



Q.S.D.L.

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Creating the perfect smile is not just our job, it's our mission.

Lab. Lic. No. 02935

Dr. Mailout Date _____

Due Date: _____

Dr. _____

Patient _____ Sex _____ Age _____

- PVC
 NON PRECIOUS
 SEMI-PRECIOUS
 PRECIOUS
 CAPTEK

Case Disinfected (Y / N)

Shade _____

- PORC. SHOULDER (BUTT JOINT)

- METAL (OCCLUSAL, LINGUAL)

- 360° METAL BAND

- NO LINGUAL BAND

- F.C.C. (WHITE GOLD, YELLOW GOLD)

- ALL PORCELAIN

- PRESS I

- LAVA

- IPS e.max

- ZIRCONIA

- OTHER

- OCCLUSAL STAIN

- NONE

- LIGHT

- MEDIUM

- HEAVY

- PONTIC DESIGN



Saddel
Lap

Ridge
Lap

Buccal
Tip

Modified
Ridge Lap

Conical
Contact

Sanitary

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

INSTRUCTIONS:



DR'S SIGNATURE _____

LICENSE NO. _____



TERMS: Accounts are due and payable by the 30th of the month. A 1.5% service charge will be added to all accounts past due on the 1st day of the month.