

Crown Selection Guide

BENEFITS	PFZ Zirconia Ceramic Layered	FCZ Esthetic Zirconia Full Contour (high- translucency)	FCZ Zirconia Contour	Ceramic Layered ("e.max")	Ceramic Full Contour ("e.max")	PFM (Noble, High Noble, Base NP)	Full Metal Crown (58% or 2% gold)
DESCRIPTION	Porcelain Fused to Zirconia coping	High-Translucent monolithic bruxer	Standard monolithic bruxer	Porcelain Fused to e.max	Monolithic e.max stained	Porcelain Fused to Metal	Solid milled gold
ZIRCONIA WE USE	Preshaded multi-colored zirconia	Preshaded multi-colored zirconia	Preshaded multi-colored zirconia	Lithium disilicate	Lithium disilicate	SLM metal coping	Milled gold
STRENGTH Mpa	1000/90	1000	1000	450	450	2000/90	Very Hard
UNITS	Up to 12	Up to 3	Up to 12	1 unit	1 unit	12	3
DURABILITY	Durable	Highly Durable	Extremely Durable	Durable	Highly Durable	Durable	Most Durable
OCCUSAL REDUCTION	1.5-.7mm	0.7	0.7	1.2 anterior 1.5 posterior	1.2 anterior 1.5 posterior	1.5mm	0.5mm
FREE FROM METAL	Metal Free	Metal Free	Metal Free	Metal Free	Metal Free	Metal	Metal
TRENSLUCENCY	<i>Natural</i> Translucent	Translucent	High Value (limited translucency)	<i>Natural</i> Translucent	Translucent	Translucent	N/A
SHADE MATCHING	Life Like	Good	Good (gold substitute)	Life Like	Good	Good	N/A
ESTHETIC LEVEL	Life Like	Good	Good	Life Like	Good	Good	N/A
What we recommend <small>(This reference guide is for general purposes. Clinical observation and evaluation necessary. Please call and speak to a technical supervisor or lab manager to know more.)</small>	Always use on anterior 6-11. Bicuspid when patient show in esthetic zone. PDL default option in anterior region.	Utilized primarily on lower anterior for strength and increased esthetics when layering not possible. Ghreat option over generic Bruxer.	This is a metal free option utilized instead of full contour metal crown. Shades have high value. Shades not guaranteed in anterior region.	Utilized primarily on anterior 6-11. Not indicated for 2nd molar and bridges. Requires shoulder prep	Utilized primarily on bicuspid and back to the 1st molar. Not indicated for 2nd molars and bridges. Requires shoulder prep	Not utilized very often by PDL clinicians. Less than 1.0% of customers use this. Additional alloy charges apply.	Most durable. Least esthetic.