Nu Gen Smile
607 S Euclid St, Fullerton CA 92832
657-378-9045 info@nugensmile.com

OFFICE NAME:_____ **PHONE ( )**_____
DR.NAME:_____
PATIENT NAME:_____
GENDER:_____ **AGE:**_____

PATIENT APPOINTMENT
Date / **Time** (:)

Prep. Date / /
Due. Date / /

Case contains: ☐ Impression ☐ Model ☐ Bite ☐ Photos ☐ Other:_____

PRODUCT

CROWN / BRIDGE
VENEER / INLAY / ONLAY
- ☐ Aesthetic Layered Zirconia
- ☐ ML Full Zirconia Crown
- ☐ IPS E.Max CAD/CAM
- ☐ PMMA Temporary

ABUTMENT
- ☐ Custom Titanium
- ☐ Custom Zirconia Hybrid
- ☐ Screw-Retained Crown on Ti-base

IMPLANT CROWN
- ☐ Screw-Retained
- ☐ Cement-Retained

OPTION (CR)
- ☐ Screw Access Hole
- ☐ Pink Porcelain

OPTION (AB)
- ☐ Gold Hue
- ☐ Angled Screw Channel (Up to 30 °)

3D PRINT
- ☐ Diagnostic Wax-Up
- ☐ Implant Positioning Guide
- ☐ Surgical Guide
- ☐ Verification Jig

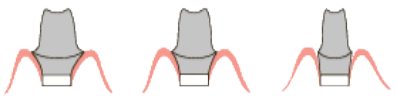
ALL ON X
- ☐ Zirconia Prosthetic Full Arch
- ☐ PMMA Temp Prosthetic Full Arch
- ☐ Titanium Bar Zirconia Prosthetic Full Arch
- ☐ Titanium Bar

IF INSUFFICENT CLEARANCE
- ☐ Technician Recommendation
- ☐ Adjust Opposing
- ☐ Reduction Coping
- ☐ Zirconia Occlusal / Lingual

Custom Abutment Margin Settings
Buccal / Facial: _____
Distal: _____
Mesial: _____
Lingual: _____

Contour and Occlusion Design
Embrasures: ☐ Closed ☐ Open
Occlusion: ☐ Light ☐ Out ☐ Open ___mm ☐ Ideal
Contacts: ☐ Broad & Tight ☐ Medium ☐ Light

Emergence with Option(Select One)



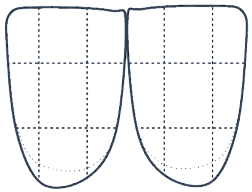
Surgical Placement ☐ | Tissue Displacement ☐ | No Tissue Displacement ☐

Pontic Design



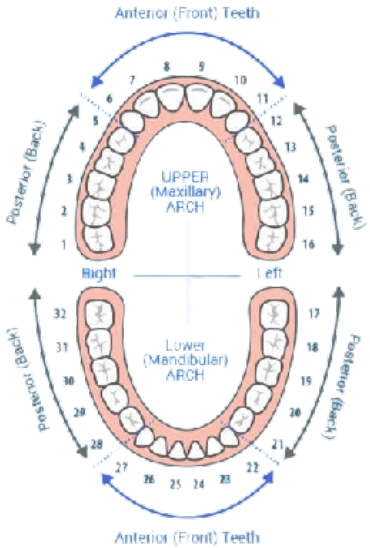
☐ ☐ ☐ ☐ ☐

TOOTH INFORMATION



Incisal Shade:_____ Stump Shade:_____
Body Shade:_____
Gingival Shade:_____
☐ Single
☐ Splint

INSTRUCTIONS



Special Instructions
Design approval needed? ☐ Yes ☐ No

Drs. Signature:_____ **License#:**_____