PREMIUM DENTURE COMPLETE: \$269/ARCH
Includes: Articulation, Bioform IPN teeth, try-in, processed finish & one reset.
- ESTHETIC DENTURE COMPLETE: \$339/ARCH
Includes: Articulation, Bioform IPN or BlueLine teeth, try-in, Ivocap finish & one reset.

FLEXIBLE PARTIALS

- FLEXIBLE PARTIAL COMPLETE: \$329/ARCH
Includes: Articulation, IPN or BlueLine teeth, try-in, TCS flexible finish.

- MODEL PER ARCH: \$11.00
- BITE BLOCKS REQUIRED: \$34.00
- CUSTOM TRAY REQUIRED: \$36.00

DESIGN YOUR CASE HERE.



CASE INSTRUCTIONS



- Attention _____
- Call me Please send RXs Please send boxes Please evaluate my work

SIGNATURE OF DENTIST

License #