	U	oload Pa	tient Dic	oms	& Photos at Wi	andlab	.com		
	ental	Patient:			Today's Date:				
LABC	ΓORY	Male Female Age:		Age:	Date Wanted:				
Doctor:			Phone:			Time:	12:00	4:00	
Practice:									
Address:							ase adhere		
Type of Restoration:						tim	e schedule l	below.	
Enclosed wi	se	Full Dentures			Partial Dentures				
$\square Impressions \square Bites \square Screws \frac{56}{4} \frac{7}{6} \frac{89}{10} \frac{10}{112} \frac{11}{12} \frac{13}{13} \frac{3}{60} \frac{11}{115} $			Ideal Characterized Flex Follow Wax Rim Contours Casi Use Average Values France Finish				crylic (Flipper) ble (DuraFlex™) Framework ne w/ Tooth Colored Clasp Framework Design sign Y/N (circle one)		
• • • • • •	ن الالالال		Implant Bars (CAD CAM)			Maxillar		Tooth #	
R L L R Repairs Simple Acrylic Repair (same day) Clasp or Tooth (next day by 4pm)			 Hybrid Primary Milled with Attachments Please call for available options. 			 Horseshoe Circular Bar (A-P) Clasping I-Bar 			
Complex Repairs (evaluated upon arrival)			Nightguards			Akers			
Relines			Upper Lower (circle one)			Roach (T-Clasp)			
🗌 Hard Heat Cured (same day)			\Box Flat Plane \Box w/ Anterior Guidance			Acetal (Tooth Color)			
$\square SR Ivocap® (next day by 4pm)$			Dual Laminate (Erkodent®)			□ DuraFlex [™] (Flexible)			
Soft (next day by 4pm)			☐ Thermoplastic (Clearsplint [™])			Mandibular			
Occlusal Conventional Base Processed Base (SR I)	Hard (SR lvocap®)			Lingual Plate				
Denture Identifica					(please print legibly)	Patier	nt Objects, Don't	Add Name	
	uie _				(please print legibly)		it objects, Doint		
Shade:		_ Allergies	/Medical Co	nditions	::				
Signature of Dentist: _					_ License Number:				
Signature is required to fill this p	-	-	pay account in tull	within 30 de				si que valances.	
						roducts & Services			
Verification Index w/ Custom Tray Cast Metal Framework	5 days	IC Hybrid Try-in Zi SwissLoc Bar Ove	rconia Teeth	30 days 30 days	Hybrid Dentures		 DuraFlex[™] Flexible Par 	tials	
Set-up Try-in	10 days 6 days	CAD CAM Impla	nt Bars	15 days	Implant Bar Supported Over Implant Supported Assisted		DurAcetal [®] Clasps (Toc Dual Laminate Nightgu		
Process & Finish Processed Base w/ Rim (SR Ivocap®)	6 days 7 days	Thermoplastic Nie Dual Laminate Nie	, ₀	7 days 5 days	• CAD CAM Titanium Implan		Thermoplastic Nightgu		
(Re)Set and Process	8 days	Hard Nightguard		8 days	Trefoil J-D Digital Implant Printing		 Hard Nightguards Custom Trays Bite Rin 	ns SR-Ivoca	
Flexible Partial (interim use) Immediate Denture (interim use)	Fcciv Retainer		crocurreduces o days			Implant Surgical CT Scan Guides		Injection	
Flipper 1-3 Teeth*	4 days	Acrylic Repair Ha	rd Reline PMR** with Attachments*	1-2 days	 Straub Cranial[™] Technology Full and Partial Dentures 	1	 Same Day Relines and (Local Only) 	Repairs Processin	
Hipper 4+ Teetn* 5-8 days Add a Clasp or T									

**Relines, repairs & PMR's must be ready for pick up at 9am to be returned by 4pm the same | next day (depending on the process). All relines & PMR's must be scheduled in advance.

480.446.7063 | 1525 N. Granite Reef Road • Suite #16 | Scottsdale, AZ 85257 | www.wiandlab.com