

Clinical Lab Preference

To present you with the most high quality products, Master Dental Solution is pleased to provide our “Clinical Lab Preference” Form. It is designed to fulfill your individual requests and ensure consistency in the quality of your restorations. Please fill out this form, which will be applied towards all your future cases as default preferences, unless specified on the Rx form.

Doctor:			Description	Answer
1	Occlusion	A	In cases where we have insufficient occlusal room can we make “reduction copings” and reduce either die or opposing by maximum 1mm without contacting you?	<input type="checkbox"/> Yes <input type="checkbox"/> No
		B	Our lab default is to have occlusion slightly relieved so that shim stock slips through (0.1mm). Is this ok?	<input type="checkbox"/> Yes <input type="checkbox"/> No
		C	IF NO: Lighter(0.2mm) or Heavier (positive contact)	<input type="checkbox"/> Lighter <input type="checkbox"/> Heavier
2	Contact	A	Interproximal area of contacts are defaulted “Normal” or do you prefer “Broad” areas	<input type="checkbox"/> Normal <input type="checkbox"/> Broad
3	Shading	A	When shade is picked, should we use mid portion of the shade tab for “brightness” or “Map” brightness according to the incisal/mid/coronal portions of tab.	<input type="checkbox"/> Mid <input type="checkbox"/> Map
		B	Do you want occlusal stain applied to posterior teeth by default?	<input type="checkbox"/> Yes <input type="checkbox"/> No
		C	IF YES: What colour?	<input type="checkbox"/> Yellow <input type="checkbox"/> Black <input type="checkbox"/> Brown
4	Implant Cases	A	In cases where screw-retained crowns are requested and the screw-hole will be on the buccal or unesthetic, can we automatically convert to cement-retained without asking you? We will advise you of the change.	<input type="checkbox"/> Yes <input type="checkbox"/> No
5	PFM Alloys		Please choose your default PFM alloy	
		A	Non Precious (design30 Ivoclar Co60.2% Cr30.1%)	<input type="checkbox"/>
		B	Noble Alloy (design67 Ivoclar Au4% Pd62.7%)	<input type="checkbox"/>
	C	High Noble Alloy (Y-1 Ivoclar Au 61.7% Ag25.2)	<input type="checkbox"/>	
6	Full Gold Crown Alloys		Please choose you default FGC alloy	
		A	High Noble Alloy (X-L Ivoclar Au61.7% Ag25.2%)	<input type="checkbox"/>
		B	Y+ Alloy(Argenco Y+ Argen Au2% Pd34.9%)	<input type="checkbox"/>
7	Other Preferences	A	If we have a case to discuss with the doctor, would you prefer to be contacted by:	<input type="checkbox"/> Phone <input type="checkbox"/> Email
			IF email, your email address: _____	
8	Special Requests that Apply to every case		_____	

Please fill out this form and email to masterdentalsolution@hotmail.com

