MWDS
Steve Webster, CD (TX Lic. # 1269)
Doctor's Name

Ortho

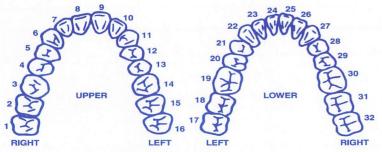
Webster Dental Service, Inc. 126 S. Parking Place, Lake Jackson, TX 77566 Tel: 979-297-4761 E-mail: websterdent@gmail.com

(Please Print)

Rx Date :	
Date Due in Office :	
(Deliver By 5PA	1)
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Sex F Age	-0
ease (1)	

Tooth Make

Doctor's Address		
Patient's Name		$\frac{\boxed{ M \boxed{ F}}}{\text{Sex}} \frac{\text{Age}}{}$
REMOVA	BLE RESTORATIONS (Please☑)
Dentures	Metal Partials	Specialty Partials
Custom Tray Base Plate/Wax Rim Economy Denture Premium Denture Immediate Denture	Cast Partial Frame Try-In Wax Try-In with Teeth Bite Block Finish	 Acrylic Partial Flipper Acrylic Partial w/ Clasp Unilateral (NESBIT) DuraFlex™ Metal / Acrylic
☐ Denture Set-Up	Flexible Partials	
☐ Denture Finish	☐ DuraFlex [™]	Shade
Repairs / Relines Relines Hard	Set-Up Finish	Acrylic Flexible Lucitone Pink Deluxe Mehar
Repairs Tooth Fractures	Specialty Products Hard Clear Nightguard	☐ Economy ☐ Dark
Clasp	☐ Bleaching Tray ☐ Hard / Soft Night Guard	Tooth Shade
Ortho	Vacuum Nightquard	



1 RIGHT	LEFT LEFT	RIGHT 32
Doctor's Signature		Lic.#

R SPECIFIC INSTRUCTIONS:	
DR. NOTES	
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LAB NOTES	