

Case ID:	Clinic:	
For official use only	Doctor:	
	Patient NRIC/Age:	
Referrer (if any):	Tutter time/ Age.	

Denture/Mouthguard/Bleaching Tray:	Denture Base Material
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Denture
Denture Repair
Bleaching Tray
Orthodontics Retainer (Essix / Hawley)
Mouthguard (Hard / Soft / Dual Layer)

Others:

Acrylic Upper / Lower
Cobalt-Chrome (Co-Cr) Upper / Lower
Flexible Upper / Lower
High Impact Acrylic Upper / Lower
Wire Mesh/Strengthener (optional) Upper / Lower

	Tooth Shade:		
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	B	Se de la constant de	
	Ð	(
R	(T)	(7))
	(F)		

	Upper	Lower	Date Sent	Date Due	Working Days (excl Weekend & Pub Hol)
Special Tray					4
Bite Block (Acrylic/Wax)					4
Try-in					5 (Chrome 8)
Re Try-in					5
Issue					6

Crown & Bridge: Crown & Bridge (Materials):

Veneer
Inlay / Onlay
Crown
Bridge
Post Core
Maryland Bridge

Implant Restoration:

□ PFM□ Zirconia□ E-max□ Composite

□ Non-precious□ Semi-precious (2% Gold)

Implant System: _____

Pontic Design:

Tooth Shade:

R	8	R	0

□ Screw Retain 1 piece
□ Screw Retain separated
□ Cemented
□ Transfer Jig
□ Cad/Cam Ti Abutment
□ Cad/Cam Zr Abutment

Photos sent via WhatsApp/MMS/Email

\sim	lingual metal margi
	3/4 occlusal metal
	occlusal metal

no metal margin

Special Instructions:

Contact me if any queries (Dentist Contact: * (only required for first timers)

. Body

Gingival

Incisal

Date	Dentist's Notes	Technician's Feedback