# SYNERGY DENTAL TECHNOLOGY

**STRENGTH IN COLLABORATION**

Ph: (215) 647-8880 | info@synergydentech.com
1555 Bustard Road, Suite 120, Lansdale,PA:19446

Doctors Name: _____ Date: _____

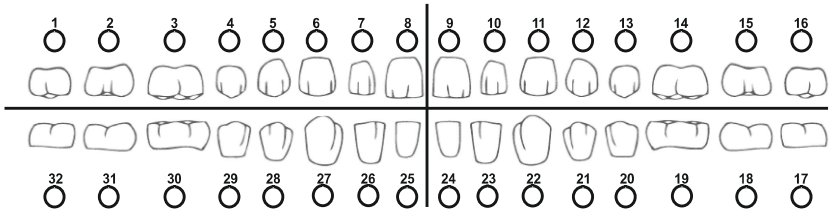
Address: _____

City: _____ State: _____ Zip: _____

Email Address: _____

Patients Name: _____

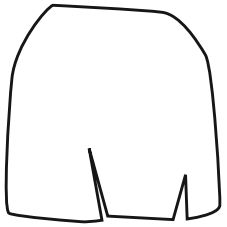
Age: _____ He/She Del By 5 P.M On: _____




Single: Splinted/Bridge: Shade: Prep Shade

☐ Photos Emailed to photos@synergydentech.com

Notes:



**Doc.Sign:** _____ **Licensce No:** _____

# FIXED RESTORATIONS

## TYPE OF RESTORATION

| Tooth # | | Tooth # | |
|---|---|---|---|
| _____ | ☐ Crown | _____ | ☐ Bridge |
| _____ | ☐ Implant Crown | _____ | ☐ Implant Bridge |
| _____ | ☐ Inlay/Onlay | _____ | ☐ Post & Core |

## Type Of Implant & Abutment

| | |
|---|---|
| _____ ☐ Screw Retained (Ti-Base) | _____ ☐ Cement Retained (Custom Abutment) |
| _____ ☐ Screw Ment (Custom Abutment) | _____ ☐ Screw Retained Gold UCLA |

## Type Of Material

| | |
|---|---|
| _____ ☐ Monolithic Zirconia | _____ ☐ Monolithic Emax |
| _____ ☐ Aesthetic Zirconia | _____ ☐ Layered Emax |
| _____ ☐ Layered Zirconia | _____ ☐ PMMA |
| _____ ☐PFM | _____ ☐ Full Cast Metal |

## Type Of Alloy(PFM/Full Cast)

| | |
|---|---|
| _____ ☐ Non Precious | _____ ☐ High Noble White |
| _____ ☐ Semi Precious | _____ ☐ High Noble Yellow |

## Design Type (For PFM)

| | |
|---|---|
| _____ ☐ No Collar | _____ ☐ 360˚ Collar |
| _____ ☐ Lingual Collar | _____ ☐ Metal Occlusion |
| _____ ☐ Rest Seat(Mesial/Distal/Lingual) | |

## Design Stage

| | |
|---|---|
| _____ ☐ Frame Work Try-In | _____ ☐ Bisque Try-In |
| _____ ☐ Finish | _____ ☐ Verification Jig |

## Additional

| | |
|---|---|
| _____ ☐ Insertion Jig | _____ ☐ Gold Hue |
| _____ ☐ Diagnostic Waxup | _____ ☐ Putty Matrix |
| _____ ☐ Digital Model Printed | _____ ☐ Clear Suckdown |