FIXED RESTORATIVE RX



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Dr. Name					Phone #	
Patient ID/Name	First		Last		Acct. #	
Address/Email				_ Deliver l	oy 5 p.m. on	
Enclosed with case:	☐ Impressions	☐ Models	☐ Bite	☐ Photos	Other:	

X Implant System	Implant Diameter	mm		
			8 9 10	-
			5 11 12 13 13 14 14 14 14 15 15 15 15 15 15 15 15 15 15 15 15 15	PI
			2 15 16	-
			R L 17	
			31 18 (1) 30 26 29 25 24 23 29 25 24 / 20 27	
_			28 27 21 (21 (27)	
Signature				

RESENT TOOTH OR STUMP SHADE **OCCLUSAL STAINING** ☐ Light* ☐ Medium ☐ Dark **RESTORATION PONTIC DESIGN** MARGIN AND METAL DESIGN Labial Butt 360° Butt Junction Junction

FINAL SHADE

PROVISIONAL RESTORATIONS

☐ BioTemps Provisionals

Reinforcement: ☐ None ☐ Wire* ☐ Fiber

License #

- rcement: None Wire* Fiber Cast-Metal
- ☐ Transition C&B ☐ Smile Transitions
- Abutment #(s) _____
- 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 ____mmm

VENEER

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

IMPLANT ABUTMENTS

- CHOOSE MATERIAL : CHOOSE BRAND
- ☐ Titanium* ☐ Glidewell*

Date

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

☐ Gold Alloy

☐ Gold-Colored Titanium ☐ BIOMET 3i Encode ☐ Zirconia w/ Ti-Base

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
- ☐ Bilayered Clinical for best results)

 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

IF NO OCCLUSAL CLEARANCE

- Call doctor
- ☐ Metal occlusion
- ☐ Spot opposing
- Would you like this to be a permanent note in your master file? \(\subseteq \text{Yes} \subseteq \subseteq \text{No} \)

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®



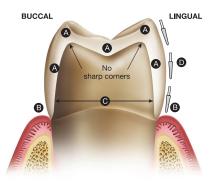
 BioTemps® Provisionals

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

Anterior LINGUAL

Posterior



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

MegaGen

AnyRidge® Implant System

DENTSPLY Implants

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

Nobel Biocare

Brånemark System® RP NobelActive® NobelReplace®

Glidewell Direct

Glidewell HT™ Implant System Hahn[™] Tapered Implant System Inclusive® Tapered Implant System

Straumann®

Bone Level Tissue Level **HIOSSEN®**

HG System

Zimmer Dental Screw-Vent®

Restorations for the implant systems above are fabricated using components manufactured by Prismatik 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 Prismatik Dentalcraft, Inc. Glidewell HT and Hahn are trademarks of Prismatik Dentalcraft, Inc. All other trademarks are property of their respective owners.