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SMILE MAKEOVER

	Notes:
~	·
Dentist:	
Address:	·
	·
Telephone:	
Patient:	
Shade	·
Light Source Used to Take Shade	
□ Trushade Shade Wand □ Natural light □ Surgery light	
Stump Shades:	
Shape as per:	
□ Diagnostic Wax-Up □ Match Images Enclosed	
Patient Approved Provisionals Smile Guide Design	
Length: Centrals mm Lateralsmm	
Canines mm Bicuspidsmm	
Copy general length of incisal index of:	
☐ Mock-up ☐ Diagnostic Wax-Up ☐ Provisionals	
Incisal Translucency	
☐ Minimal (0.5mm) ☐ Moderate (1.0mm) ☐ Maximum (1.5mm)	
Shade of Translucency	
Clear Clear Smoke Frosted Amber	
<u>v</u> ?	
☐ High ☐ Medium ☐ Light ☐ Smooth (No surface texture)	
Surface Finish	
☐ High Glaze ☐ Polished Gloss ☐ Satin Finish ☐ Low Gloss	
Degree of Opacity	
□ 25% □ 50% □ 75% □ 100%	