

Preference Checklist

(crown & bridge)

Doctor Name

Doctor License Number

Date

Practice Name

Practice Manager

Best Contact Email

Practice Phone

Fax Number

Preferred Contact Method:

(check all that apply)

- Phone
- Fax
- Doctor Email
- Office Email
- Text (please provide cell phone #)

Metal PFM type:

- White HN (default)
- Semi-precious
- Non-precious
- Yellow HN

Insufficient room:

- Trim opposing (default)
- Call to discuss
- Metal occlusal
- Reduction coping
- Metal island
- Trim prep no coping

PLEASE NOTE: If margins are in question, the lab will call to discuss.

Occlusal contact:

- Light (default)
- Open
- Tight

Interproximal contact:

- Light & Broad (default)
- Medium
- Heavy

Margin design:



Show no metal 360°* (default)



All porcelain shoulder 360°*



**MUST prep for this*



Metal collar 360°



Facial porcelain shoulder 180°



Lingual metal collar (traditional)



Metal or Zirconia occlusal



Metal or Zirconia lingual



Please specify additional preferences:

Please fax or email your completed form to DDS Lab at 888-730-9353 or preferences@ddslab.com