

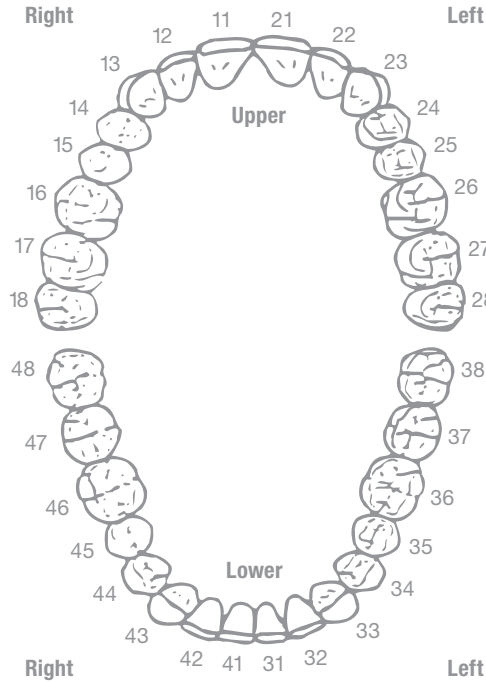


Carrera 70h #116-35, Morato • Bogotá, Colombia  
 316-842-2926 • mail@glidewell dental.co • co.glidewell dental.com

Dr. Name \_\_\_\_\_ Phone # \_\_\_\_\_  
 Patient Name \_\_\_\_\_ Acct. # \_\_\_\_\_  
First Last  
 Address \_\_\_\_\_  
 Email \_\_\_\_\_ **Deliver by 5 p.m. on** \_\_\_\_\_  Call before starting case

Enclosed with Case:  Impressions  Models  Bite  Photos  Other: \_\_\_\_\_ Tests:  Yes  No

**Rx** **SPECIFIC INSTRUCTIONS**  
*NOTE: Please send a study model on all work involving anterior teeth.*



**SHADE INSTRUCTIONS**



Tooth No. \_\_\_\_\_  
 Stump Shade \_\_\_\_\_  
 Final Shade \_\_\_\_\_  
 (Required for BruxZir Esthetic)

**OCCLUSAL STAINING**

None  Light\*  Medium  Dark

**PONTIC DESIGN**



**IF NO OCCLUSAL CLEARANCE**

Call doctor  
 Spot opposing  
 Make this a permanent note

**ZIRCONIA RESTORATIONS**

BruxZir Full-Strength\* (1,150 MPa)  
 **NEW!** BruxZir Esthetic (870 MPa)  
 Crown  Bridge  
 Inlay/Onlay  Veneer

**BITE SPLINTS**

Upper\*  Lower  
**Color options:**  
 Comfort H/S Bite Splint (hard/soft)  
 Clear\*  Blue  Pink  
 Comfort Bite Splint (hard)  
 Clear\*

**TEMPORARIES**

BioTemps Provisionals (PMMA)  
 Diagnostic Wax-Up  
 Zirconia Coping

**PLAYSAFE MOUTHGUARDS**

Junior  
 Light  
 Light Pro  
 Light Medium  
 Heavy  
 Heavy Pro  
 Helmet strap \_\_\_\_\_ **Specify color(s) on Rx**  
**Name** \_\_\_\_\_

Signature \_\_\_\_\_

Submission of this Rx constitutes agreement with limited warranty terms and conditions.  
 See reverse for details.

License \_\_\_\_\_ Date \_\_\_\_\_

## TERMS AND WARRANTY INFORMATION



**Made with materials from the United States**

*We honor VISA, MASTERCARD and AMEX.*

**TERMS:** Cost of collection of any account will be paid by the customer. All accounts are payable within 15 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 Colombia ("the lab") 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 [co.glidewell.com/sobre-nosotros/politicas-garantias](http://co.glidewell.com/sobre-nosotros/politicas-garantias).

**PRIVACY POLICY.** The data that is provided will be treated in compliance with Law 1581 of 2012, General Regime for the Protection of Personal Data of Colombia. Patient names and data will be treated as a reference code and not as proper names or personal data. Available to you on our website: [co.glidewell.com](http://co.glidewell.com)



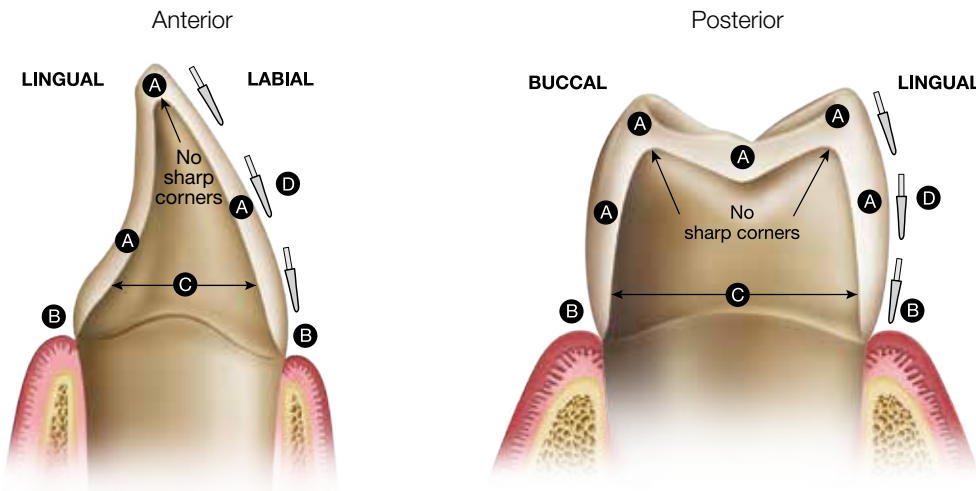
• BruxZir® Restorations



- BioTemps® Provisionals
- Bite Splints
- Mouthguards

**All rush cases must be prescheduled** by calling **316-842-2926** before the case is shipped.  
Time of pickup and delivery may affect turnaround time.

## PREPARATION GUIDELINES



### BruxZir Esthetic

- A. 1.25 mm ideal reduction (0.7 mm minimum)
- B. Chamfer or modified shoulder margins preferred
- C. Axial walls must be convergent (avoid undercuts)
- D. Preparation should be cut in three planes
- E. To achieve optimal impression quality, gingival retraction is necessary for preparations with subgingival or equigingival margins

### BruxZir Full-Strength

- A. 1.0 mm ideal reduction (0.5 mm minimum)
- B. Chamfer or shoulder margins preferred. Feather-edge OK
- C. Axial walls must be convergent (avoid undercuts)
- D. Preparation should be cut in three planes
- E. To achieve optimal impression quality, gingival retraction is necessary for preparations with subgingival or equigingival margins