



REQUIRED INFORMATION

Doctor: _____ Lic. #: _____

Address: _____

City/State/Zip: _____

Phone: _____

Dr. Signature^: _____

Account #: _____

Due Date (by 5 pm): _____

Turnaround Time: Fixed (10 Days) Removables (10 Days)

Rx Date: _____ Patient Next Appt.: _____

Patient Name: _____ / _____ M F



12000 Aviation Boulevard
Hawthorne, CA 90250
Direct (310) 915-9121
Fax (310) 915-7171

www.tridentlab.com
customerservice@tridentlab.com

Send Your Cases to Trident Today!

(800) 221-4831

IMPORTANT: Please call ahead to arrange rush cases.

CROWN & BRIDGE

SELECT: CROWN BRIDGE INLAY/ONLAY VENEER

ZIRCONIA **PORCELAIN TO METAL** **FULL CAST METAL**

- Full Contour Zirconia (FCZ)
- Zirconia Layered (PFZ)
- BruxZir Solid Zirconia
- BruxZir Anterior Solid Zirconia
- Non-Precious
- Semi-Precious
- White Gold HN
- Yellow Gold HN
- Non-Precious
- Semi-Precious
- White Gold HN
- Yellow Gold HN

ALL-CERAMIC

- Lithium Disilicate

MARYLAND BRIDGE

COMPOSITE

TRI-TEMPS™

C & B EXTRAS

- Rest Wing
- Fit to Partial
- Diagnostic Wax-up

IMPLANTS (Servicing All Major Implant Brands)

- FCZ & Titanium Abutment Bundle (Crown, Abutment, Screw, Analog, Tissue Model, Labor)

CUSTOM/SELECT ABUTMENT:

Titanium Zirconia

- Stock Abutment
- Custom Abutment
- Parts Supplied by Doctor
- Size _____
- Manufacturer _____

FIXED CASE SPECIFICATION

SELECT Complete Porcelain Bake Glaze/Polish
STAGE: MTI / Coping Bisque Bake Finish

BUCCAL MARGIN

- Porcelain Butt Margin
- 360° Porcelain Butt Margin

STAINING

- Light Heavy
- Medium None

METAL DESIGN



No Mtl. Collar 360 Mtl. Collar Metal Lingual Anterior Metal Lingual Collar Mtl. Occl. Excl. Buccal Cusp. Mtl. Occl. Incl. Buccal Cusp.

PONTIC DESIGN



Full Ridge Modified Ridge No Ridge No Contact Point Contact Ovate

OCCUSAL CLEARANCE

- Light
- Open
- Tight

CONTACT

- Light
- Medium
- Heavy

IF INSUFFICIENT ROOM:

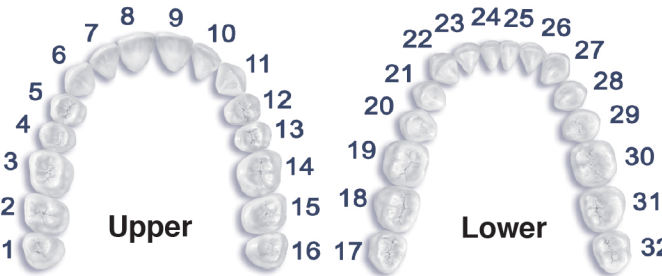
- Adjust Opposing
- Reduction Coping
- Metal Occlusal / Lingual

SPECIAL INSTRUCTIONS

TOOTH #: _____

SHADE: _____

STUMP SHADE: _____



REDO CASE

REDO: Yes No

ORIGINAL PRODUCT ENCLOSED: Yes No

Tri-Clean (Denture Appliance Cleaner)

REMOVABLE PROSTHETICS

SELECT: FULL DENTURE PARTIAL UNILATERAL

TISSUE SHADE:

- Light Pink
- Pink
- Ethnic

SELECT STAGE:

- Complete (One Stage)
- Frame Try-in
- Wax Try-in w/Teeth
- Final Process
- Upgrade to Premium Teeth

UPGRADE TO

PREMIUM TEETH

FLEXIBLE PARTIALS

- Tri-Flex

COMBO PARTIALS

- Tri-Flex (with Lasermet Subframe, Flexible Saddles/Clasps)

CAST METAL PARTIALS

- Lasermet RPD
- Vitallium 2000
- Premium Cast Partial

ACRYLIC PARTIALS

- Flipper (1 Tooth)
- Stayplate* (2-5 Teeth)
- Acrylic Partial* (6+ Teeth)

*Includes wire clasps

CLASP DESIGN

- Lab Select I-Bar/RPI
- Roach/T-Bar Akers/C-clasp

MAJOR CONNECTOR

- Lab Select Full Palate
- Horseshoe Lingual Bar
- Palatal Strap Lingual Plate
- Double Palatal Bar

DENTURES

- High Impact Denture
- Premium Denture

IMMEDIATES

- Extract All
- Extract tooth # _____

BITESOFT SPLINT THERAPY

- (Upper Arch only)
- Anterior Full Arch
- SELECT: Dual Laminate Thermo-lined

NIGHT GUARDS

- Hard Soft
- Hard/Soft Brux+

SPORTS GUARD

- Pro-Form Sports Guard

REMOVABLE EXTRAS

- Wax Bite Block
- Wax Bite Rim
- Custom Tray
- Bleach Tray
- Repair
- Rebase
- Reline Hard
- Reline Soft

CASE MATERIALS ENCLOSED:

- Impressions Bite Registration Models Implant Parts

REQUEST FREE SUPPLIES:

- Rx Forms Case Boxes FedEx Labels

TURNAROUND TIME	Days InLab [†]
Fixed	10
Removable	10
Implants*	10+

*Additional time maybe required to order parts.

†Excludes Weekends & Holidays. Working times are not guaranteed.

Please Note: A case requiring a call from a technician or scheduling department may cause delays to the fabrication process.

RUSH SERVICES/FEES[▲] Days InLab

"Rush 25" - \$25 Per Unit/Per Arch 4

▲Rush services/fees are not available for all products and subject to change during the holiday seasons. To arrange rush service for your case, contact Trident Dental Scheduling Department. Rush fees not subject to credit.

*IMPORTANT INFORMATION

All prices are subject to change without notice and are quoted as complete (one stage) or one unit. Some products are subject to additional fees, e.g., C & B and removable extras, attachments and additional implant parts, multiple stages, and metal surcharges.

*All cases are delivered next day air by 5 pm to your office. Additional time and fees may apply to outlying areas. Alaska, Hawaii and International excluded.

TRIDENT DENTAL LABORATORY TERMS & POLICIES[^]

By signing or sending this Rx slip (or a substitute therefore) to Trident Dental Laboratory (d.b.a. Trident Dental Labs), I agree to abide by all terms and policies listed below.

All statements must be paid in full by the 22nd of the month in which the statement is prepared. Any amounts not paid by the last business day of such month will incur a 2% finance charge per month, and the account will be automatically placed on C.O.D. terms. All cases will be billed in stages and will be paid in full according to stage. All cases and items sent remain the property of Trident Labs, Inc., until client's account is paid in full. A minimum of \$50.00 will be charged for returned checks. All disputes shall be governed in all respects by California law and client agrees to submit to the exclusive jurisdiction of, and venue in the County of Los Angeles, State of California in any dispute, with the prevailing party to recover attorney's fees, court costs and other expenses, including actual expert witness fees, if any, in addition to any other relief to which prevailing party may be entitled.

Please visit tridentlab.com for complete warranty and remake information.