



PRECISION *Elite*

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To download your free shipping label and send your case, visit our website at www.precision-dental-arts.com. Click on Resources.

Date _____ Due Date _____

Doctor _____ Telephone Number _____

Address _____

Name of Patient _____ Gender _____ Age _____

Items Included with Case

- Master Impression
- Opposing impression or model
- Stick bite
- Bite registration
- Diagnostic wax-up
- Model or impression of provisionals
- Pre-operative models
- Photos _____
- Face bow transfer jig
- Other _____

<input type="radio"/>															
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17
<input type="radio"/>															

Goal of Final Case

Type of Restoration Desired

- Emax Lithium Disilicate -teeth #s _____
- Layered Zirconia-teeth #s _____
- Implant Custom Abutment- teeth #s _____
- Milled PMMA - teeth #'s _____
- PFG-teeth #s _____
- Full Contour Zirconia- teeth #s _____
- Implant Prosthesis
 - Fixed Zirconia Zurick Bridge
 - Fixed Titanium and Acrylic Hybrid
 - Removable with Titanium Bar and Overdenture
- Implant Type and Size _____

Diagnostic Wax Up

- Diagnostic wax up: teeth #s: _____
- Milled PMMA temp overlaying existing teeth
- Silicone matrix to make provisionals in mouth

Vertical Dimension

Open Bite Vertical measurement _____ mm CEJ tooth # _____ to CEJ tooth # _____

Length

Centrals (tooth # _____) _____ mm Laterals (tooth # _____) _____ mm less than centrals Canine (tooth # _____) _____

Any special length instructions _____ mm

Shape

- Match Diagnostic Wax up _____
 Match Provisionals _____
 Match Contralateral _____

- Smile guide design # _____
 Smile catalog design # _____
 Other _____

Shade of Preparation

Stump shade teeth #s _____ ST _____
Stump shade teeth #s _____ ST _____

Stump shade teeth #s _____ ST _____
Stump shade teeth #s _____ ST _____

Shade

Body Shade _____ Gingival shade _____ Incisal shade _____ Occlusal staining _____

Incisal Translucency

- Minimal (0.5mm) Moderate (1.0mm) Maximum (1.5mm)

Surface Texture

- High Medium Light Smooth (no surface texture)

Miscellaneous Information _____

Doctor's Signature _____

License # _____