

TECHDENT

DENTAL LABORATORY

PROSTHETICS

With passion for excellence



British Dental Technology
Clinically Compliant | Professionally Produced



Promoting British
Dental Technology

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GDC No. 146739

MHRA No. CA011498 (Medicines & Healthcare Regulation Agency)

PRESCRIBING DENTIST AND PRACTICE

[Empty box for Prescribing Dentist and Practice details]

PATIENT

[Empty box for Patient details]

MALE FEMALE AGE SHADE

TYPE OF CASE 8-10 DAYS REQUIRED

HIGH IMPACT ACRYLIC DENTURE STANDARD ACRYLIC DENTURE

VALPLAST FLEXIBLE PARTIAL

14 DAYS REQUIRED FOR METAL TRY-IN STAGE

VITALLIUM COBALT CHROME PARTIAL

APPOINTMENT DATES

IMP. DATE AM/PM

SPECIAL TRAY & BITE DATE AM/PM

TRY IN DATE AM/PM

RE-TRY DATE AM/PM

FINISH DATE AM/PM

TEETH TO BE REPLACED

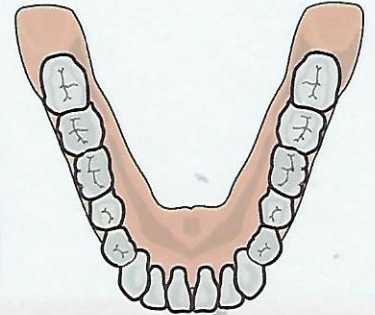
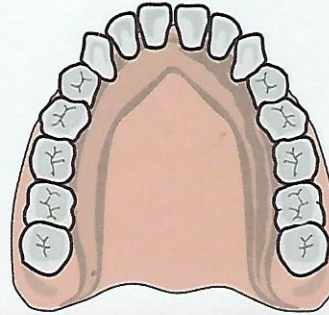
RESTS REQUIRED

METAL CLASPS

FLEXIBLE CLASPS

TOOTH COLOURED FLEXIBLE CLASPS CLEAR FLEXIBLE CLASPS

IF NO CLASPS REQUIRED, WRITE NONE



BASIC TOOTH SHAPE



STIPPLING

YES NO

SET UP

REGULAR IRREGULAR

CERVICAL STAINING

YES NO

SPACING

S M L NONE

CASE INSTRUCTIONS

IMAGES TO BE EMAILED TO TECHDENT.IMAGES@GMAIL.COM

DIGITAL SCANS TO BE EMAILED TO TECHDENTDIGITALSCANS@GMAIL.COM

[Large empty box for Case Instructions]