

Anterior Restoration Requirements

We want patients to look good because that makes you look good!
Together we can make that happen.

Please send the following information with your case request:



1. UPPER & LOWER SCANS AND/OR UPPER AND LOWER IMPRESSIONS

- Send scans through Sirona Connect or upload them to LabStar

2. BITE REGISTRATION

3. INCISAL TRANSLUCENCY PREFERENCE

4. PHOTOS (upload to LabStar with the case entry)

- Patient is seated with their feet flat on the ground at a 90 degree angle or standing
- Camera at eye level

Full face "passport" pictures (shoulders, top of head, and both ears showing equally)

» **IMAGE 1:** Relaxed Smile

» **IMAGE 2:** High Smile

Close up including EYES pictures

» **IMAGE 3:** Relaxed Smile

» **IMAGE 4:** High Smile

» **IMAGE 5:** Retracted Full Closed Bite

» **IMAGE 6:** Shade guide photo (pic with the chosen shade guide next to teeth)



SMILE

5. CREATE A LAB SLIP in LabStar* by logging in at 3DLabsMT.LabStar.com and filling out the simple lab slip form.

Please include the following:

- Lab name
- Patient name
- Doctor name
- Restoration details
- Shade** (tooth shade and stump shade)
- Special instructions
- Due date

» *If you do not have a LabStar account, please call 3D Labs @ 406-281-8993 to create a free account today.*

** *VITA shade guides are standard for our lab. If your office uses a different shade system, please contact us and we will accommodate.*