



IMPRESS
DENTAL STUDIO

10800 Menaul Blvd NE Albuquerque, NM 87112
505-398-9357
impressdentalstudio.com

Doctor _____ Patient _____
Street _____ e-mail _____
City/State/Zip _____ Requested Completion Date: _____
Phone (____) _____ - _____

HYBRIDS & REMOVABLES

<input type="radio"/> FULL DENTURE <input type="radio"/> Upper <input type="radio"/> Lower <input type="radio"/> Premium <input type="radio"/> Set Teeth for Try-in <input type="radio"/> Process and Finish	<input type="radio"/> PARTIAL DENTURE <input type="radio"/> Upper <input type="radio"/> Lower <input type="radio"/> Premium <input type="radio"/> Metal Frame <input type="radio"/> Metal Frame & Set for Try-in <input type="radio"/> Process and Finish
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<p align="center">SHADE</p> Teeth _____ Denture Base Shade: <input type="radio"/> Original <input type="radio"/> Light Pink <input type="radio"/> Light Reddish Pink <input type="radio"/> Dark Pink	<p align="center">REPAIR</p> <input type="radio"/> Reline <input type="radio"/> Rebase <input type="radio"/> Add Clasps <input type="radio"/> Weld/Solder <input type="radio"/> Other _____
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INSTRUCTIONS

Signature _____ License # _____

PLEASE SEND: <input type="radio"/> Shipping Labels <input type="radio"/> Boxes <input type="radio"/> Bio Bags	Prescriptions: <input type="radio"/> Impress <input type="radio"/> Removables	<input type="radio"/> Surgical Guide <input type="radio"/> M.A.G.O.
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For Lab Use Only ___ Impressions ___ Models ___ Other _____	Date Recv'd _____ Pan # _____
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