

FIXED RESTORATIVE RX



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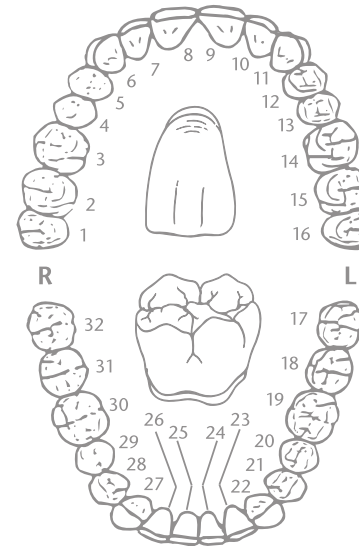
Dr. Name _____ Phone # _____

Patient ID/Name _____ Acct. # _____
First Last

Address/Email _____ Deliver by 5 p.m. on _____

Enclosed with case: ☐ Impressions ☐ Models ☐ Bite ☐ Photos ☐ Other: _____

Rx Implant System _____ Implant Diameter _____ mm



Signature _____

License # _____ Date _____

Submission of this Rx constitutes agreement with limited warranty terms and conditions. See reverse for details.

PROVISIONAL RESTORATIONS

- ☐ BioTemps Provisionals
Reinforcement: ☐ None ☐ Wire* ☐ Fiber ☐ Cast-Metal
- ☐ Transition C&B ☐ Smile Transitions
- Abutment #(s) _____ Total units _____
- Pontic #(s) _____
- ☐ Splinted* ☐ Cement-On Implant ☐ Individual Units ☐ Screw-Retained Implant
- Amount of prep reduction: ☐ 1 mm* ☐ 2 mm
- ☐ Perio treatment: Prepare tooth below gingival on tooth #(s) _____ by _____ mm
- ☐ Pontic site healing: Prepare ovate socket on tooth #(s) _____ by _____ mm

VENEER

- ☐ Obsidian veneer* ☐ **NEW!** BruxZir Esthetic veneer
- ☐ IPS e.max veneer ☐ Layered IPS e.max veneer

IMPLANT ABUTMENTS

- CHOOSE MATERIAL**
- ☐ Titanium* ☐ Gold-Colored Titanium ☐ Zirconia w/ Ti-Base ☐ Gold Alloy
- CHOOSE BRAND**
- ☐ Glidewell* ☐ BIOMET 3i Encode

SCREW-RETAINED IMPLANT CROWNS

- ☐ BruxZir Full-Strength ☐ **NEW!** BruxZir Esthetic ☐ IPS e.max
- Specify implant brand, system and diameter on Rx*

ZIRCONIA RESTORATIONS

- ☐ BruxZir Full-Strength* ☐ **NEW!** BruxZir Esthetic (870 MPa) (preparation shade recommended for best results)
- ☐ Bilayered Clinical Zirconia ☐ Lava Crowns & Bridges

ALL-CERAMIC RESTORATIONS

- ☐ Obsidian All-Ceramic ☐ IPS e.max
- Indicate stump or present tooth shade for all-ceramics*

PFM

- ☐ Obsidian to Non-Precious* ☐ Obsidian to White Noble
- ☐ Obsidian to White High Noble

COMPOSITE RESTORATIONS

- ☐ Composite ☐ Fiber Reinforcement

FINAL SHADE



Indicate Shade Here

PRESENT TOOTH OR STUMP SHADE



Indicate Shade Here

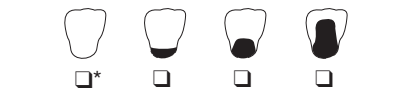
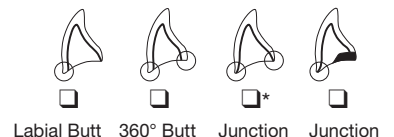
OCCUSAL STAINING

- ☐ None ☐ Light* ☐ Medium ☐ Dark

RESTORATION PONTIC DESIGN



MARGIN AND METAL DESIGN



IF NO OCCUSAL CLEARANCE

- ☐ Call doctor ☐ Metal occlusion

- ☐ Spot opposing

Would you like this to be a permanent note in your master file? ☐ Yes ☐ No

TERMS AND WARRANTY INFORMATION



All Restorations Made in the USA

We honor VISA, MASTERCARD, AMEX and DISCOVER.

TERMS: Cost of collection of any account will be paid by the customer. All accounts are payable within 30 days of statement date. **Accounts not paid within the stated terms will be subject to COD status and a late charge of 2 percent of the unpaid balance.** Prices subject to change without notice. Rx must be enclosed with original case submission.

NO-FAULT REMAKE POLICY: Glidewell is pleased to process all remakes or adjustments at no additional charge if requested within the warranty period and accompanied by the return of the original appliance.

LIMITED WARRANTY/LIMITATION OF LIABILITY. For warranty terms and conditions and limitation of liability, visit glidewell.com/policies-and-warranties.



• BruxZir
Restorations



• Custom
Abutments



• All-Ceramic
Restorations
• PFM Restorations



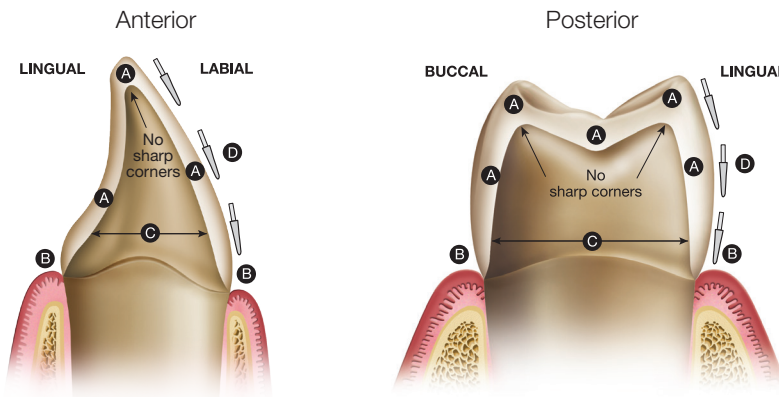
• Transition
Crowns and
Bridges®



• BioTemps®
Provisionals

All rush cases must be prescheduled by calling 800-944-7874 before the case is shipped. Time of pickup and delivery may affect turnaround time.

PREPARATION GUIDELINES



BruxZir Esthetic

- A. 1.25 mm ideal reduction (0.7 mm minimum)
- B. Chamfer or modified shoulder margins preferred
- C. Axial walls must be convergent (avoid undercuts)
- D. Preparation should be cut in three planes
- E. To achieve optimal impression quality, gingival retraction is necessary for preparations with subgingival or equigingival margins

BruxZir Full-Strength

- A. 1.0 mm ideal reduction (0.5 mm minimum)
- B. Chamfer or shoulder margins preferred. Feather-edge OK
- C. Axial walls must be convergent (avoid undercuts)
- D. Preparation should be cut in three planes
- E. To achieve optimal impression quality, gingival retraction is necessary for preparations with subgingival or equigingival margins

FLAT-RATE PRICE ON CUSTOM ABUTMENTS AND SCREW-RETAINED CROWNS IS AVAILABLE FOR THE FOLLOWING IMPLANT SYSTEMS

BIOMET 3i™
Certain®

CAMLOG®
SCREW-LINE

DENTSPLY Implants
ANKYLOS® C/X
ASTRA TECH Implant System®
ASTRA TECH Implant System® EV

Glidewell Direct
Hahn™ Tapered Implant System
Inclusive® Tapered Implant System

HIOSEN®
HG System

MegaGen
AnyRidge® Implant System

Nobel Biocare
Brånemark System® RP
NobelActive®
NobelReplace®

Straumann®
Bone Level
Tissue Level

Zimmer Dental
Screw-Vent®

Restorations for the implant systems above are fabricated using components manufactured by PrismaTek Dentalcraft, Inc. Prices may vary for other implant systems due to the need for original equipment manufacturer (OEM) components. Inclusive is a registered trademark of PrismaTek Dentalcraft, Inc. Hahn Tapered Implant is a trademark of PrismaTek Dentalcraft, Inc. All other trademarks are property of their respective owners.