



Three Appointment Denture.

PATIENT INFORMATION FORM

DOCTOR _____ PATIENT _____

- A. For immediate dentures observe patient's natural teeth and prescribe preferences at each section.
- B. For edentulous patients observe the patient's present denture and prescribe preferences at each section.

- Shade _____
- Anterior teeth type of _____
- Ant. tooth size, Same _____
 Longer _____ MM Shorter _____ MM
 Wider _____ MM Narrower _____ MM
 Mold _____
- Posterior teeth type of _____
- Occlusal plane FLAT _____
 NATURAL BUCCALIZED LINEAR
- Vertical, Same _____
 Needs opened _____ MM
 Needs closed _____ MM
- Midline, Same _____
 Move to patient's right _____ MM
 Move to patient's left _____ MM
- Incisal edge, Same _____
 Shorten _____ MM
 Lengthen _____ MM
- Ant. tooth position, Same _____
 Anteriorly _____ MM
 Posteriorly _____ MM

- Immediate denture bone trim. NONE _____
 LT ___ MED ___ HVY ___
- Upper anterior tooth arrangement, use one of the four options below.
 - Natural teeth (Immd) or present denture Same _____
 - From the book, arrangement # _____
 - | | |
|----------|--------|
| BASIC | SOFT |
| | |
| VIGOROUS | SPACED |
| | |
 - Draw your teeth arrangement looking down on the incisal edge.

Profile Scale Measurement

Nose _____
 Lip _____
 Total Facial Measurement _____
 Present Denture Facial Measurement _____
 Difference _____



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