



# ABSOLUTE ACRYLICS

910 790 2071 **voice**

910 790 2072 **fax**

absolutedentallab.com

**DUE DATE:** \_\_\_\_\_

**TIME DUE:** \_\_\_\_\_

**TODAY'S DATE:** \_\_\_\_\_

**LOCATION:** \_\_\_\_\_

Please follow our delivery schedule.

**DOCTOR'S NAME:** \_\_\_\_\_

**PATIENT'S NAME:** \_\_\_\_\_

**PATIENT IDENTIFICATION CODE (PIC):** \_\_\_\_\_

Required for case communication to maintain HIPAA compliance. Please enter existing PIC (already used within your office). Or create a 5-7 digit code (alpha & numerical)

Example: Pt. John Doe = JD1234. Please chart this code for your records.

### DENTURES

Max  Mand

Standard  Immediate  
 Premium  Signature\*

*\*Call for details* **forever deature**  
YOUR FOREVER SMILE

### TISSUE SHADE

Original  Dark Red Pink  
 Light Pink\*  Original Opaque  
 Light Red Pink  Send Shade Guide

*\*Preferred standard shade*

### FINISH

*Signature Series or Premium Only*

Smooth  Characterized  
 Stippling  Rugae

### PARTIAL

Max  Mand

**ABSOLUTE CARBON CLEAR**

**ABSOLUTE CARBON FLEX**

Cast Metal  
 Duraflex Partial  
 Duraflex Nesbit  
 Acrylic Partial  
 Acrylic Flipper

### REPAIR SERVICES

Reline  Add Tooth  
 Rebase  Add Clasp  
 Repair

### BRUXISM

Flat Plane Night Guard  
 Comfort H/S  
 Bleaching Tray

### NEXT APPOINTMENT

Try-in  
 Try-in w/ Bite Rim  
 Try-in w/ Teeth  
 Process To Final

### OTHER SERVICES

Space Maintainer  
**Sleep Apnea/Snore Guard**  
 Panthera  EMA

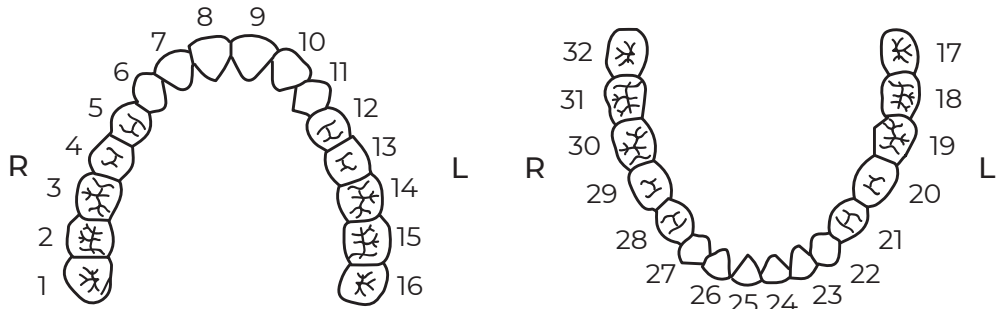
### ADDITIONAL SERVICES

- Try-In
- Back-Up Denture
- Custom Tray
- Bite Rim
- Process
- Duplicate Current Denture
- Additional Try-In
  
- Use Current Denture for Bite Rim/Custom Tray

### ANALOG PROCESSED DENTURE

- Set up for Try in
- Process

### TOOTH INFORMATION



Tooth Shade: \_\_\_\_\_ Tooth Mold#: \_\_\_\_\_

### INSTRUCTIONS:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### WE NEED:

- Prescription Forms
- Mailing Labels
- Mailing Boxes

Scan to Upload Photos:



**SIGNATURE:** \_\_\_\_\_ **LICENSE #:** \_\_\_\_\_