



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

SPECIAL RX OFFER*

Use this Rx to receive one **FREE Silent Nite Sleep Appliance**.

1. Carefully package your case, including this Rx, and tape box securely closed.
2. To schedule shipping pickup, call us at **800-854-7256**.
3. Please allow three working days in lab.

OFFER EXPIRES OCTOBER 31, 2022

*Price does not include shipping or applicable taxes. Web offer can only be used a maximum of one time per account, for customers who have not prescribed a Silent Nite appliance within 12 months.

Dr. Name _____ Acct. # _____

Phone # _____ Email _____

Address _____
City/State/ZIP

Patient ID/Name _____ Age _____
First Last

Deliver by 5 p.m. on _____

ENCLOSED WITH CASE

☐ Impressions ☐ Models ☐ Bite

☐ Other: _____

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

WEB Rx



**Silent Nite stops snoring
or your money back[†]**

ONE APPLIANCE

Silent Nite
 (only 3 days in lab) ~~\$157*~~ **FREE***

☐ **Scan & Save Services**

☐ Digitally scan model..... **\$10***

☐ Print digitally scanned
 model for reorder **\$27***

One free Silent Nite



* H K X U 5 2 *

Signature _____

License # _____ Date _____

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

TERMS AND WARRANTY INFORMATION

We honor VISA, MASTERCARD, AMEX and DISCOVER.

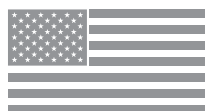
TERMS: Cost of collection of any account will be paid by the customer. All accounts are payable within 30 days of statement date. **Accounts not paid within the stated terms will be subject to COD status and a late charge of 2 percent of the unpaid balance.** Prices subject to change without notice. Rx must be enclosed with original case submission.

NO-FAULT REMAKE POLICY: Glidewell 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.com/policies-and-warranties.

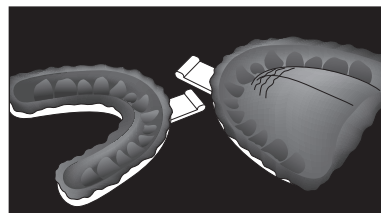


- Mandibular Advancement Devices

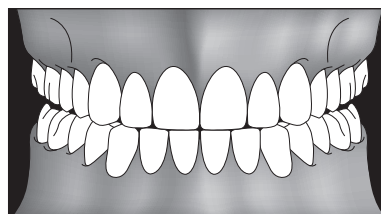


All Restorations
Made in the USA

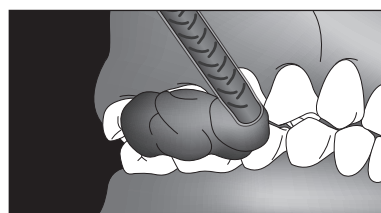
BITE REGISTRATION GUIDE FOR SLEEP APPLIANCES



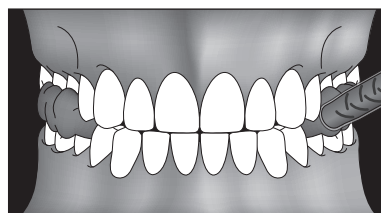
STEP 1: Take full-arch impressions of the maxilla and the mandible using VPS impression material.



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.

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.