

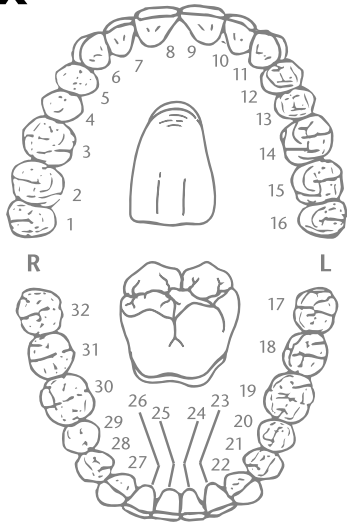
Dr. Name _____ Phone # _____

Acct. # _____ Patient Name _____
First Last

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

See Reverse for Working Times

Rx **SPECIFIC INSTRUCTIONS** *NOTE: Please send a study model on all work involving anterior teeth.*



Enclosed with case:

Impressions Models Bite

Photos Other: _____

Try-In: Yes No

IF NO OCCLUSAL CLEARANCE

- Call doctor
- Spot opposing
- Make this a permanent note in my master file



Tooth No. _____

Stump Shade _____

Final Shade _____

(Required for BruxZir Esthetic and IPS e.max)

PONTIC DESIGN



INSTRUCTION FOR BUCCAL MARGIN

- Metal-ceramic junction margin*
- Ceramic butt margin

OCCLUSAL STAINING

- None Light*
- Medium Dark

INCLUSIVE CUSTOM ABUTMENTS

Titanium Zirconia w/ Ti-Base

Prepare existing abutment

Implant System _____

Diameter _____

CERAMIC TO METAL

- Obsidian Fused to Non-Precious* Obsidian Fused to White Noble
- Maryland Bridge

FULL-METAL

- Non-Precious Yellow Noble (41% Au)

ALL-CERAMIC

- BruxZir Full-Strength* (1,150 MPa) IPS e.max
- NEW!** BruxZir Esthetic (870 MPa) (stump shade recommended for restorations less than 1.5 mm thick)

TCS FLEXIBLE REMOVABLES

- iFlex Bilateral Totally Natural Unilateral
- Karadent All Pink Unbreakable Bilateral Transparent /Pink Unilateral

Acrylic Shade _____

Kenson Teeth (Included at no extra charge) _____

Premium Brand Teeth (Extra charge applies) Shade _____ Brand _____ Mould _____

Bite Rim Wax Setup Try-in Finish

PLAYSAFE MOUTHGUARDS

Specify color(s) on Rx

- Upper* Lower
- Light Pro Medium* Heavy Heavy Pro

TEMPORARIES

- Hi-Tech Temps* Hi-Tech Temps with metal
- Smile Transition Diagnostic Wax-Up

BITE SPLINTS

- Upper* Lower
- Comfort H/S Bite Splint* Soft Bite Splint
- Comfort Bite Splint (hard)
- Bleaching Tray Clear Ortho Retainer

SLEEP APPLIANCES

- EMA Silent Nite

Place Shipping Airbill Tracking Sticker Here

Signature _____ (see reverse for limited warranty details)

License # _____ Date _____

IN-LAB WORKING TIMES

Please allow full working time for each product selected. Working times are **NOT** guaranteed and do **NOT** include weekends or holidays.

Implants (abutments, crowns and bridges).....	9 days in lab
BruxZir Zirconia/IPS e.max	5 days in lab
Bite Splints/Mouthguards.....	2 days in lab
tcs Flexible Removables	
Bite Rim	4 days in lab
Wax Setup Try-in	4 days in lab
Finish	4 days in lab

To schedule an in-office case pickup, call **800-278-9947**.

CUSTOM ABUTMENTS AND SCREW-RETAINED CROWNS ARE COMPATIBLE WITH THE FOLLOWING IMPLANT SYSTEMS

BIOMET 3i™ Certain®*	CAMLOG® SCREW-LINE*	Dentium® Implantium®† SimpleLine® II† SuperLine®†	DENTSPLY Implants ANKYLOS® C/X* ASTRA TECH Implant System®* ASTRA TECH Implant System® EV*	Glidewell Direct Hahn™ Tapered Implant System† Inclusive® Tapered Implant System*
HIOSSEN® HG System*	Keystone Dental PrimaConnex®†	MegaGen AnyRidge® Implant System*	Neoss® Neoss® Implant System*	
Nobel Biocare Brånemark System® RP* NobelActive®** NobelReplace®**	Straumann® Bone Level* Tissue Level*	Sweden & Martina Premium† Shelta†	Zimmer Dental Screw-Vent®*	

*Manufactured using Inclusive® components. †Manufactured using original equipment manufacturer (OEM) components. Inclusive is a registered trademark of Prismatic Dentalcraft, Inc. Hahn Tapered Implant is a trademark of Prismatic Dentalcraft, Inc. All other trademarks are property of their respective owners. For Dentium implant systems, only titanium custom abutments are available.

TERMS AND WARRANTY INFORMATION

We honor VISA, MASTERCARD and DISCOVER.

TERMS: All accounts are payable within 15 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.

LIMITED WARRANTY/LIMITATION OF LIABILITY: Glidewell Costa Rica (“the lab”) warrants that all dental devices (a “device”) are made according to your specification and approval in the belief that the device will be useful and **MAKES NO OTHER WARRANTIES INCLUDING, BUT NOT LIMITED TO, ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE.** Subject to the return of a device that is placed and then fails, the lab will repair or replace the device without charge for the cost of materials and workmanship or refund the original price paid, at the lab’s option, as follows: (1) screw-retained implant abutments up to 20 years (including replacement of a device that was made by the lab that was attached to said abutments and including an Inclusive® Tapered titanium dental implant upon request at no extra charge); (2) porcelain to metal, all ceramic, all metal, single-unit inlay, onlay and crown composite resin final prosthetics, and screw-retained crowns and implant bars, up to seven years; (3) composite resin bridges (excluding Maryland and inlay/onlay bridges) up to five years; (4) thermoformed appliances and splints if the failure is due to defects in materials or workmanship, provisionals, composite resin Maryland and inlay/onlay bridges, up to six months; (5) all other dental devices up to 30 days if the failure is due to defects in materials or workmanship. This Warranty is exclusively for your benefit, is not transferable and does not extend to any patients. You agree to pay all other costs of adjustment, repair and replacement of a device. Except where prohibited by law, the lab **WILL NOT BE LIABLE FOR ANY LOSS OR DAMAGES ARISING FROM THE USE OF A DEVICE, WHETHER DIRECT, INDIRECT, SPECIAL, INCIDENTAL OR CONSEQUENTIAL,** regardless of the theory asserted, including warranty, contract, negligence or strict liability and if such disclaimer is not permitted by law, the duration of any implied warranty is limited to 90 days from the date of delivery. In the event of a dispute and absent an amicable resolution the parties mutually agree to waive class actions in favor of mandatory individual arbitration of claims under this limited warranty in and in accordance with the laws of Florida. The lab does not guarantee the performance of independent carriers.

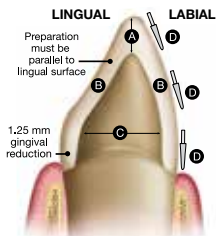
PRIVACY POLICY: The data that is supplied will be treated in compliance with Law 8968 of Costa Rica. The names and patient data will be treated as a reference code and not as proper names or personal data. Available to you on our website: cr.glidewell dental.com



DENTISTS: There is no charge for one inbound and one outbound shipment per case.
Additional shipments for die trims, bisque bake, coping or framework try-ins, reshades to a new shade, and oversized articulators will incur additional fees.

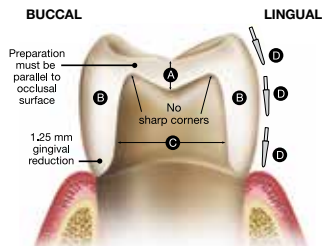
PREPARATION GUIDELINES

ANTERIOR: OBSIDIAN FUSED TO METAL



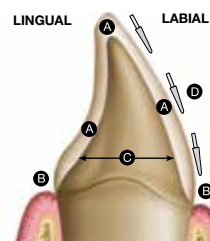
- A. 2.0 mm incisal reduction
- B. 1.5 mm middle third reduction
- C. Axial walls must be convergent (avoid undercuts)
- D. Preparation should be cut into three planes
- E. To achieve optimal impression quality, gingival retraction is necessary for preparations with subgingival or equigingival margins

POSTERIOR: OBSIDIAN FUSED TO METAL



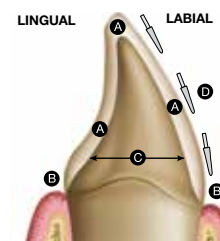
- A. 2.0 mm occlusal reduction
- B. 1.5 mm middle third reduction
- C. Axial walls must be convergent (avoid undercuts)
- D. Preparation should be cut into three planes
- E. To achieve optimal impression quality, gingival retraction is necessary for preparations with subgingival or equigingival margins

BRUXZIR ESTHETIC

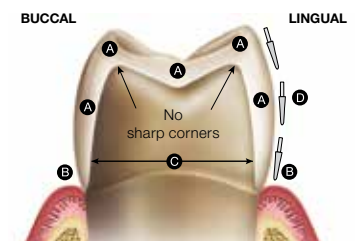


- A. 1.25 mm ideal reduction (0.7 mm minimum)
- B. Chamfer or shoulder margins preferred
- C. Axial walls must be convergent (avoid undercuts)
- D. Preparation should be cut in three planes
- E. To achieve optimal impression quality, gingival retraction is necessary for preparations with subgingival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



- 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