



7165 E Pleasant Valley Rd, Independence, OH 44131

Local (216) 663-2233 Toll Free (800) 228-6663
Fax (216) 663-2237 Martins Ferry, OH (Branch) (740) 633-9401
www.roedentallab.com Jamestown, NY (Branch) (716) 664-9032

REMOVABLE RESTORATIONS

See reverse side for fixed options.

Please check applicable boxes. ROE standards (\*) will apply if no selection is made.

SHADE

FULL DENTURE

Acrylic Shade
Custom Tray
Processed Bite Rim (acrylic shade req.)

Upper

Pink \*

Lower

Dark Pink

DIGITAL DENTURE

IMPACT™ (Printed) Set-up & Finish (no try-in req., picture req.)
Ideal Arrangement \* Immediate Match Study
Premium Teeth \* Economy Teeth
IMPACT™ Reverse Reset (modification or reprinting)

Ivotion™ (Milled) Set-up for Printed Try-In
Ideal Arrangement \* Match Study
Ivotion™ Reset and Reprint Reset and Finish
Ivotion™ Milled Finish

CONVENTIONAL DENTURE

Wax Set-up
Ideal Arrangement \* Match Study
Premium Teeth \* Economy Teeth
Reset for Try-In Reset for Finish
Conventional Acrylic Finish (wax try-in req.)
Duplicate Dent. from: File CBCT Flask IOS
Immediate Remove Teeth #

REPAIRS & RELINES

Reline
Reline w/Soft Liner
Rebase Denture
Replace Teeth #
Fracture Repair
Laser Weld Clasp Retention

OTHER SERVICES

Custom Tray Solid Perf.
Bleach Tray Opalescent Foam
Duplicate Denture AED Clear
Permanent Soft Liner
Essix® Teeth:

Visit our customer hub
www.roedentallab.com/customerhub

Customer Hub



MOULD

PARTIAL DENTURE

Framework Metal Zirlux® Acetal
Try-In Casting w/BB w/Setup
Handpacked Pontics Teeth #
Alternative Clasp Design Teeth #
Tooth-Colored Pink Laser Wire
Valplast® w/Cast Substructure
Try-In w/Setup Finish
Flipper w/WW Clasps Teeth #

BITE SPLINT

Design Bruxism \* TMJ (anterior guidance)
w/3mm Labial Coverage \*
Return w/Model \* Model-free
CLEARguard™ Hard w/Memory Liner (model req.)
CLEARguard™ Hard
CLEARguard™ Semi-soft
Vacuform Nightguard Soft Dual
miniComfort® Day 4.0 \* Night 6.0

ORTHODONTICS

Fixed Space Maintainer Gelb
Hawley Tanner Essix®
CLEARaline™ Ortho Aligner
For aligner Rx, visit www.roedentallab.com/CLEARalinerx

IMPLANT CASE DESIGN

For full arch Rx, visit www.roedentallab.com/archrx
Implant Line & Platform (required)
Overdenture Conus
Hybrid Hybrid Bar Try-In
TLZ-IB Prettau® Ultra-Nano w/ Trilor® w/ Ti
RAPID iJIG™ Printed Try-In
Locator® Bredent ERA® O-Ring
Other
Implant Surgical Guide Teeth #
Acrylic CBCT Guide Rite

Doctor Name\* Date

Address\*

City\* State\* ZIP\*

Patient Name\* Age Male Female

RETURN BY 5:00 P.M. ON Phone\*

Email\*

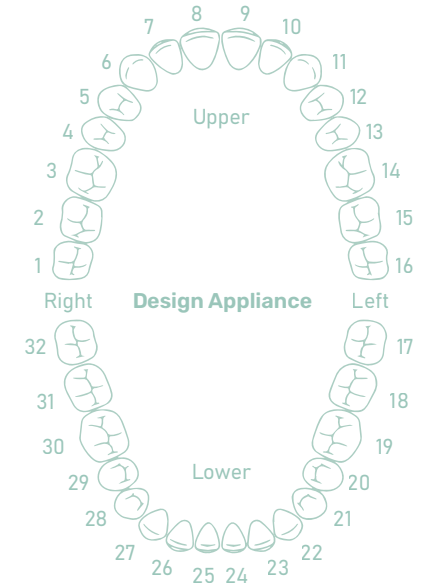
Expedite - same day and expedite requests will be honored, additional fees apply.

CALL ME

DO YOU NEED?

Rx Days in Lab
Boxes Shipping Labels

Instructions



Signature\* License #\*

The person signing this work order accepts responsibility for payment and agrees to pay all collection costs including attorney's fees. A 1.5% (18%/yr.) finance charge will be added to all balances due over 30 days.

For the most up-to-date Rx & forms, please visit www.roedentallab.com/forms