

Full Arch Fixed Rx

3501 Parway Center Ct.
Orlando FL 32808
407.447.4250



GPS
DIGITAL DENTAL LAB

Dr Name: _____ Phone: _____ Todays Date: _____
Address: _____ Return Date: _____
(*Standard time if no date provided*)
City-State-Zip: _____
Patient First Name: _____ Patient Last Name: _____
Shade: _____ Male Female

Design:

- FP 1 - No Pink
- FP 2 - No Pink with long teeth
- FP 3 - With Full Pink Gingival

Materials and Fixation:

Screw Retained No Bar:

- Monolithic Zirconia
- PFM
- Provisional PMMA

Screw Retained With Bar:

- Monolithic Zirconia
- Monolithic Milled Ivotion
- Pekkton prep bar with Esthetic Crowns
- Cr-Co prep bar with Esthetic Crowns

Current restoration being requested at this time:

Preliminary: (5 Days in lab)

- Send Impression Transfers
- Occlusal Rim
- Implant Verification Jig

Try-In: (6 Days in lab) All printed in A1

- From Occlusal Rim
- Redesign (digital reset)
- Implant Verification Jig

Finish: (10 Days in lab)

- Finish
- Reset & Finish (Design approval required)
- Skip Try-In and go to Finish (Design approval required)

Other notes or instructions:

- Photos sent to Photos@gpsdental.com Call Dr. after case evaluation (allow 2 business days)



GPS
DIGITAL DENTAL LAB

3501 Parway Center Ct.
Orlando FL 32808
407.447.4250

Dr. Signature: _____

License #: _____

All fields are required. Please fill out completely.