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## University of Al-Ameed / College of Dentistry / Department of Prosthodontics Acrylic Removable Partial Denture Case Sheet 2025-2026

Student's name:		Signal	ture:		
Group:				رقم الوصل:	
Patient's name:		Age: Gene	ler:		
Occupation:		Address:			
		Phone No.:			
☐Heart disease	□Arthritis □Bleeding disorders □COVID_19	☐ Jaundice & liver dis. ☐ Tuberculosis ☐ Other (Specify): ☐ Under medication:	□Anemia □Asthma	□Epilepsy □ <b>Diabetes</b>	
Dental history Chief complaint (patient's Date of last visit to dentist Reason for the loss of teet	; / / Rea		□Other:	and the second and the second and the second	
Previous removable dentus Experience with previous Evaluation of present dent	denture (patient's own w	vords):	,		
Extraoral: Frontal facial appearance: Facial profile: TMJ (mouth opening): Masticatory muscles tone:	☐Straight ☐Limitation	☐ Tapered ☐ Concave ☐ Deviation ☐ Tense	□Ovoid □Convex □Clicking		
Lip form: Lip thickness: Lip curvature:	□Long □Thick □Curved upward	☐ Short ☐ Thin ☐ Curved downward	□Average □Average		
Intraoral: Oral Hygiene: Anterio-posterior ridge rel Kennedy's classification:		□Fair □class H	□Bad □class III		
Maxillary:		Mandibular:	***************************************		******
Removable Partial Denta	8 9 10	1 32 (5) 12 13 31 (6)			L 17 18

26 25 24 23



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Salt Tribe	P. I
Hon Market	

Student's name:	Signature:	
Patient's name:		رقم الوصل:
		ريام اسي—الياء

Diagnosis and treatment plan:	Supervisor's name	Supervisor's signature	Date of issue

Ste	ер	Supervisor's name	Supervisor's signature	Date	Infection control A: good B: adequate C: bad
Primary impression	Upper				
	Lower				
Primary car (La					
Final impression	Upper				
	Lower				
Final cast por	uring (Lab)				
Surveying, b Design on the	lockout, & cast (Lab)				
Jaw relation 1	registration				
Teeth arrange	ment (Lab)	,			
Try-	in				
Wire bending (Lat					
Ready for flas	king (Lab)				
Denture in	sertion				
Post insertic	on recall				