Katana DENTAL LAB

2828 NW 57th STREET
SUITE 208
OKLAHOMA CITY, OK 73112
Phone: (405) 254-3901

Doctor Name: _____ Date: _____ * Return Date: _____

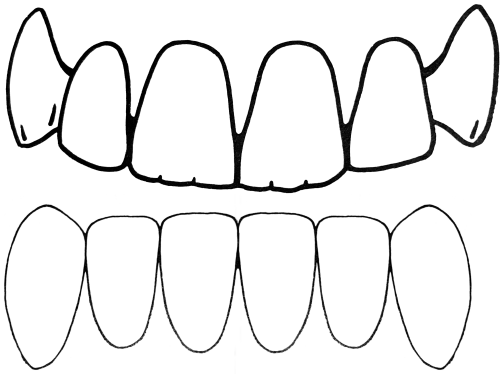
Patient Name: _____ Patient Age: _____

TYPE OF RESTORATION:

- ☐ Zirconia Inlay / Onlay
- ☐ Zirconia Crown
- ☐ Zirconia Bridge
- ☐ Monolithic Zirconia
- ☐ High Trasnlucent Zirconia
- ☐ Ziconia Veneer
- ☐ Porcelain fused to Zirconia
- ☐ Lithium Disilicate Crown
- ☐ Lithium Disilicate Veneer
- ☐ Lithium Disilicate Inlay / Overlay
- ☐ Diagnostic wax-up
- ☐ PMMA Crown / Bridge
- ☐ Implant custom abutment

INCLUDED WITH CASE:

- ☐ Pre-Op Models
- ☐ Photo
- ☐ Implant Type



Please indicate teeth to be restored

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

Shade of Restoration: _____

Shade of Prepared Teeth: _____

Shade of Prepared Teeth:

- ☐ Light
- ☐ Medium
- ☐ Heavy
- ☐ None

Additional Instructions:

Doctor's Signature: _____ License # _____