

Master Case:
 Patient Name:
 Tooth Number:

Rx

CERAMIC SHADE INSTRUCTIONS



Indicate Shade Here

Occlusal Staining:

- None Light Med Dark



All Restorations
 Made in the USA

Signature _____

License # _____

IMPORTANT INSTRUCTIONS
 Utilize the Custom Impression Coping included in the original shipment for this patient. Complete this Rx and return to Glidewell Laboratories with impression, opposing impression and bite registration.

SELECT ABUTMENT TYPE INCLUSIVE CUSTOM ABUTMENTS

- Titanium Abutment*
 Zirconia w/ Ti-Base
 Gold-Tone Titanium Abutment

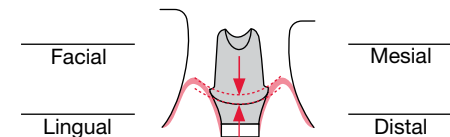
SELECT CROWN TYPE

- BruxZir Full-Strength* (1,150 MPa)
 BruxZir Anterior (650 MPa)
 IPS e.max

SCREW-RETAINED RESTORATIONS

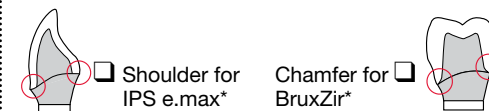
- BruxZir Full Strength (w/ Ti-Base)*
 BruxZir Anterior (w/ Ti-Base)
 IPS e.max (w/ Ti-Base)

ABUTMENT MARGIN DEPTH



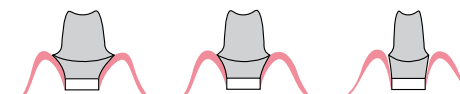
If left blank, default values will be used

ABUTMENT MARGIN DESIGN



- Shoulder for IPS e.max* Chamfer for BruxZir*

ABUTMENT EMERGENCE PROFILE



- Surgical Placement Tissue Displacement* No Tissue Displacement

CONTOUR AND OCCLUSION DESIGN

- Embrasures: Closed* Open
 Occlusion: Light* Ideal
 Open ___ mm Out
 Contacts: Broad & Tight* Pinpoint
 Light

RESTORATION PONTIC DESIGN



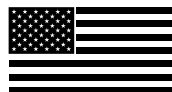
IF NO OCCLUSAL CLEARANCE

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

*Standard unless specified otherwise

TERMS AND WARRANTY INFORMATION

Only \$7 shipping per box each way (contiguous U.S. only; shipping charge varies for Alaska, Hawaii and Puerto Rico).



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 Laboratories 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 dental.com/policies-and-warranties/.