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PERTH MILLING CENTRE

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TODAY'S DATE: _____

DENTIST: _____ PRACTICE: _____

PATIENT: _____ AGE: _____ GENDER: _____

DATE REQUIRED: _____ TIME: _____

CASE DETAILS:

TOOTH/TEETH INVOLVED:

18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38

MATERIAL: E.MAX ZIRCONIA OTHER _____

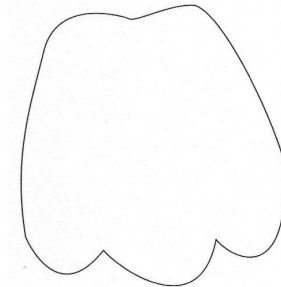
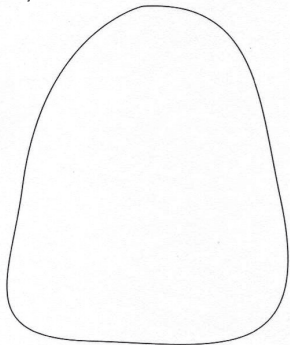
COMPOSITION: FULL CONTOUR LAYERED

ADDITIONAL INFORMATION: _____

CASE SPECIAL DETAILS:

- EMBRASURES (OPEN/CLOSED): _____ ● PONTIC TISSUE DESIGN: _____
- OCCLUSAL STAINS (INTENSITY): _____

TOOTH SHADE: _____ STUMP SHADE: _____
 (Vita 2D/Vita 3D)



CLINICIAN'S SIGNATURE: _____