

# DOCTOR PREFERENCES \*Items in BOLD CAPS are Ottawa Dental Laboratory standards.



OTTAWA DENTAL  
LABORATORY

## Contact Information

Doctor: \_\_\_\_\_  
Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
City: \_\_\_\_\_  
State: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_  
Email: \_\_\_\_\_  
State License No: \_\_\_\_\_

## Additional Office (if applicable)

Contact Person: \_\_\_\_\_  
Address: \_\_\_\_\_  
Telephone: \_\_\_\_\_  
Fax: \_\_\_\_\_

## Whom Should We Contact For:

Re-impressions or Bites: \_\_\_\_\_  
Accounts Payable: \_\_\_\_\_  
Shades: \_\_\_\_\_  
Due Dates/Patient Scheduling: \_\_\_\_\_

## FIXED

### Crown & Bridge / Ceramics

#### Models:

A.) Die Spacer - None 1 Coat 2 Coats 3 Coats 4 Coats B.) **LAB** Trims Dies **DOCTOR** Trims Dies  
C.) If margins are unclear: **CALL** Return to **DOCTOR**

#### Alloy Type:

##### WILL INDICATE ON PRESCRIPTION (or)

White High Noble Yellow High Noble - Type IV (58%) Yellow High Noble - Type III (75%) Yellow High Noble - Type II (77%)  
Semi-precious Non-precious **AU2 - Flat Rate** Titanium

#### Occlusion:

A.) Number of Spacer Layers - None 1 2 3  
B.) Close Bites: **MAKE NO ADJUSTMENTS WITHOUT CALLING**  
Okay to trim/adjust opposing for clearance Metal Occlusal Surface Reduce & Mark Prep Metal Island Where Close  
C.) Slightly Out of Occlusion - Yes No Comments:

#### Margins:

A.) No Exposed Metal B.) **EXPOSED METAL COLLAR ON LINGUAL (1mm)** C.) 360° Metal Band (5mm)  
D.) Porcelain Butt Margin - 180° 360° (when applicable)

#### Posterior Occlusal Anatomy:

Match Pt's Natural Dentition **MAKE IDEAL**

#### Pontic Design:

**MOD. RIDGE LAP** Point Contact Sanitary Contact



#### Shading:

A.) Posterior Occlusal Stain - None **LIGHT** Medium / Heavy

#### Characterization:

B.) Characterizing Stain On Anteriors - **YES** Only On Request

#### Implants

Cement Retained Screw Retained  
Custom Abutment Ti Base

#### Additional Information for Fixed Preferences:

Please send information to [customerservice@ottawadentallab.com](mailto:customerservice@ottawadentallab.com)

1304 Starfire Drive, Ottawa, IL 61350 T: 800-851-8239 F: 815-434-0760 WWW.OTTAWADENTALLAB.COM

# REMOVABLE

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## Full Dentures

### Trays/Bite Blocks:

Custom Trays - Perforated **NON-PERFORATED**

### Denture Type and Teeth:

Economy Denture - Kulzer Artic Teeth Premium Denture - Kulzer Mondial Teeth Signature Denture - Your Choice of Teeth

### Color/Make of Nylon to be Placed:

Default - **Pink**

### Overdentures:

Cast Substrates Lab Process Attach Doctor Does Chairside Pick-Up

### Post Dam:

**BUTTERFLY** Beading Line Only

### Finish:

**STIPPLE** All Smooth

## Partial Dentures

### Design:

**TELEPHONE ALL DESIGN MODIFICATIONS FOLLOW EXACT RX** Modify Design Required Reduce Opposing Teeth As Required

### Connector Preferences:

A.) Upper - **HORSESHOE** Palatal Bar (Narrow / Wide) Circular Other:  
B.) **LINGUAL BAR, mand.** Apron/Lingual Plate Kennedy Plate

### Clasp Preferences:

Will Indicate on Rx **AKERS BACK ACTION ROACH** Equipoise RPI Will Use Lab Recommendation

### Clasp Retention:

Light **MEDIUM** Heavy

### Lingual Relief:

None **LIGHT** Medium Heavy

### Try-In:

Frame Only **WITH BITE BLOCK** With Teeth

## Night Guards

### Vacuformed:

Comfort H/S Comfort Hard Comfort Soft

### Processed:

Custom H/S Custom Semi-Rigid Custom Hard

### Additional Information for Removable Preferences:

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