



DDS: _____ Patient: _____ Surgeon _____

Surgery date: _____

AOX records needed for Stage 0:

- 1. Radiographs
- 2. Photos: (all with teeth closed & eyes open looking at the camera)



normal smile



super big smile



retracted smile

- 3. VDO

- 4. IO scans: (at the new VDO if we are opening the bite)

Upper

lower

bite



- 5. Type of Prosthetic Planned:

FP1



FP2



FP3



- 6. Alignment Strategy:

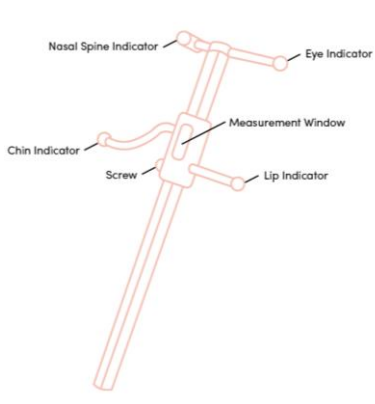
Bone screw

Teeth

Denture

Implant

- 7. Lab Slip



VDO Gauge

