ORDER FORM
CROWN & BRIDGEWORK

(02) 7202 9555
info@sparxlab.com.au
www.sparxlab.com.au
L1, 23- 27 Macquarie Street
Parramatta NSW 2150

Clinician _____ Date _____

Clinic Name _____ Patient Name _____

Clinician Address _____ Work Required by _____

◯ New Case ◯ Continuation/Remake

RESTORATION TYPE

- ☐ Crown
- ☐ Bridge
- ☐ Inlay/Overlay
- ☐ Bonded Bridge/Wing
- ☐ Veneer
- ☐ Diagnostic Wax-up (Advise Teeth No.)
- ☐ PMMA (Temporary Crown)
- ☐ Post & Core

Gold Crown

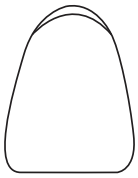
- ◯ Low-Precious*
- ◯ Precious*
- ◯ Semi-Precious*

*Price subject to change dependant on market price.

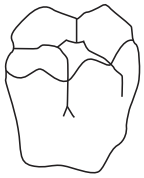
Ceramic

- ◯ FMZir - Fully Monolithic Zirconia
- ◯ Lithium Disilicate
- ◯ UZir - Ultra Translucent Zirconia**
- ◯ PFZ - Porcelain-Fused-to-Zirconia**
- ◯ Hybrid
- ◯ PFM ◯ Semi ◯ Non-Precious ◯ Precious

SHADE



Anterior



Posterior

_____ _____

_____ _____

_____ _____

Stump Shade _____

**Provide stump shade if non-vital

Email Images: info@sparxlab.com.au

Images sent via: ◯ WhatsApp ◯ Email

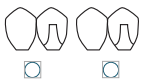
EMBRASURE

◯ Open ◯ Closed*

OCCLUSAL CONTACT

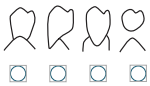
◯ Heavy ◯ Light* ◯ Open

PROXIMAL CONTACT



◯ Normal ◯ Extended

PONTIC STYLE



◯ ◯ ◯ ◯

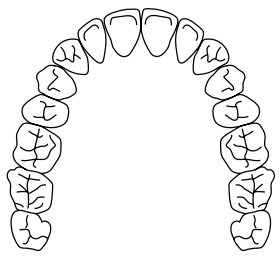
*Default

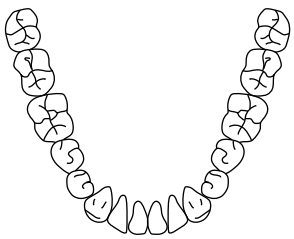
MATERIAL ENCLOSED

Please Tick ✔	You	SparX Lab
Triple Tray	◯	◯
Upper Impression	◯	◯
Lower Impression	◯	◯
Upper Model	◯	◯
Lower Model	◯	◯
Bite Registration (over prepared abutment)	◯	◯
Previous Veneers/Crown/Bridges	◯	◯
Articulator	◯	◯
Denture	◯	◯
Implant Component	◯	◯
P/C (Post Core)	◯	◯
Shade Tab	◯	◯

TOOTH CHART

☐ Upper ☐ Lower





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ADDITIONAL INSTRUCTIONS