



18551 Von Karman Ave. • Irvine, CA 92612
866-497-3692 • glidewelldental.com/dtp

Doctor Name _____ Phone # _____

Acct. # _____ Patient Name _____
First Last

Email (required) _____
(Email address required for DTP cases)



1. SELECT IMPLANT SYSTEM

- ☐ Hahn Tapered Implant System
- ☐ BIOMET 3i Certain
- ☐ CAMLOG SCREW-LINE
- ☐ DENTSPLY Implants ASTRA TECH OsseoSpeed® TX
- ☐ Nobel Biocare NobelReplace
- ☐ Nobel Biocare NobelActive
- ☐ Nobel Biocare Brånemark System
- ☐ Straumann Bone Level
- ☐ Straumann Tissue Level
- ☐ Zimmer Dental Screw-Vent

IMPORTANT: Guided surgery requires implant-specific guided surgery instrumentation. See reverse for compatible guided surgery systems.

2. SERVICES REQUESTED

☒ Digital Treatment Plan (\$195 per arch)

Surgical guide (select only one):

- ☐ **Open Platform Surgical Guide:** \$100 for each implant site
- ☐ **Hahn Tapered Implant Surgical Guide Bundle:** Includes surgical guide, Hahn Tapered Implant, healing abutment, and impression coping or scanning abutment (\$200 for each implant site)

Select one:

- ☐ Open-tray impression coping ☐ Closed-tray impression coping
- ☐ Clinical scanning abutment

Prices do not include shipping or applicable taxes.

3. DIAGNOSTIC RECORDS REQUIRED

Full-arch impression, **both arches** (select one):

- ☐ VPS (physical), unpoured and bite registration†.
- ☐ Intraoral scan, in occlusion (uploaded to Glidewell via My Account or your IOS software)

Intraoral scanner used: _____ ID# _____

CBCT/CT scan (select one):

- ☐ Flash drive or CD†
- ☐ Digital upload to DTP Portal: myaccount.glidewelldental.com/#/dtp/request

4. IMPORTANT CBCT/CT SPECIFICATIONS

- Bite must be open 8–10 mm
- Full-arch scan(s) required
- **Maxilla:** From zygomatic arch (including occlusal surfaces of all maxillary teeth)
- **Mandible:** Entire mandible (including occlusal surfaces of all mandibular teeth)
- No patient movement during CT scan
- Remove all jewelry (earrings, lip/tongue/nose piercings)
- DICOM dataset must be uncompressed DICOM file format (.dcm file extension or equivalent)
- PDFs or files formatted for and bundled with a DICOM viewer cannot be used
- CBCT scan cannot be more than six months old



Save time!
Submit your CBCT scans digitally
via the DTP Portal

myaccount.glidewelldental.com/#/dtp/request

Signature _____

(see reverse for limited warranty details)

License # _____ Date _____

IMPLANT WORKING TIMES

Please allow full working time for each product selected.
Working times are **NOT** guaranteed and do **NOT** include weekends or holidays, and do not include delays awaiting diagnostic records or clinician approval times.
Rush service available on most products but must be prescheduled (see below).

Days in Lab

Digital Treatment Plan	5
Surgical Guide	5
Custom Abutments and Crowns	
Custom Abutments	8
Obsidian/BruxZir/IPS e.max/Clinical Zirconia/Full-cast restoration.....	5
Obsidian/IPS e.max/Clinical Zirconia/Full-cast over stock abutment.....	7
BruxZir over custom abutment.....	5
BruxZir over stock implant abutment.....	7
BruxZir, IPS e.max or Obsidian screw-retained restoration.....	8
Overdentures and Fixed Dentures	
Custom impression tray	2
Wax rim	5
BruxZir Full-Arch or implant denture transfer/wax setup try-in.....	5
BruxZir Full-Arch or implant denture wax setup reset	4
BruxZir Full-Arch or implant denture wax setup to finish.....	6
CAD/CAM-Milled Implant Bar	7
Implant verification jig	4
Wax setup try-in, implant verification jig and custom tray	11
BruxZir Full-Arch Implant Prosthesis finished	8
BioTemps Provisionals	
BioTemps Provisionals.....	5
BioTemps cement over implant/cast-metal substructure/ screw-retained over implant.....	6
Custom Healing Components	
Custom healing abutment with impression coping.....	3
Custom temporary abutment with impression coping.....	5
Prosthetic stent	3



Made in the USA

All rush cases must be prescheduled by calling **866-497-3692** before the case is shipped. Time of pickup and delivering may affect turnaround time.

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**.

By submitting this prescription for Implant Guided Surgery, the Dentist agrees that:

- They are qualified to perform the procedure documented in the treatment plan.
- They have reviewed and approved the treatment plan prior to treatment.
- All data provided to Glidewell Laboratories for the purposes of this prescription is accurate and approved by the Dentist.
- Glidewell Laboratories is not responsible for improperly fitted surgical guides.
- They assume full responsibility for the review and acceptance of the treatment plan and surgical guides.
- Delays in sending diagnostic records and/or delays in approving the plans will delay delivery of the Surgical Guide.
- They will be invoiced for the Digital Treatment Plan when submitted to the Dentist for approval.
- Cases not approved within 30 days will be returned to the Dentist (applies to physical products only).
- They have the appropriate guided surgery instrumentation for the specific implant requested.

DIGITAL TREATMENT PLANNING AND GUIDE FABRICATION AVAILABLE FOR THE FOLLOWING GUIDED SURGERY SYSTEMS

Glidewell Direct
Hahn™ Guided
Surgery System

Nobel Biocare
NobelGuide®

BIOMET 3i™
Navigator®

DENTSPLY Implants
ASTRA TECH
OsseoSpeed
TX Implant System

Straumann®
Guided Surgery
System

CAMLOG®
Guide System

Zimmer Dental
Tapered Screw-Vent®
Guided Surgery System

*Hahn Tapered Implant is a trademark of PrismaDent Dentalcraft, Inc.
All other trademarks are property of their respective owners.*