VIVA TECH DENTAL LAB

PREMIUM REMOVABLE PROSTHETIC SOLUTIONS

LAB SLIP / PRESCRIPTION

REMOVABLE PROSTHETIC SOLUTIONS

(419) 858-3384 | Vivatechtoledo@gmail.com | www.Vivatechtoledo.com

4447 Talmadge ste F, Toledo Ohio 43623

PICKUP & DELIVERY AVAILABLE

DENTIST INFORMATION

Doctor Name _____

Office Name _____

Address _____

City _____ State ____ Zip _____

Phone _____ Fax _____

Email _____

PATIENT INFORMATION

Patient Name _____

Date of Birth _____ Gender ☐ M ☐ F

Phone _____

Allergies / Notes _____

_____

PLEASE CHECK SERVICES RQUIRED

COMPLETE DENTURES

- ☐ Handcrafted Complete Denture
- ☐ Handcrafted Immediate Denture
- ☐ 3D Printed Complete Denture
- ☐ 3D Printed Reference Denture
- ☐ 3D Printed Immediate Denture
- ☐ 3D Printed Duplicate Denture

REMOVABLE PARTIALS

- ☐ Acrylic Partial
- ☐ Flexible Partial
- ☐ Cast Metal Partial
- ☐ Nesbit Partial (1 Tooth)
- ☐ Nesbit Partial (2 Teeth)
- ☐ Nesbit Partial (3–4 Teeth)
- ☐ Flipper (Up to 3 Teeth)
- ☐ Flipper (4–7 Teeth)
- ☐ Flipper (8–10 Teeth)
- ☐ Flexible Partial with Wire Clasps

MOUTH GUARDS

- ☐ Hard Night Guard
- ☐ Soft Night Guard
- ☐ Hard/Soft Night Guard
- ☐ Sport Guard Light (3mm)
- ☐ Sport Guard Medium (5mm)
- ☐ Sport Guard Heavy (3 layers / 5mm)

BLEACHING TRAYS

- ☐ Custom Bleaching Tray (Upper)
- ☐ Custom Bleaching Tray (Lower)
- ☐ Custom Bleaching Tray (Both Arches)

CAD/CAM

- ☐ Printed Models

ADD-ONS

- ☐ Additional Tooth
- ☐ Wire Clasp
- ☐ Name on Denture
- ☐ Custom Tray
- ☐ Wax Rim / Bite Block
- ☐ Teeth Setup / Try-In

REPAIRS & RELINES

- ☐ Acrylic Repair
- ☐ Standard Denture Crack Repair
- ☐ Same-Day Denture Repair
- ☐ Replace Tooth
- ☐ Add Tooth / Clasp
- ☐ Repair Flexible Partial
- ☐ Hard Reline
- ☐ Soft Reline
- ☐ Rebase
- ☐ Add Clasp

ADDITIONAL INSTRUCTIONS / SPECIAL NOTES

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_____

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SHADE INFORMATION

Shade _____

Manufacturer _____

Upper Teeth _____

Lower Teeth _____

Gingiva Shade _____

TOOTH SETTING

- ☐ Try-In Setup (Wax)
- ☐ Finish
- ☐ Other _____

OCCLUSION

- ☐ Bilateral Balanced Occlusion
- ☐ Lingualized Occlusion
- ☐ Monoplane Occlusion
- ☐ Other _____

IMPRESSION TYPE

- ☐ Digital Scan
- ☐ Physical Impression

BITE RELATION

- ☐ Record Enclosed
- ☐ Will Follow

NECESSARY ENCLOSURES

- ☐ Impressions / Models
- ☐ Bite Registration
- ☐ Photos
- ☐ Other _____

TURNAROUND TIME

- ☐ Standard
- ☐ Rush (Next-Day)
- ☐ Rush (Same-Day)

SPECIAL INSTRUCTIONS / NOTES

_____

_____

_____

DOCTOR SIGNATURE

_____

DATE _____ LICENSE # _____

Thank You

FOR CHOOSING VIVA TECH DENTAL LAB!

We appreciate your trust and look forward to delivering high-quality results for your patients.

LET'S CREATE EXCEPTIONAL SMILES TOGETHER.