Today's Date: _____ Return by 5pm on: _____

** If return date is not specified, will default to regular lab working times. "ASAP" does not qualify as a date.

Please send: ☐ Prescriptions ☐ Boxes ☐ Case Bags

Mailing Labels: ☐ Pre-paid Fed Ex Labels ☐ Pre-paid Mail Labels

NDX KELLER
160 Larkin Williams Industrial Court
Fenton, MO 63026
636-600-4200 • 800-325-3056

NDX Keller
YOUR DENTAL LAB PARTNER
NDXKeller.com

DOCTOR: _____

STREET: _____

CITY: _____ STATE: _____ ZIP: _____

PHONE: ( ) _____ FAX: ( ) _____

EMAIL: _____

PATIENT: (LAST) _____ (FIRST) _____

AGE: _____ ☐ **MALE** ☐ **FEMALE**

Send photos to NDXKellerPhotos@nationaldentex.com
Please include doctor and patient name in email.

CROWN & BRIDGE

All-Ceramic

- ☐ Znext™ Full Contour Zirconia
- ☐ Znext Anterior Zirconia
- ☐ Znext Veneered (Zirconia Occlusal w/ Ceramic Facial)
- ☐ Znext Layered (Zirconia Substructure w/ Ceramic Overlay)
- ☐ IPS e.max®
- ☐ Enext™ Lithium Disilicate
- ☐ Empress®
- ☐ Empress w/ Cutback

Keller Implant Options

Screw-Retained Crown ☐ Znext FCZ ☐ Znext Anterior ☐ Semi-Precious

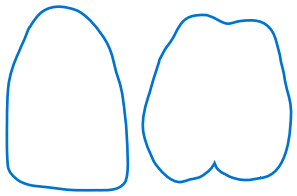
☐ Complete I *Includes: Titanium Abutment & Choice of Crown.*
☐ Znext FCZ ☐ Znext Anterior ☐ Znext Layered

☐ Complete II *Includes: Titanium Abutment & Choice of Crown.*
☐ Semi-Precious ☐ Enext Lithium Disilicate ☐ e.max

Implant w/ Abutment Provided by Dr.
☐ Znext FCZ ☐ Znext Anterior ☐ Znext Layered
☐ Semi-Precious ☐ Enext Lithium Disilicate ☐ e.max

Implant w/ Abutment in place
☐ Znext FCZ ☐ Znext Anterior ☐ Znext Layered
☐ Semi-Precious ☐ Enext Lithium Disilicate ☐ e.max

☐ Implant Prosthetic Guide with an Abutment Placement Guide



Tooth #'s _____

Shade _____ or

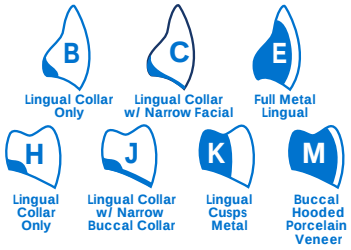
☐ see shade map

☐ Crown prepped for future partial

PFM Design Chart

Occlusion
☐ In Occlusion
☐ Slightly Out of Occlusion*
☐ Out of Occlusion

Default Design is Full Porcelain with No Metal Collars
If Alternate Design is Needed, Please Circle



Porcelain Butt Margin
☐ Yes, on tooth # (s) _____

Porcelain to Metal

- ☐ Non-Precious (White)
- ☐ Noble/Semi-Precious (White)*
- ☐ High Noble (White)
- ☐ Captek™

☐ Metal Try In ☐ Bisque ☐ Finish

Full Cast Yellow Gold

☐ 63% ☐ 46%* ☐ 20%

* Default if not specified.

DENTURES & PARTIALS

Choose Arch

- ☐ Upper
- ☐ Lower

Choose Step

- ☐ Try-In*
- ☐ Complete

Tooth Choice

- ☐ Economy
- ☐ Premium

Choose Acrylic Shade

- ☐ Pink*
- ☐ Lt. Ethnic
- ☐ Dark Ethnic

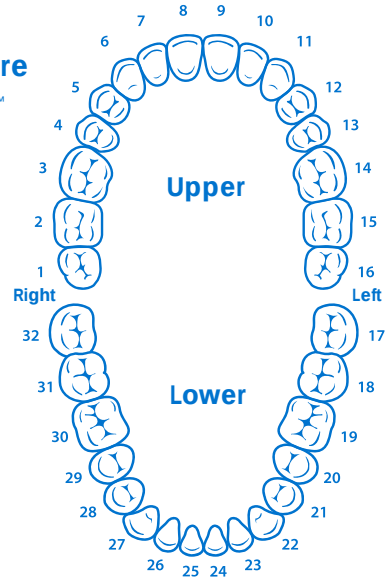
* Indicates Lab Default

☐ **Full Denture**

☐ **Partial Denture**
- ☐ ClearFrame™
- ☐ SoftTite
- ☐ Metal Frame
- ☐ All Acrylic

☐ **Clasps**
- ☐ Wire Clasp
- ☐ Ball Clasp
- ☐ Clear Clasp not available on Valplast

☐ **Flexibles**
- ☐ DuraFlex™ *
- ☐ Valplast



INSTRUCTIONS:

Shade: _____ Mould: _____

☐ Name in Denture (not available in flexibles)

Doctor Signature _____

License No. _____

Terms are net 10 days from statement date.