

LAB USE ONLY

# ODS Inc., Dental Studio

TX License# 3741

10725 Plano Rd. Suite 200 • Dallas, TX 75238

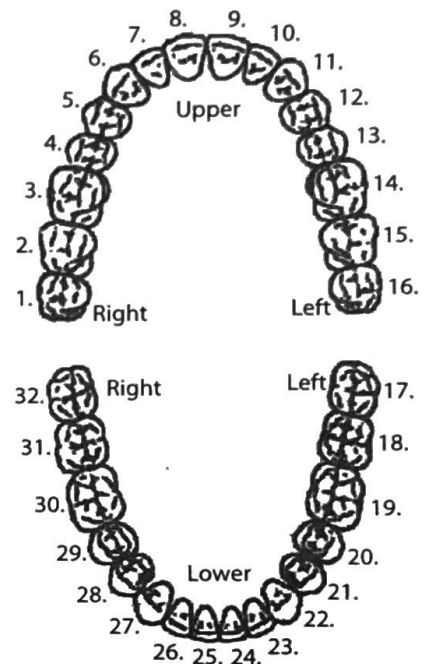
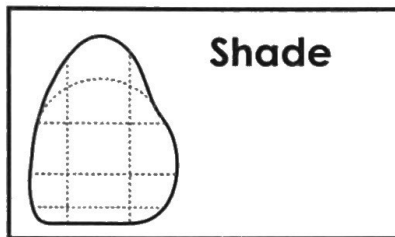
Tel : (972) 677-3065 • Fax : (940) 217-2757

E-mail : odsdentallab@gmail.com

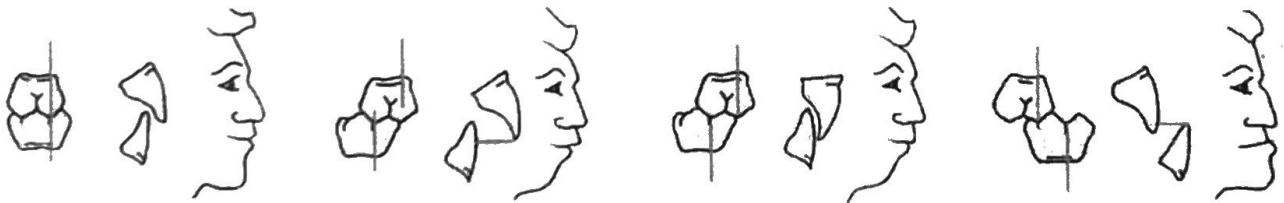
DOCTOR	PATIENT	<input type="checkbox"/> Male <input type="checkbox"/> Female
ADDRESS / PHONE	Rx Date	DUE DATE

\* Please send pictures to ODSdentallab@gmail.com

- Immediate Denture
- Occlusal Rim or Custom Tray
- Jig & Custom Tray
- Set-up for Wax Try-in
- Titanium Bar
- Cast Partial or Cast Mesh Work
- Valplast Partial
- Reset
- Process & Finish
- Occlusal Guard
- Repair / Reline



• **Bite Type** (please circle)



## INSTRUCTIONS

DOCTOR'S SIGNATURE \_\_\_\_\_ LICENSE # \_\_\_\_\_