



## OFFICE PREFERENCES

SolutionsDL.com/preferences

SCAN NOW



**SOLUTIONS**  
DENTAL LAB™

OFFICE

EMAIL

PHONE

PRIMARY CONTACT/ MANAGER

BILLING CONTACT

FIRST NAME

FIRST NAME

LAST NAME

LAST NAME

DIRECT

DIRECT

EMAIL

EMAIL



DOCTOR (S)



PHONE



EMAIL

1.

2.

3.

### CROWN & BRIDGE

#### INTER-PROXIMAL CONTACT

PINPOINT, LIGHT, IDEAL, TIGHT

#### OCCUSAL CLEARANCE

REDUCE OPPOSING, REDUCE ABUTMENT AND PROVIDE COPING, CONTACT DOCTOR

#### UNDERCUT ON ADJACENT TOOTH

REDUCE AND MARK, CONTACT DOCTOR

#### IMPLANT

CEMENT RETAINED/SCREW RETAINED

#### OCCUSAL CONTACT

1 MM OUT OF CONTACT, LIGHT CONTACT, IDEAL CONTACT, HEAVY

#### UNDERCUT ON PREP

BLOCK OUT / REDUCE PREP AND PROVIDE COPING/EMAIL OR CALL

#### UNPARALLEL PREPS

(PATH ON INSERTION) — ADJUST AS NEEDED AND PROVIDE COPING, CONTACT DOCTOR

#### PONTIC DESIGN

OVATE, RIDGE LAP, MODIFIED RIDGE LAP, SADDLE

### REMOVABLE

#### PARTIAL PREFERENCES

FLEX / ACRYLIC

#### PARTIAL DESIGN

UNILATERAL, BILATERAL

#### PARTIAL TYPE

ACRYLIC PARTIAL, FLEX PARTIAL, CAST METAL, FRAME/FLEX COMBO



FIXED



IMPLANTS



REMOVABLE



ORTHO



1 855 260-5578



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