

Digital Denture Prescription

Doctor: _____

License #: _____

Phone: _____

Patient Name: _____

Male Female Age _____

Case Number

TIME SCHEDULE

Set-up 6 Days
 Finish 6 Days
 Straight To Finish 8 Days

Try-In Denture

- Monolithic White (Milled)
- Monolithic White (Printed)

Final Denture

- Milled (Milled Teeth)
- Milled (Ivotion)
- Printed (Temporary)

Copy Denture

- Teeth and Base
- Monolithic Tooth Shade
- Clear

ADDITIONAL SERVICES

- 3D Bite Plate
(functional impression trays with bite rims)
- Gnathometer (Gothic tracer)

Denture Tooth Selection

SELECT TEETH

- Phonares® II
- BlueLine®
- Vivodent® S DCL
- Follow Study Model

SELECT OCCLUSION

- Lingualized
- Semi-anatomic

Milled Denture Teeth

Mould Selection

Anterior Upper: _____

Shade Selection

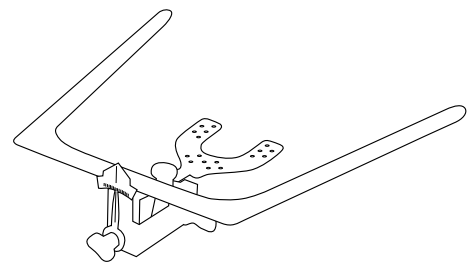
(Vivodent® CAD)
 BL3 A1 A2 A3 A3.5 B1 B3 C2 D2

Denture Base (Milled Only)

IvoBase® CAD Shade (choose one)

- Preference (lab standard)
- Pink-V
- US-D

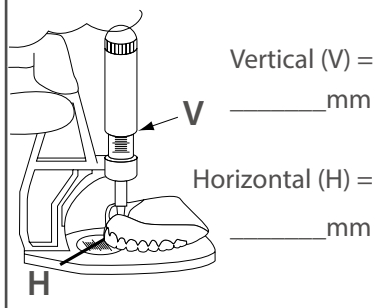
UTS CAD



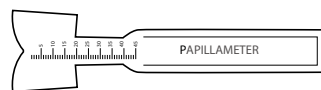
(BP) Bipupillary Line _____ + or -

(CE) Camper's Plane _____ + or -

Denture Gauge



Papillameter



Low Lip Line _____ mm

High Lip Line _____ mm

Instructions: _____
