



**ANDERSON DENTAL
LABORATORY, INC.**

2819 Gulf Fwy • La Marque, TX 77568
409-935-1488 Toll Free 1-800-529-9752

• REMOVABLE APPLIANCE Rx •

Dr.'s Name _____ Date Sent _____ Return Date _____

Patient's Name _____ Male Female

Enclosed w/Case Impressions Models Bite Photos Other: _____

Laboratory Use Only

**DENTURES & FLEXIBLE
PARTIALS**

BPS Premium Classic

Functional Esthetic Control Base: _____

High Lip Line ____ Low Lip Line

TCS Flexible

Acrylic Partial WW Claps _____

Custom Tray Occlusion rim

Wax set up try-in Finish

Acrylic Shade: _____

Ethnic- Lt Med Dk

TCS Shade: _____

Ivostar (included at no extra charge)

Shade _____ Mould _____

Premium Brand Teeth (extra charge applies)

Rx

Signature _____ Licence No. _____

**NIGHTGUARD
BITE SPLINTS**

Upper Lower

Talon Thermo

Talon Thermo Dual

Ivocap Heat Cured Hard

Suckdown Soft

Turn-Around Schedule

| Procedure | Days in Lab |
|---|-------------|
| Functional Esthetic Control Base | 6 |
| Occlusion rim or Custom Tray | 3 |
| TCS | 5 |
| Framework Try -In Only | 9 |
| With Set Up | 14 |
| Denture to Completion | 8 |
| Denture Repair | 1 |
| TCS Repair | 5 |
| Metal Repair | |
| <i>(time will vary according to complexity)</i> | |
| Relines | 1 |
| Acrylic Partial- up to 2 teeth | 5 |
| 3 or more teeth | 8 |
| Nightguard | 5 |

Please Note:

Turn around times

DO NOT include

Fridays, Pickup-Delivery

Mailing Days or Weekends

FRAMEWORK

Wironium TCS Combo

Frame try-in Rebase

Frame with occlusion rim Reline

Frame try-in with teeth Wrought

Finish Wire Clasp

DESIGN PARTIAL

Lab Design

