

Patient: _____

Date of exam: _____

Maxillary incisal edge position at rest

Central display at rest: _____ mm
(average male: 0-2 mm, average female 2-4 mm)

Mandibular incisal edge position at rest

Central display at rest: _____ mm

Maxillary incisal inclination

- Normal
- Proclined (Facially tipped)
- Reclined (Palatally tipped)

Mandibular incisal inclination

- Normal
- Proclined (Facially tipped)
- Reclined (Palatally tipped)

Maxillary incisor display while smiling Not applicable/unable to assess.

- High (>100% incisal display) (~10% of population, twice as common in females).
- Moderate (75-100% incisal display) (~70% of population)
- Low (<75% incisal display) (~20% of patients).

Gingival display

- None
- Excessive
- Normal

Tooth shape

- Too short
- Too tall
- Normal

Wear pattern

- Broad & flat
- Vertical

Occlusal plane

- Level
- Stepped

Wear nature

- Mechanical
- Habit based
- Trauma Hx
- Chemical

Vertical dimension of occlusion

- Maintained *without* compensation
- Maintained *with* compensation
- Altered

Function/parafunction/force concern

- High (low FMA, deep bite, recognized parafunction, wear facets)
- Average (FMA is WNL, no known parafunction)
- Low (High FMA, opposing denture, no known parafunction, history of long-standing long-span FDPs)

Support

(Nasolabial angle should be between 85-105°)

- Facial support necessary or likely necessary
- Lip support necessary or likely necessary
- No additional support necessary

Clinical records checklist

- Clinical images (6 images)
- Intraoral scan
- Facebow transfer
- Pantomograph

Determinations

- Appliance therapy necessary to assess tolerance of VDO change.
- Surgical consultation necessary to further prosthetic discussion.
- Mounted study models necessary to finalize treatment plan.