



BLUESTONE
DENTAL

Doctor _____

Case ID _____

Clinic _____

Date Sent _____

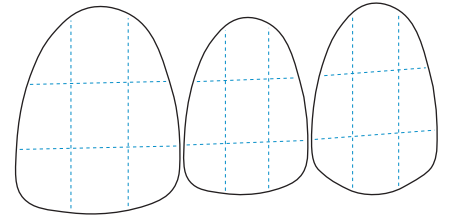
Patient _____

Due Date _____

Case turnaround is based on when the case arrives at Bluestone Dental. Please allow 5 business days (Mon-Fri) to complete. ie. Cases picked up on Monday will be normally delivered by next Monday. Complex cases will require 7 to 10 business days.

CASE INSTRUCTIONS

17	16	15	14	13	12	11	21	22	23	24	25	26	27
47	46	45	44	43	42	41	31	32	33	34	35	36	37



Please CIRCLE single units and use BRACKET or LINE to indicate splinted units.

Stump Shade _____

RESTORATION TYPE

- | | |
|--|---|
| <input type="checkbox"/> Ultra Translucent Zirconia (max. 3 unit bridge) | <input type="checkbox"/> Cement Retained |
| <input type="checkbox"/> E.MAX Lithium Disilicate | <input type="checkbox"/> Screw Retained |
| <input type="checkbox"/> High Translucent Zirconia | <input type="checkbox"/> Surgical Guide |
| <input type="checkbox"/> Apply Porcelain as Needed | <input type="checkbox"/> Radiographic Stent |
| <input type="checkbox"/> PFM Non-Precious | <input type="checkbox"/> Diagnostic Wax-Up |
| <input type="checkbox"/> Post and Core (NP) | Implant System _____ |
| <input type="checkbox"/> Temporary PMMA | Size / Platform _____ |
| <input type="checkbox"/> Occlusal Splint | _____ |

NOTES AND REMARKS

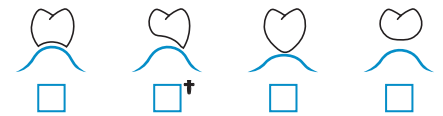
Translucency

☐ Low ☐ **Medium[†]** ☐ High

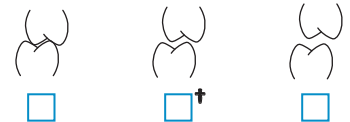
Occlusal Stain

☐ None ☐ **Light[†]** ☐ Heavy

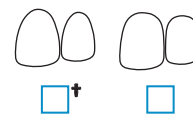
Pontic Style



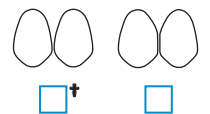
Contact Strength



Embrasure



Proximal



Handled By

Date

Model _____

Design _____

Mill/Print _____

Step 1 _____

Step 2 _____

Step 3 _____

QC Pass / Fail _____

Lab Use Only

WEB-July 2023