



# I & Y Dental Studio Online Rx Form

<b>DDS. Name *</b>	<input type="text" value="First"/>	<input type="text" value="Last"/>
<b>Address</b>	<input type="text" value="Street Address"/>	
	<input type="text" value="Street Address Line 2"/>	
	<input type="text" value="City"/>	<input type="text" value="Postal / Zip Code"/>
	<input type="text" value="United States"/>	
<b>Phone *</b>	<input type="text" value="###"/>	<input type="text" value="###"/>
	<input type="text" value="#####"/>	
<b>Your Email *</b>	<input type="text"/>	
<b>Patient's Name *</b>	<input type="text" value="First"/>	<input type="text" value="Last"/>
<b>Sex</b>	<input type="radio"/> Male	<input type="radio"/> Female
<b>Patient Age</b>	<input type="text"/>	
<b>Return Date *</b>	<input type="text" value="MM/DD/YYYY"/>	
<b>Shade *</b>	<input type="text"/>	
<b>Stump Shade</b>	<input type="text"/>	
<b>Additional Shade Instructions</b>	<input type="text"/>	
<b>Non-Metal Restoration</b>	<input type="radio"/> Composite	<input type="radio"/> E-Max
	<input type="radio"/> Zirconia/Build-up	<input type="radio"/> PMMA
		<input type="radio"/> Zirconia
<b>Porcelain Surface</b>	<input type="radio"/> Smooth	<input type="radio"/> Moderate
		<input type="radio"/> Heavy

**Alloy**

High Noble

Noble

Non-Precious

**Included with case**

Study Models

Opposing Model

Stick Bite

Photos

Model of Temps

Articulator

Bites

Shade Tab

**Implant Abutment Material**

Titanium

Nitride Titanium (Gold)

Zirconia

**Instructions**

**Electronic signature \***

**Promo Code**

**License # \***

**Date \***

04/17/2024

**SUBMIT FORM**