

IMPLANT FIXED RX



4141 MacArthur Blvd. • Newport Beach, CA 92660
800-839-9755 • Fax 800-411-9722 • 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 Indicate implant system _____
Indicate implant diameter _____ mm
☐ Please order all implant components for this case



SHADE INSTRUCTIONS



Tooth No. _____

Final Shade _____

Occlusal Staining: ☐ Light* ☐ Med ☐ Dark ☐ None

SELECT RESTORATION TYPE

☐ Crown ☐ Splinted Crowns ☐ Bridge

CEMENT-RETAINED RESTORATIONS

- | | |
|---|---|
| <input type="checkbox"/> BruxZir Full-Strength* (1,150 MPa) | <input type="checkbox"/> IPS e.max (posterior) |
| <input type="checkbox"/> NEW! BruxZir Esthetic (870 MPa) | <input type="checkbox"/> Obsidian All-Ceramic |
| <input type="checkbox"/> Clinical Zirconia | <input type="checkbox"/> Obsidian Fused to Non-Precious |
| <input type="checkbox"/> CZ-Tuff | <input type="checkbox"/> Obsidian Fused to Noble |
| <input type="checkbox"/> IPS e.max (anterior) | <input type="checkbox"/> Obsidian Fused to WHN |

SCREW-RETAINED RESTORATIONS

- | | |
|---|--|
| <input type="checkbox"/> BruxZir Full-Strength* (w/Ti-Base) | <input type="checkbox"/> Obsidian Fused to Noble |
| <input type="checkbox"/> NEW! BruxZir Esthetic (w/Ti-Base) | <input type="checkbox"/> Obsidian Fused to WHN |
| <input type="checkbox"/> IPS e.max (w/Ti-Base) | <input type="checkbox"/> Clinical Zirconia (w/Ti-Base) |
| <input type="checkbox"/> Obsidian All-Ceramic (w/Ti-Base) | <input type="checkbox"/> CZ-Tuff (w/Ti-Base) |

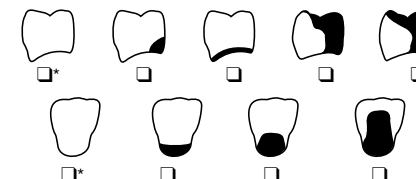
CONTOUR AND OCCLUSION DESIGN

Embrasures: ☐ Closed* ☐ Open
Occlusion: ☐ Light* ☐ Ideal ☐ Open _____ mm ☐ Out
Contacts: ☐ Broad & Tight* ☐ Pinpoint ☐ Light

RESTORATION PONTIC DESIGN



RESTORATION METAL DESIGN



*Standard unless specified otherwise

IF NO OCCLUSAL CLEARANCE

- ☐ Call doctor ☐ Spot opposing ☐ Metal occlusion
☐ Metal island ☐ Make this a permanent note in my master file

SELECT FINAL CUSTOM ABUTMENT

- | | |
|--|---|
| Choose Material | Choose Abutment |
| <input type="checkbox"/> Titanium* | <input type="checkbox"/> Glidewell* |
| <input type="checkbox"/> Gold-Colored Titanium | <input type="checkbox"/> BIOMET 3i Encode |
| <input type="checkbox"/> Zirconia w/Ti-Base | |
| <input type="checkbox"/> Gold Alloy | |

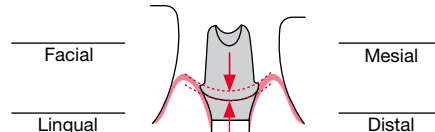
☐ Prepare existing abutment

See reverse for supported implant systems

PARALLEL ABUTMENTS

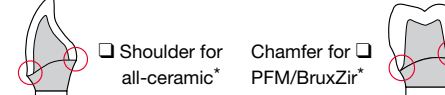
- ☐ No ☐ Yes (indicate which abutments will have restorations splinted together for insertion)

ABUTMENT MARGIN DEPTH

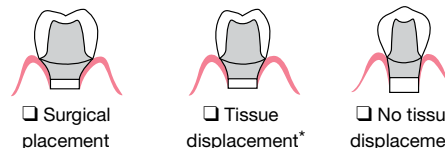


If left blank, default values will be used

ABUTMENT MARGIN DESIGN



ABUTMENT EMERGENCE PROFILE



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

Custom Abutments and Crowns

Days in Lab

Custom abutment.....	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

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



**All Restorations
Made in the USA**

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.

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 glidewell dental.com/policies-and-warranties.

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®*
ASTRA TECH Implant System® EV*

Glidewell Direct
Hahn™ Tapered Implant System†
Inclusive® Tapered mplant System*

HIOSEN®
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®*

*Manufactured using Inclusive® components. †Manufactured using original equipment manufacturer (OEM) components. Inclusive is a registered trademark of PrismaDentalcraft, Inc. Hahn Tapered Implant is a trademark of PrismaDentalcraft, Inc. All other trademarks are property of their respective owners. For Dentium implant systems, only titanium custom abutments are available.