

HANDLER

Laboratory Profile Sheet | (908) 233-7796

Contact Name:	Title:
Laboratory:	Telephone:
Address:	Fax:
City/State/Zip:	Country:

Tell Us About Staff

Number of technicians employed	
Number of technicians for which the lab should be equipped	
Is there a separate office area for shipping?	
Number of current office workers	
Number of office workers for which the lab should be planned	
Please note any additional office requirements (computers, shade room, Conference area, private offices, etc.)	

In the function column put the letter 'Y' if a procedure is performed in your lab. In the number column put the correct count of technicians for each department.

Function (Y/N)	Number Present/Future	Function (Y/N)	Number Present/Future
Shipping & Receiving Dept		Partial Denture Dept	
Infection Control		Model	
Crown & Bridge Dept		Waxing	
Plaster		Investing	
Waxing		Casting	
Investing		Finishing	
Casting		Polishing	
Finishing		Set-up	
Polishing		Other	
Porcelain		Attachment & Implant Dept	
Other		Surveying	
Orthodontic Dept		Waxing	
Plaster		Other	
Set-up		Denture Dept	
Acrylic		Plaster	
Finishing		Waxing & Set-up	
Other		Boilout & Curing Area	
Technology Dept		Acrylic Packing	
CAD/CAM/Design		Finishing	
Milling		Other	
3D Printing			