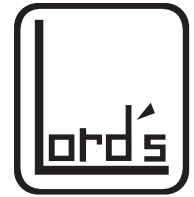


ESTHETIC COMMUNICATION WORKSHEET

DENTIST: _____

DATE: _____

PATIENT INFORMATION: NAME _____

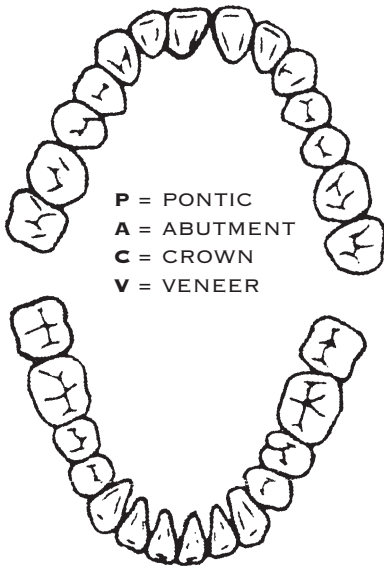


Lord's Dental Studio, Inc.

MALE FEMALE

AGE _____

TEETH TO BE RESTORED

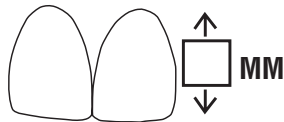


RESTORATION TYPE

- METAL-CERAMIC ALL-CERAMIC
 PORCELAIN SHOULDER STUMP SHADE (REQUIRED) _____
 DISCOLORED STUMP

CENTRALS

DESIRED LENGTH



- PRE-OP INCISAL EDGE FOLLOWS LOWER LIP LINE
 DEFICIENCY (DESCRIBE)
- _____
- _____

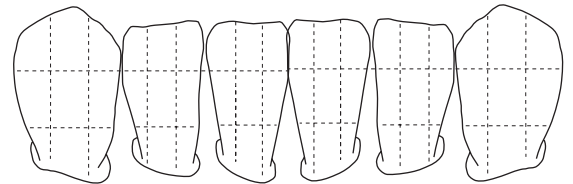
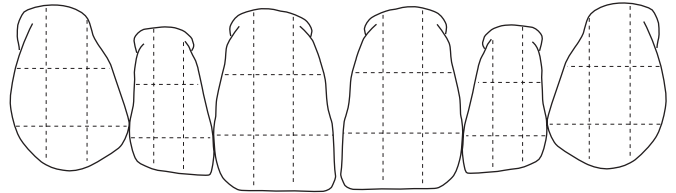
A I WOULD LIKE TO USE LORD'S DIAGNOSTIC WAX-UP SERVICE

PRE-OP MODELS ARE ENCLOSED

B PROCEED WITH CASE

PRE-OP MODELS ARE ENCLOSED

SHADE AND TRANSLUCENCY



USE LEGEND TO MAP TRANSLUCENCY
 C = CLEAR, B = BLUE (SMOKE), W = WHITISH (BONY ENAMEL)
 A = AMBER, G = GREY, H = HALO

GOALS

- MAKE SMILE MORE YOUTHFUL
- MAKE SMILE MORE FEMININE
- CLOSE DIASTEMA
- RESTORE ANTERIOR GUIDANCE
- OPEN VDO _____ MM
- WIDEN BUCCAL CORRIDOR
- IMPROVE TISSUE SYMMETRY
- LENGTHEN TEETH
- LIGHTEN SHADE
- OTHER (USE REVERSE SIDE)

INTERPROXIMAL STAINING

- SUBTLE
 NOTICEABLE

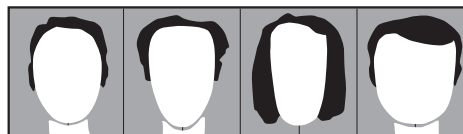
TEXTURE

- COPY TEXTURE OF TEETH ON PRE-OP MODEL
- YOUTHFUL (DEVELOPMENTAL GROOVES, PERIKYMATA, STIPPLING)
- MIDDLE-AGE (UNDULATING CONTOURS, POLISHED CONVEXITIES)
- ELDERLY (NO TEXTURE, POLISHED FLAT, SMOOTH)

INVENTORY

- MASTER IMPRESSIONS
- PRE-OP MODELS
- PRE-OP PHOTOS (FACE, SMILE, PROFILE)
- BITE REGISTRATIONS
- CROSSMOUNT BITE REGISTRATIONS
- FACEBOW TRANSFER JIG
- STICK BITE (INTERPUPILLARY)
- IMPRESSIONS OF APPROVED PROVISIONALS
- FABRICATE INCISAL GUIDE TABLE
- OTHER _____

SHAPE



- ovoid tapering rectangular square

- FOLLOW PRE-OP MODEL
- USE A SMILE LIBRARY ARRANGEMENT/FORM (PLEASE ATTACH COPY)

THIS WORKSHEET ALONG WITH PHOTOGRAPHY WILL RESULT IN THE BEST POSSIBLE OUTCOME.

