

• **FIXED RESTORATIVE Rx** •



**GLIDEWELL
LABORATORIES**

4141 MacArthur Blvd. • Newport Beach, CA 92660

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glidewell dental.com

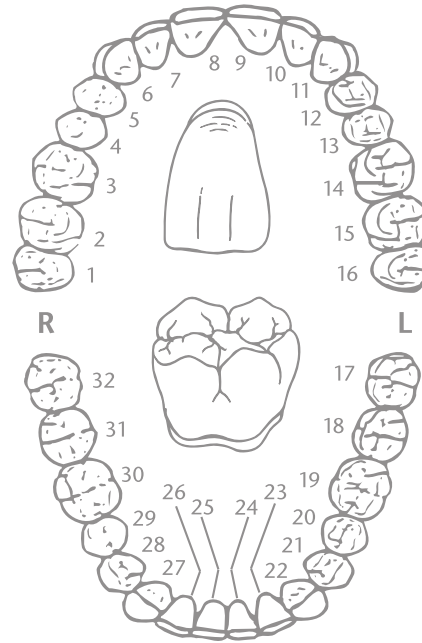
Dr. Name _____ Phone # _____

Acct. # _____ Patient Name _____
First Last

Address/Email _____ **Deliver by 5 p.m. on** See Reverse for Working Times

Enclosed with case: Impressions Models Bite Photos Other: _____

Rx Implant System _____ Implant Diameter _____ mm



Signature _____ License # _____
(see reverse for limited warranty details)

FINAL CERAMIC SHADE



Indicate Shade Here

PRESENT TOOTH OR STUMP SHADE



Indicate Shade Here

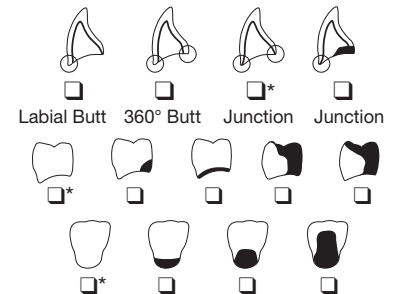
OCCLUSAL STAINING

None Light* Medium Dark

PONTIC DESIGN



MARGIN AND METAL DESIGN



*Standard unless specified otherwise

COMPOSITE RESTORATIONS

Camouflage NanoHybrid Composite
 Fiber Reinforcement

IF NO OCCLUSAL CLEARANCE

Call doctor Would you like this to be a permanent note in your master file?
 Spot opposing Yes No
 Metal occlusion Yes No

OBSIDIAN FUSED TO METAL

Non-Precious* White Noble White High Noble

ZIRCONIA RESTORATIONS

BruxZir Full-Strength* (1,150 MPa)
 BruxZir Esthetic (870 MPa) (stump shade recommended for restorations less than 1.5 mm thick)
 Lava Crowns & Bridges PrismaTik Clinical Zirconia

ALL-CERAMIC RESTORATIONS

IPS e.max Obsidian All-Ceramic
 Vivaneers No-Prep Veneers* IPS e.max veneers

Indicate stump or present tooth shade for all-ceramics

CUSTOM IMPLANT ABUTMENTS

Choose Material Choose Brand

Titanium* Inclusive*
 Gold-Colored Titanium BIOMET 3i Encode
 Zirconia w/ Ti-Base Straumann Variobase
 Gold Alloy

See reverse for supported implant systems

SCREW-RETAINED IMPLANT CROWNS

BruxZir Full-Strength BruxZir Esthetic IPS e.max

Specify implant brand, system and diameter on Rx

FULL-CAST RESTORATIONS

Noble-Cast 42 YN (2% Au) OcclusalGold YHN (73.8% Au)
 Noble-Cast 45 YN (40% Au) JRVT YHN (77% Au)
 Noble-Cast 60 YHN (57.5% Au)* Post & Core
 Noble-Cast 67 YHN (64% Au)

PROVISIONAL RESTORATIONS

Splinted* Individual units
 Transition C&B Smile Transitions

Abutment #(s) _____ Total units _____

Pontic #(s) _____ Total units _____

BioTemps Provisionals

Reinforcement: None Wire* Fiber

BioTemps with Cast-Metal Substructure

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

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. Rush service available on most products but must be prescheduled (see below).

IN-LAB WORKING TIMES

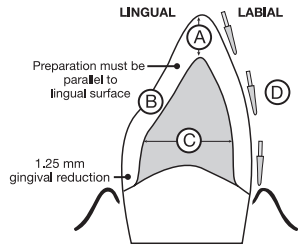
Obsidian Fused to Metal	5 days	Partials & Dentures	
Diagnostic wax-up	5 days	Metal Frames	6 days
Obsidian w/ attachments	7 days	Metal Frame with teeth and wax.....	11 days
Custom abutments	8 days	Metal Partial to finish	12 days
All-ceramic/zirconia restorations	5 days	Occlusion rims/Custom tray	3 days
Full-cast restorations	5 days	Denture setup try-in	5 days
Composite restorations	3 days	Denture try-in to finish	5 days
Fiber-reinforced composites	5 days	Valplast/tcs setup teeth in wax.....	5 days
BioTemps Provisionals	5 days	Valplast/tcs start to completion.....	7 days
With cast-metal substructure	6 days	Denture soft liner/acrylic repair or reline.....	5 days
With cast-metal substructure over implant	6 days	Partial repair/reline.....	5 days
Screw-retained over implant	6 days	PlaySafe mouthguards	4 days
Smile Transitions appliance	7 days	Silent Nite sl	4 days
Transition Crowns & Bridges	6 days	TAP/TAP 3 TL/dreamTAP/EMA	5 days
Lava	5 days	Comfort H/S Bite Splint	4 days
		Nightguards/Bleach trays/Custom trays	4 days

All rush cases must be prescheduled

by calling **800-944-7874** before the case is shipped. Time of pickup and delivering may affect turnaround time.

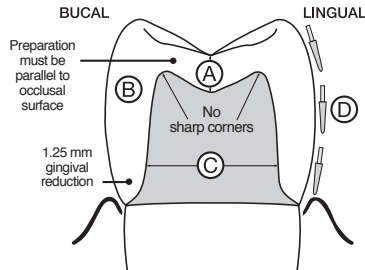
PREPARATION GUIDELINES

OBSIDIAN TO METAL ANTERIOR



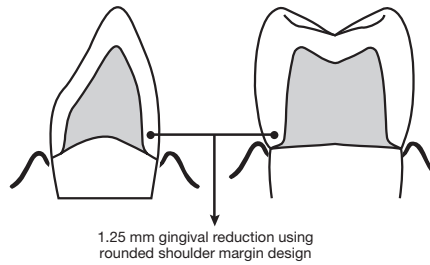
- A. 2 mm incisal reduction
- B. 1.5 mm middle third reduction
- C. Labial and lingual walls must be convergent
- D. Preparation should be cut in three planes

OBSIDIAN TO METAL POSTERIOR

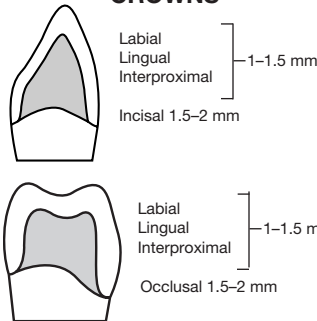


- A. 2 mm occlusal reduction
- B. 1.5 mm middle third reduction
- C. Buccal and lingual walls must be convergent
- D. Preparation should be cut in three planes

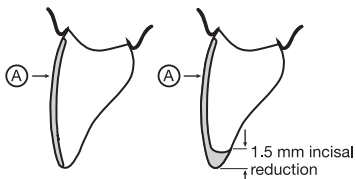
OBSIDIAN TO METAL - CERAMIC LABIAL OR 360° MARGIN



ALL-CERAMIC/COMPOSITE CROWNS

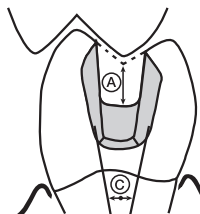


ALL-CERAMIC/COMPOSITE VENEERS



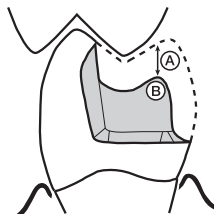
- A. 0.3 to 1 mm labial reduction

INLAY



- A. 1.5 to 2 mm occlusal reduction
- B. Round all sharp line angles and occlusal edges, and eliminate undercuts.
- C. Proximal and occlusal walls should have 6-8 degrees taper.

ONLAY



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 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/.

INCLUSIVE® 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®
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®

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