

# DEN 493

## CASE CLASSIFICATION

Patient Name:

Sample

File No:

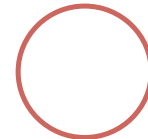
Student Name:

University ID No.:

				PROSTHODONTICS		
SURGERY	PERIO	RESTO	ENDO	FIXED	REMOVABLE	IMPLANT
3	✓	8	0	0	0	0

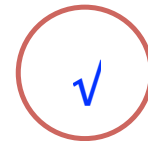
**LEGEND:**

**S** (3D, 5-10 teeth needing surgery, perio, resto)

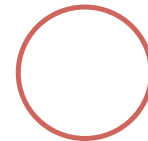


**S+** { (3D, 11-20 teeth needing surgery, perio, endo, or resto)  
(2D + 1 or 2 units of fixed restoration)

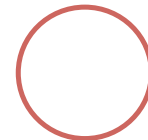
Supervisor  
Signature



**M** { (3D, >20 teeth needing surgery, perio, endo, or resto)  
(2D + removable prosthesis)  
(2D + 3 or 4 units of fixed restoration)



**M+** { (2D + 5 or 6 units of fixed restoration)  
(1D + removable prosthesis + 1-3 units of fixed restoration)



**M++** { (2D + removable prosthesis + 4 or more units of fixed restoration)  
(3D + 7 to 10 units of fixed restoration)

