MIGRAINE PREVENTION RX



4141 MacArthur Blvd. • Newport Beach, CA 92660

CONTACT INFORMATIONS

	1. Car	efully package	vour case,	including	this Rx.	and tap	e box securely	v closed
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- 2. To schedule shipping pickup, call us at [PHONE NUMBER].
- 3. Please allow XX working days in lab.

*Glidewell Clinical Twinpak is valid for two appliances of the same kind for the same patient.

CONTACT INFORMATION		·		•		
Dr. Name	Acct. #		ENCLOSED WITH CASE			
Phone #	Email			☐ Impressions ☐ Models ☐ Bite		
Address	City/State/7IP		☐ Other:			
Patient ID/Name			Upper and lower impressions or models with bite registration required			
Deliver by 5 p.m. on						
R _x		PL	EASE COMPLETE THIS SECTION			
^	 		One Appliance	Glidewell Clinical Twinpak One for Relief, One for Reserve		
		NTI-tss Plus (Single Arch)				
		NTI OmniSplint (Dual Arch)		۵		
		СНОО	OSE THE ARCH (NTI-TSS PLUS ONLY)			
			☐ Upper	□ Lower		
			MEASUREMENTS			
		1	Maximum Protrusive Measurementmmm. Enclose full-arch VPS impressions and protrusive bite.			
Signature	License	e #		Date		

© XXXX Glidewell MKT-013000_3 XX-XXXXXX-XXXXXX

TERMS AND WARRANTY INFORMATION

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**.





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.