

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: _____

PROVISIONAL RESTORATIONS

- BioTemps Provisionals
 Reinforcement: None Wire* Fiber
 Cast-Metal
- Transition C&B Smile Transitions
- Abutment #(s) _____
- Pontic #(s) _____ Total units _____
- Splinted* Cement-on Implant
- Individual Units Screw-Retained Implant
- 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

DENTURES/FLIPPERS/FLEXIBLE PARTIALS

- Denture Flipper Valplast tcs DuraFlex
- Custom tray Bite rim Wax setup try-in Finish
- Kenson Teeth (Included at no extra charge)
- Premium Brand Teeth (Extra charge applies)**
 Shade _____ Brand _____ Mould _____

NIGHTGUARDS/RETAINERS

- Upper Lower Scan/Save File
- Comfort H/S* CLEARsplint (hard/soft) (hard processed acrylic)
- Soft nightguard Comfort (hard)
- Clear-Lock Retainers:
 Qty of 2 Qty of 4 Qty of 6
- Clear ortho Hawley QCM Clear-Wire

SNORING/SLEEP APNEA APPLIANCES

- Silent Nite sl* EMA Scan/Save File
- Buy 1 dreamTAP
- Buy 2 and save TAP 3 TL TAP

PLAYSAFE MOUTHGUARDS

- Jr Lt Lt Pro Med* Hvy Hvy Pro
- Helmet strap _____ **Specify color(s) on Rx Name:** _____

ZIRCONIA/ALL-CERAMIC RESTORATIONS

- BruxZir Full-Strength* (1,150 MPa) IPS e.max (anterior)
- NEW!** BruxZir Esthetic (870 MPa) IPS e.max (posterior)
- Obsidian All-Ceramic Lava Zirconia
- PrismaTik Clinical Zirconia

VIVANEER VENEER

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

OBSIDIAN FUSED TO METAL

- Non-Precious* White Noble White High Noble

SCREW-RETAINED RESTORATIONS

- BruxZir Full-Strength* (w/ Ti-Base) Obsidian Fused to White Noble
- NEW!** BruxZir Esthetic (w/ Ti-Base) Obsidian Fused to White High Noble
- IPS e.max (w/ Ti-Base) PrismaTik CZ (w/ Ti-Base)

CUSTOM ABUTMENTS

- Titanium* Gold-Tone Titanium Gold Alloy
- Zirconia w/ Ti-Base BIOMET 3i Encode
- Prepare existing abutment

COMPOSITE RESTORATIONS

- Camouflage NanoHybrid Composite Fiber Reinforcement

FULL-CAST RESTORATIONS

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

METAL PARTIALS

- Vitallium 2000* Vitallium 2000 Plus tcs/Vitallium
- Valplast/Vitallium Wironium tcs/Wironium



- Metal frame try-in Printed frame try-in Frame w/occlus. rim
- Frame w/setup try-in Finish Scan/Save File

*Standard unless specified otherwise

 FINAL SHADE _____	STUMP SHADE <i>Must indicate prepped tooth shade for all-ceramics</i> _____	OCCUSAL STAINING <input type="checkbox"/> None <input type="checkbox"/> Light* <input type="checkbox"/> Medium <input type="checkbox"/> Dark
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SIGNATURE ANTERIOR DESIGN

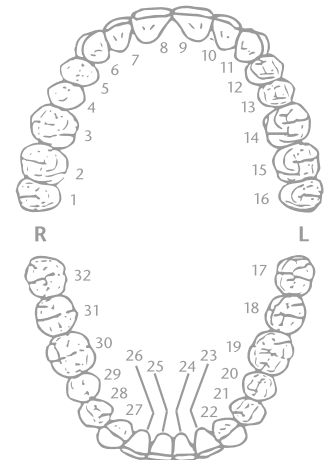
- Square-Tapered Soft-Squared Ovoid Trapezoid Square Triangle-Tapered
- See back of Rx for more details*

PONTIC DESIGN 	MARGIN AND METAL DESIGN  Labial Butt Junction Junct.Collar Excl.Cusp Incl.Cusp
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IF NO OCCUSAL CLEARANCE

- Call doctor Spot opposing Metal occlusion Metal island Make this a permanent note

Rx



Signature _____ License _____

(see reverse for limited warranty details)

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).

All-ceramic/zirconia restorations	5 days
Obsidian Fused to Metal	5 days
Obsidian w/ attachments	7 days
Full-cast restorations	5 days
Custom abutments	8 days
All-ceramic/zirconia screw-retained restorations	8 days
Obsidian Fused to Metal screw-retained restorations	8 days
Diagnostic wax-up	5 days
Composite restorations	3 days
Fiber-reinforced composites	5 days

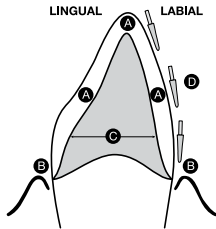
BioTemps Provisionals	5 days
With cast-metal substructure	6 days
With cast-metal substructure over implant	6 days
Screw-retained over implant	6 days
Smile Transitions appliance	7 days
Transition Crowns & Bridges	6 days
Silent Nite sl	3 days
TAP/TAP 3 TL/dreamTAP/EMA	5 days
Comfort H/S Bite Splint	4 days
Nightguards/Bleaching trays/Retainers	4 days

Partials & Dentures	
Metal Frames	6 days
Metal Frame with teeth and wax	11 days
Metal Partial to finish	12 days
Occlusion rims/Custom tray	3 days
Denture setup try-in	5 days
Finish after setup try-in	5 days
Denture try-in to finish	5 days
Valplast/tcs setup teeth in wax	5 days
Finish after setup try-in	6 days
Valplast/tcs start to completion	7 days
Denture soft liner/acrylic repair or reline	5 days
Partial repair/reline	5 days
PlaySafe mouthguards	4 days

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.

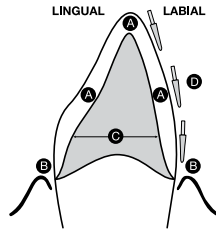
PREPARATION GUIDELINES

Anterior: BruxZir Esthetic



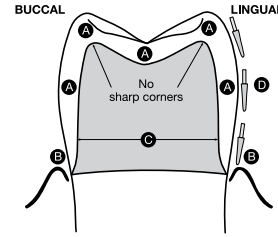
- A. 1.25 mm ideal reduction (0.7 mm minimum)
- B. Chamfer or shoulder margins preferred
- C. Labial and lingual walls must be convergent
- D. Preparation should be cut in three planes

Anterior: BruxZir Full-Strength



- A. 1 mm ideal reduction (0.6 mm minimum)
- B. Chamfer or shoulder margins preferred. Feather-edge OK
- C. Labial and lingual walls must be convergent
- D. Preparation should be cut in three planes

Posterior: BruxZir Full-Strength



- A. 1 mm ideal reduction (0.6 mm minimum)
- B. Chamfer or shoulder margins preferred. Feather-edge OK
- C. Buccal and lingual walls must be convergent
- D. Preparation should be cut in three planes

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 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 glidewelldental.com/policies-and-warranties/.



All Restorations Made in the USA

THE JIM GLIDEWELL SIGNATURE ANTERIOR SERIES

Choose the desired esthetic outcome for your patient

SQUARE-TAPERED



Exemplify boldness and youthfulness.

SOFT-SQUARED



Show energetic professionalism.

OVOID



Convey charm and softness.

TRAPEZOID



Demonstrate confidence.

SQUARED



Strike an athletic tone.

TRIANGLE-TAPERED



Exhibit mature experience.