

Dental Prosthetic Services

Doctor Preferences—Fixed



Doctor Name: _____ Date: _____

Your restorations are crafted based on your preferences. We have found most of our clients prefer their cases fabricated in a similar fashion. To improve communication, we have developed a list of the most requested procedures. If you routinely prefer other options, please check these and we will enter your preferences in our system.

Any specific requests written on your prescriptions will take precedence over your routine preferences.

When sending in cases to us, please:

1. Fill out laboratory prescriptions completely
2. Send as much information as possible
3. Include study models, diagnostic wax ups, pictures, temporary models, and patient concerns

Please return preference sheet to DPS:

1900 51st Street NE, Cedar Rapids, IA 52402
 800-332-3341 Fax: 319-393-8455
 www.DPSdental.com dps@dpsdental.com

Crown and Bridge Standards	Options
<input type="checkbox"/> 80 Microns Die Spacer	<input type="checkbox"/> No Spacer <input type="checkbox"/> 120 Microns
<input type="checkbox"/> Narrow Lingual Band	<input type="checkbox"/> Other _____
<input type="checkbox"/> Normal Proximal Contact	<input type="checkbox"/> Broad <input type="checkbox"/> Light <input type="checkbox"/> Heavy
<input type="checkbox"/> Contact Double Checked on Solid Model	<input type="checkbox"/> No Solid Model
<input type="checkbox"/> Slight Relief of Opposing Model for Clearance, if needed	<input type="checkbox"/> No Call <input type="checkbox"/> Call First
<input type="checkbox"/> Out of Occlusion - Shimstock	<input type="checkbox"/> Foil Opposing <input type="checkbox"/> .5mm <input type="checkbox"/> In Occlusion
<input type="checkbox"/> Light Occlusal Staining	<input type="checkbox"/> None <input type="checkbox"/> Medium <input type="checkbox"/> Heavy
<input type="checkbox"/> No Cervical Staining	<input type="checkbox"/> Light <input type="checkbox"/> Heavy
<input type="checkbox"/> Pontic Slight Cast Relief	<input type="checkbox"/> No Relief <input type="checkbox"/> Ovoid
DPS PFM Standards	Options
<input type="checkbox"/> High Noble White	<input type="checkbox"/> High Noble Yellow <input type="checkbox"/> Noble White <input type="checkbox"/> Non-Precious (PPW Pricing)
<input type="checkbox"/> Porcelain to Buccal Margin	<input type="checkbox"/> Narrow Buccal Band <input type="checkbox"/> Porcelain Butt Margin
DPS Full Cast Standard	Options
<input type="checkbox"/> High Noble Yellow	<input type="checkbox"/> Noble White <input type="checkbox"/> Noble Yellow <input type="checkbox"/> Non-Precious