

TO DENTAL LAB CASE SUBMISSION CHECKLIST	
Use this form to ensure all steps are completed before sending a case to the lab.	
✓ Case Details	
☐ Treatment plan is finalized	
☐ Type of restoration identified (e.g., crown, bridge, denture, implant)	
☐ Correct tooth number(s) noted	
✓ Tooth Preparation	
☐ Adequate reduction for chosen material	
☐ Smooth, clear margins	
☐ Proper taper and path of insertion	
✓ Impressions or Digital Scans	
☐ <b>Traditional:</b> High-quality impression with no voids or distortions	
□ <b>Digital:</b> Complete scan of prepped tooth, opposing arch, and bite	
☐ Verified scan/impression captures all necessary detail	
✓ Bite Registration	
☐ Accurate bite taken in centric relation	
☐ Bite record labeled and disinfected	

✓ Shade Selection	
□ Shade selected using guide under natural light	
□ Stump shade recorded (if needed)	
$\square$ Special characterizations noted (if applicable)	
□ Optional: Shade photo taken and included	
✓ Lab Prescription Form	
□ All fields completed, including:	
$\square$ Restoration type and material	
☐ Tooth numbers	
☐ Margin design	
□ Occlusal scheme	
□ Requested return date	
□ Special instructions	
☑ Disinfection & Packaging	
□ All items disinfected per protocol	
□ Impressions/models/bite securely packaged	
$\square$ All items clearly labeled	
□ Lab slip and photos included in box or uploaded	
✓ Communication	
□ Complex case discussed with lab (if needed)	
□ Photos, diagrams, or notes included for clarity	
✓ Case Scheduling	
□ Lab turnaround confirmed	
$\square$ Delivery date aligns with patient's next appointment	