



4141 MacArthur Blvd. • Newport Beach, CA 92660
800-407-3326 • Fax 800-411-9722 • glidewelldental.com

SPECIAL RX OFFER

- Carefully package your case, including this Rx, and tape box securely closed.
 - To schedule shipping pickup, call us at **800-854-7256**.
 - Please allow five working days in lab. Limit two Rxs per account.
- *Price does not include shipping or applicable taxes. Not valid with any other offer.
†Price is for two appliances for same case*

Dr. Name _____ Acct. # _____

Phone # _____ Email _____

Address _____
City/State/ZIP

Patient ID/Name _____ Male Female Age ____ **Deliver by 5 p.m. on** _____
First Last

ENCLOSED WITH CASE

- Impressions Models Bite
- Other: _____

*Upper and lower impressions or models
with bite registration required*

WEB RX

See reverse for time-saving clinical procedures

Save \$97*
when you buy 2
Silent Nite Sleep
Appliances



Expires 12/31/2020



EVERYDAY SPECIAL PRICE

Silent Nite Sleep Appliance

- 1 appliance **\$147***
- Buy 2 and Save† – **MOST POPULAR**
1 for home, 1 for travel..... **\$197***

NEW! OASYS Hinge Appliance

EMA

dreamTAP

TAP 3 TL

TAP

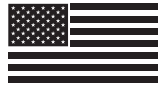
Scan & Save Services

- Digital Scan Model
- Print digitally scanned model
for reorder

*Price is for two appliances for same case

Signature _____ License # _____ Date _____
(see reverse for limited warranty details)

TERMS AND WARRANTY INFORMATION



All Restorations
Made in the USA

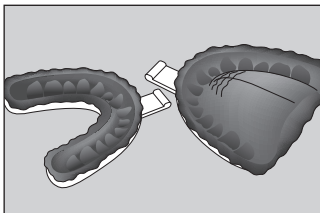
We honor VISA, MASTERCARD, AMEX and DISCOVER.

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.

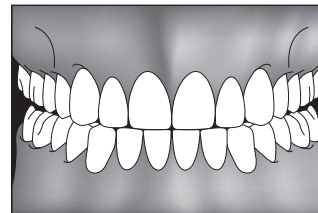
NO-FAULT REMAKE POLICY: Glidewell Laboratories is pleased to process all remakes or adjustments at no additional charge if requested within the warranty period and accompanied by the return of the original appliance.

LIMITED WARRANTY/LIMITATION OF LIABILITY. For warranty terms and conditions and limitation of liability, visit glidewelldental.com/policies-and-warranties.

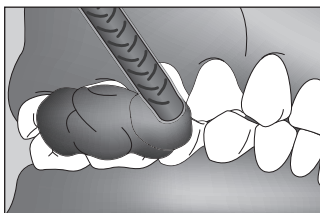
BITE REGISTRATION GUIDE FOR SLEEP APPLIANCES



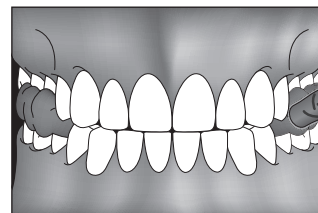
STEP 1: Take full-arch impressions of the maxilla and the mandible using VPS impression material.



STEP 2: Instruct the patient to move teeth into a comfortable protrusive position. If a protrusion gauge is not available, an edge-to-edge position is recommended.



STEP 3: With the patient in this protrusive position, inject bite registration material into the posterior opening of both quadrants.



STEP 4: Allow the material to fully set. Send the full-arch impressions, bite registration and a completed Rx to the lab for fabrication of the appliance.