

Crown Preparation Guide

Minimum reduction, margin design, and geometry standards by restoration type — so the case you send in fits, seats, and shades the way it's supposed to on the first try.

- FOR REFERRING PRACTICES
- CROWNS · ONLAYS · INLAYS · VENEERS
- PRINT & KEEP CHAIRSIDE

General Principles applies across every restoration type

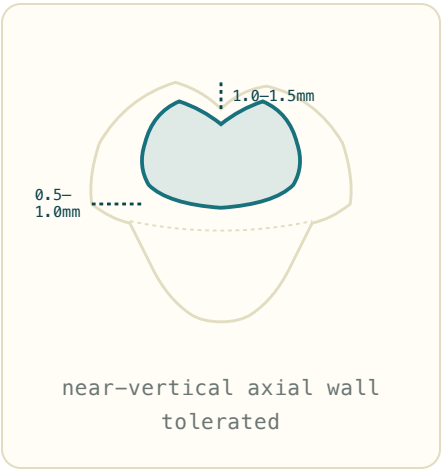
Every restoration type below still depends on the same handful of fundamentals. Get these right and most fit/seat issues disappear before a single case is designed.

01 Round every internal line angle Sharp axio-occlusal and axio-pulpal angles concentrate stress in the restoration and are the single most common cause of ceramic fracture at delivery.	02 One continuous, legible margin The finish line should be a single unbroken curve the scanner or optical system can read cleanly — no ledges, no double margins, no burnished-over areas.
03 Zero undercuts Check axial walls from the intended path of draw before finishing. A single undercut anywhere on the prep will hold up the whole case for a die trim or remake.	04 Reduce to the type and the material "Enough room" depends on both what you're preparing and what it'll be milled from — a monolithic zirconia onlay and a layered PFM crown need meaningfully different clearance. See each section below.

Full-Coverage Crown

anterior & posterior, minimum clearance

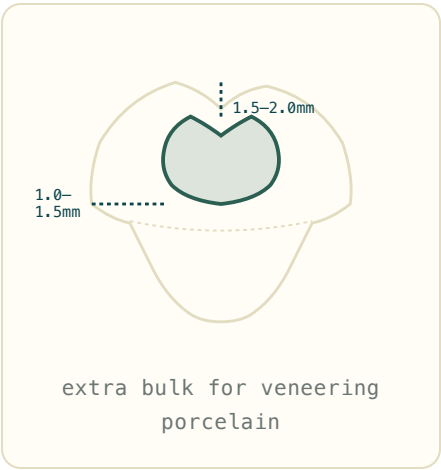
Figures below are minimums for a single unit under normal occlusal load — increase reduction for bruxers, long-span bridges, or any case where you're unsure. When in doubt, call the lab before you finish the prep, not after.



Full-Contour (Monolithic) Zirconia

Occlusal — functional cusp	1.0–1.5 mm
Occlusal — non-functional cusp	1.0 mm
Axial reduction	0.5–1.0 mm
Recommended margin	Light chamfer

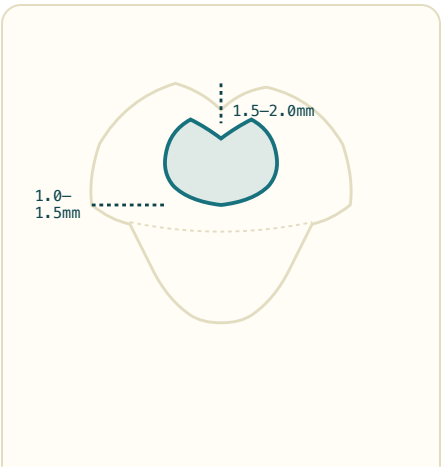
Most conservative all-ceramic option. Material strength tolerates near-vertical walls — good choice when interocclusal space or remaining tooth structure is limited.



Layered Zirconia (PFZ)

Occlusal — functional cusp	1.5–2.0 mm
Occlusal — non-functional cusp	1.5 mm
Axial reduction	1.0–1.5 mm
Recommended margin	Rounded shoulder / heavy chamfer

The zirconia coping plus a veneering porcelain layer both need room — under-reduce here and the ceramist is forced to either over-contour or thin the porcelain past its fracture threshold.



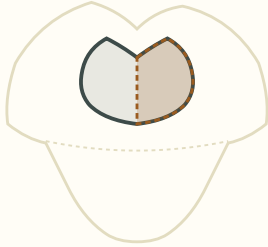
Lithium Disilicate (e.max)

Occlusal — functional cusp	1.5–2.0 mm
Occlusal — non-functional cusp	1.0–1.5 mm
Axial reduction	1.0–1.5 mm
Recommended margin	Rounded shoulder / deep chamfer

no sharp internal angles –
stress risers

Minimum material thickness is 1.0 mm at every point on the restoration, not just at the margin — a locally thin spot from an uneven prep is the most common cause of early fracture.

lingual (metal) facial (ceramic)



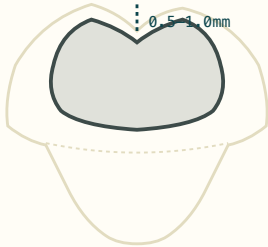
facial ceramic vs. lingual
metal collar

Porcelain-Fused-to-Metal (PFM)

Occlusal / facial (ceramic)	1.5–2.0 mm
Lingual (metal only)	1.0 mm
Axial — facial	1.2–1.5 mm
Axial — lingual collar	0.5 mm
Recommended margin	90° shoulder facial · chamfer lingual

Two different reduction depths on one prep — the facial surface carries a metal coping *plus* porcelain, the lingual can stay metal-only and needs far less room.

0.5–1.0mm



thinnest possible reduction
of any option

Full Cast Metal (Gold / High-Noble)

Occlusal — functional cusp	0.5–1.0 mm
Occlusal — non-functional cusp	0.5 mm
Axial reduction	0.5 mm
Recommended margin	Chamfer

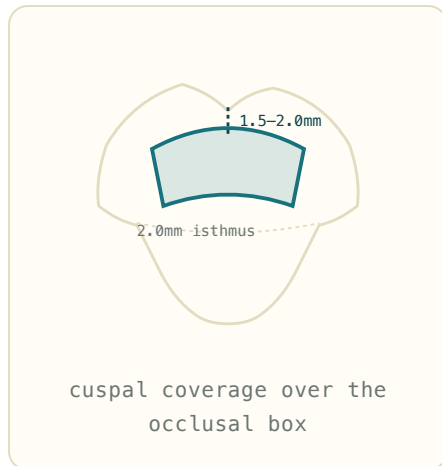
The most conservative reduction of any restoration type — the right call whenever interocclusal space is tight, most often on second molars.

! Anterior-specific: incisal reduction runs deeper than the occlusal figures above — 1.5–2.0 mm for all-ceramic/PFM, 0.75–1.0 mm for full metal — since incisal edge material carries both strength and translucency. Facial reduction mirrors the axial figures above; lingual concavity needs only 0.5–1.0 mm as it's rarely load-bearing.

Onlay

premolars & molars, cuspal coverage

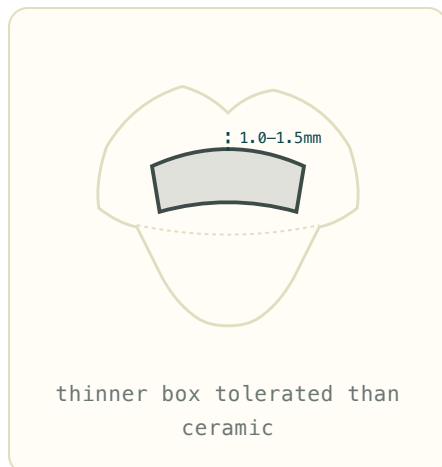
An onlay caps one or more cusps, so occlusal and cuspal reduction both matter — under-reducing a cusp you intend to cover is the most common reason an onlay comes back as a die-trim.



Ceramic (Zirconia / e.max)

Occlusal / pulpal floor	1.5–2.0 mm
Cuspal reduction	1.0–1.5 mm
Gingival floor width	1.0–1.5 mm
Isthmus width (minimum)	2.0 mm
Recommended margin	Light chamfer

Proximal box walls should diverge slightly occlusally (light flare, no undercut). A narrower isthmus concentrates stress and is a common fracture point under occlusal load.



Full Cast Metal

Occlusal / pulpal floor	1.0–1.5 mm
Cuspal reduction	0.5–1.0 mm
Gingival floor width	1.0 mm
Recommended margin	Light chamfer / feather

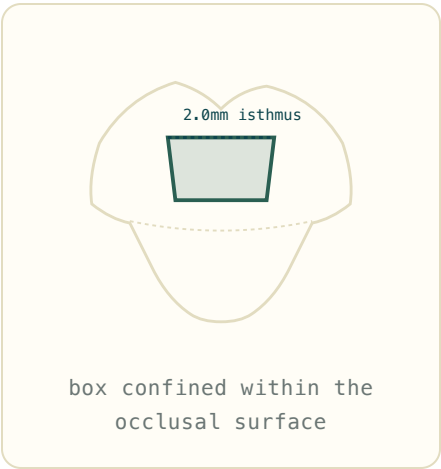
Metal's burnishability tolerates a shallower box than ceramic — the right call whenever remaining tooth structure or interocclusal space is limited.

! Where in doubt between an inlay and onlay, cap the cusp — an under-supported cusp left uncovered is a common reason for a post-cementation fracture the lab never sees coming. Internal line angles stay rounded throughout; a ceramic onlay is the least forgiving restoration type on this list for a sharp axio-pulpal angle.

Inlay

premolars & molars, no cuspal coverage

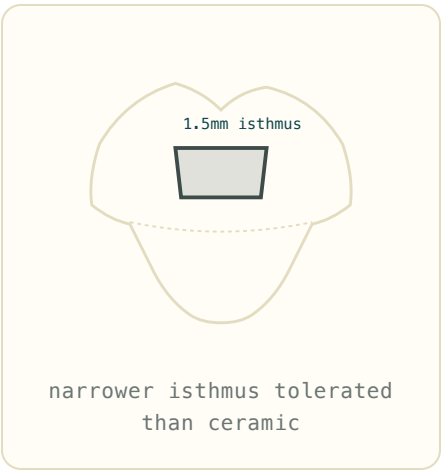
Same box-form fundamentals as an onlay, without cuspal coverage — reserved for cases where the remaining cuspal structure is sound and doesn't need to be capped.



Ceramic (Zirconia / e.max)

Occlusal / pulpal floor	1.5–2.0 mm
Isthmus width (minimum)	2.0 mm
Cavosurface angle	90°
Recommended margin	Light chamfer, 90° cavosurface

A ceramic inlay has no cuspal coverage to fall back on — every internal angle stays rounded, and box walls flare slightly occlusally with zero undercut.



Full Cast Metal

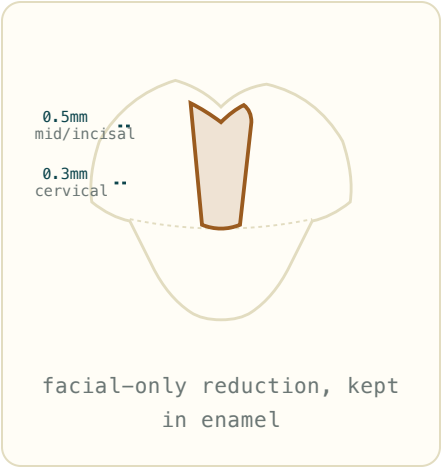
Occlusal / pulpal floor	1.0–1.5 mm
Isthmus width (minimum)	1.5 mm
Recommended margin	Feather edge or light chamfer

The classic conservative inlay — reserve for cases where a gold restoration is otherwise indicated and remaining structure is genuinely sound.

Veneer

anterior, esthetic zone

Minimal-prep by design — most of a veneer's job is optical, and over-reducing facial enamel gains nothing but risk.



Facial Reduction, Enamel-Confined

Cervical facial	0.3 mm
Mid-facial / incisal-facial	0.5 mm
Incisal edge	0.75–1.5 mm
Recommended margin	Supragingival chamfer

Incisal reduction depends on whether the veneer wraps the incisal edge or butt-joints against it. Keep every depth cut in enamel — extending into dentin weakens the bond and is the leading cause of a debonded veneer.

! Margin stays supragingival or right at the free gingival margin wherever esthetics allow — a subgingival veneer margin is harder to finish cleanly and offers no real benefit for a facial-only restoration.

Margin Design

six finish-line geometries

The margin does two jobs at once: it gives the restoration a defined, seatable edge, and it gives the material enough bulk right where it's most likely to chip. Pick the geometry the restoration type and material actually need — not the one that's fastest to cut.



Chamfer

ZIRCONIA • FULL METAL

Rounded internal angle, 0.3–0.8 mm. The most versatile margin — clean for the scanner, forgiving to cut, adequate bulk for conservative-reduction materials.



90° Shoulder

LAYERED CERAMIC • ONLAY/INLAY BOX

Flat floor, defined angle. Gives layered porcelain the bulk it needs where it's veneered — required wherever a material can't rely on axial-wall strength alone.



Modified Shoulder

PFM • E.MAX

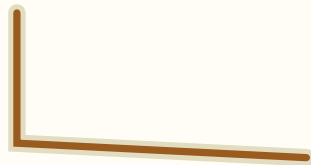
A short bevel added to the shoulder floor. Hybrid choice — most of a shoulder's bulk, a chamfer's easier scan/impression capture.



Deep Chamfer

MONOLITHIC ZIRCONIA • E.MAX

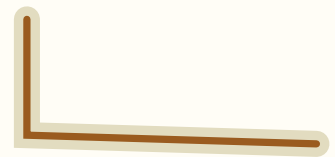
A wider, deeper version of the standard chamfer. Common default for CAD/CAM monolithic materials — scans cleanly and mills predictably.



Feather / Knife Edge

FULL CAST METAL ONLY

No defined bulk — fine for burnishable metal margins, not enough material for any ceramic. Avoid for all-ceramic and PFM cases.



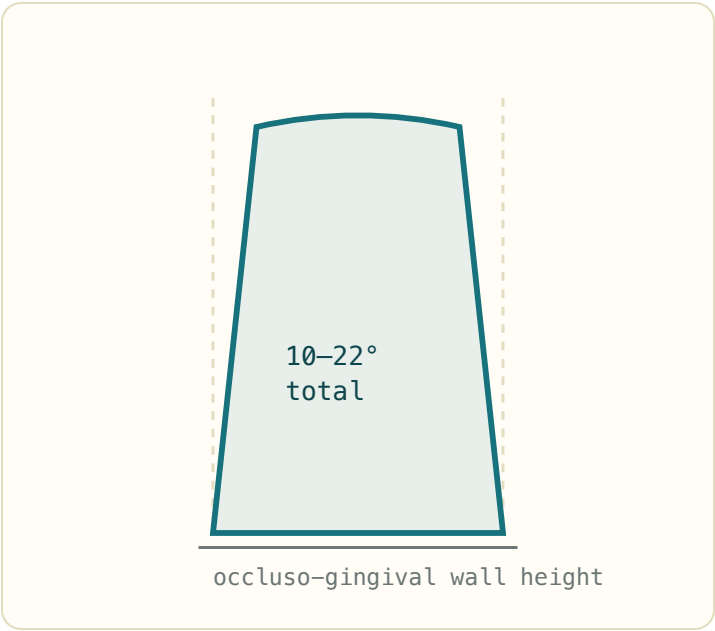
Facial Chamfer, Supragingival

VENEER

Light chamfer kept at or above the free gingival margin — esthetics without a subgingival finish line to keep clean.

Taper & Geometry

full-coverage crowns only



Total occlusal convergence	10°–22°
Theoretical ideal (rarely achievable)	~6°/wall
Minimum wall height for retention	3–4 mm
Internal line angles	Rounded, no sharp corners

Under-tapering (too vertical) risks undercuts and a prep that won't fully seat. Over-tapering trades retention for ease of seating — past roughly 22° total convergence, resistance form starts to depend entirely on cement. Doesn't apply to onlay/inlay box walls (light flare, no formal taper spec) or veneers (no axial walls to taper).

Quick Reference

every restoration type, one table

MATERIAL	OCCLUSAL / INCISAL	AXIAL / FACIAL	MARGIN
FULL-COVERAGE CROWN			
Monolithic Zirconia	1.0–1.5 mm	0.5–1.0 mm	Light chamfer
Layered Zirconia (PFZ)	1.5–2.0 mm	1.0–1.5 mm	Rounded shoulder / heavy chamfer
Lithium Disilicate (e.max)	1.5–2.0 mm	1.0–1.5 mm	Rounded shoulder / deep chamfer
PFM — facial / lingual	1.5–2.0 / 1.0 mm	1.2–1.5 / 0.5 mm	90° shoulder facial · chamfer lingual
Full Cast Metal	0.5–1.0 mm	0.5 mm	Chamfer
ONLAY			
Ceramic	1.5–2.0 mm	1.0–1.5 mm	Light chamfer
Full Cast Metal	1.0–1.5 mm	0.5–1.0 mm	Light chamfer / feather
INLAY			
Ceramic	1.5–2.0 mm	2.0 mm isthmus	Light chamfer, 90° cavosurface
Full Cast Metal	1.0–1.5 mm	1.5 mm isthmus	Feather edge
VENEER			
Facial (cervical / mid-incisal)	0.75–1.5 mm incisal	0.3 / 0.5 mm	Supragingival chamfer

! These figures reflect established prosthodontic literature and standard laboratory practice — not a substitute for the specific material manufacturer's IFU, or your own clinical judgment on a given case. Unsure about a prep before you send it? Call the lab first.

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Questions on a specific case
915.200.2931
Case-specific prep questions are always faster by phone than by guesswork.

Document control
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