



# TOP-TECH DENTAL LAB

Date Sent: \_\_\_\_\_

Case Number

Date Due: \_\_\_\_\_

Mobile: (+86) 135 2873 9005

Contact : Chris

Dentist:

Patient:

We sent:  Impression  Model  Bite  Study Model  Abutement  Other

## REMOVABLE RESTAURATIONS

Restauration  Upper/  Lower Tooth shade \_\_\_\_\_

- Partial Chrome (framework)  Set up teeth
- Valplast  Expander/Retainer
- Acrylic-Denture  Occlusal splint

Bite rims  Bleaching tray

Special tray  Invisalign

For try-in  finish acrylic  finish in Valplast

SPECIFIC INSTRUCTION:

