



UTICA
DENTAL LABORATORY
CONSISTENT · QUALITY · SERVICE

302 Genesee St. * Utica, NY 13502 * (866)733-3152 * info@uticadentallab.com
www.uticadentallab.com

WORK ORDER FORM

****FIXED****

LAB USE ONLY:

Step One: Doctor Info

Today's Date E-Mail

Doctor

Address

City State Zip Code

Date Received:

Dr. Models:

Lab Models:

Pan #:

Step Two: Patient Info

Patient Name

Male Female Age

Step Three: Case Info

Try-In Finish Repair
Shade Return Date

Step Four: Product Selection (Selection Below Will Determine Fee)

Case Instructions:

Pontic Design:
(Circle one)



Occlusal Contact: Normal Ideal Just Out

Zirconia

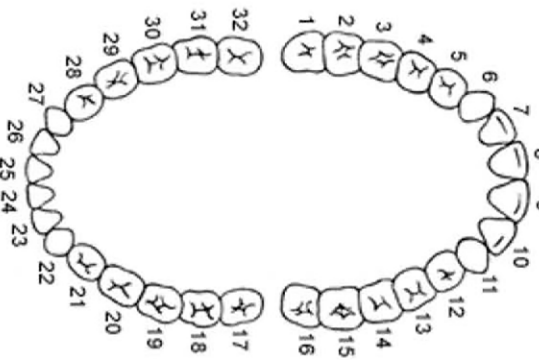
- BruxZir
- IPS e-max
- Katana
- Bridge

Full Cast

- Non Precious
- Noble
- High Noble

Provisional Restorations

- PMMA Temporary
- Individual units
- Splinted



Step Five: Validate

Please Send The Following: Rx Forms Boxes Mailing Labels

Signature: License#: