BRUXZIR IMPLANT PROSTHESIS RX

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WEB R_x

Implant Information

Tooth #	Diameter/Platform	Implant System
	mm	

Dr. Name				
Phone #		Acct. #		
Patient ID/Name				
Address/Email	First	Last		
Deliver by 5 p.m. on	See Reverse for Working Times	Enclosed with case: Impressions		
🗅 Impressions 🛛 🗋 Models	🗅 Bite 🛛 Photos 🗋 Other:			

WEBR			Upper D Lower Tooth Shade	SPECIAL OFFER* 1. Carefully package your case, including this Rx, and tape box securely closed.
Implant Information Tooth # Dian	Diameter/Platform mm mm	Diameter/Platform Implant System mm mm	Gingival Shade GOO (Lightest) GG (Medium) GOO (Light) GG (Darke) GI (Standard) GG (Darkest) Stage of Service Needed: Wax rim Implant verification jig (IVJ) Wax setup Reset Provisional try-in implant prosthesis Final BruxZir prosthesis	 2. To schedule shipping pickup, call us at 800-854-7256. See reverse for in-lab working times. 3. Use this Rx to receive a free patient education model (a \$740 value) with your first BruxZir Implant Prosthesis case. Note: Promo is offered while supplies last. Offer expires Dec. 31, 2022. *Price does not include shipping or applicable taxes. Limit one specially priced Rx per case. Promotion not valid with any other offer. Free patient education model offer is only valid if BruxZir Esthetic Implant Prosthesis case is completed in full. SELECT IMPLANT PROSTHESIS BruxZir Implant Prosthesis (Full-Strength)⁺ BruxZir Lifetime Warranty (Precision-milled solid zirconia with tooth and gingival tissue shade. NOTE Complete service includes provisional try-in implant prosthesis; a duplicate
			Comfort H/S Bite Splint (Additional fee applies) Free BruxZir Esthetic Implant Prosthesis Patient Education Model with clear base.	 provisional can be purchased for an extra fee.) BruxZir Esthetic Implant Prosthesis[†] BruxZir Lifetime Warranty (Precision-milled esthetic solid zirconia with tooth and gingival tissue shade. NOTE Complete service includes provisional try-in implant prosthesis; a duplicate provisional can be purchased for an extra fee.) Provisional Try-In Implant Prosthesis (Provisional with tooth and gingival tissue shade)
			* X N Q 9 6 6 *	Tooth Setup: Ideal Characterized Copy study model Copy existing denture Add lip support Masculine Feminine Age
Signature	Submission of this Rx constitutes	agreement with limited warranty t	erms and conditions. See reverse for details.	TISSUE SURFACE DESIGN
License # Date Date			 □ Convex[‡] □ Modified Convex □ Cover exposed implant □ Provide floss space 	

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.com/policies-and-warranties.



FLAT-RATE PRICE ON THE BRUXZIR® IMPLANT PROSTHESIS IS AVAILABLE FOR THE FOLLOWING IMPLANT SYSTEMS



Restorations for the implant systems above are fabricated using components manufactured by Prismatik Dentalcraft, Inc. Prices may vary for other other implant systems due to the need for original equipment manufacturer (OEM) components. Inclusive is a registered trademark of Prismatik Dentalcraft, Inc. Hahn Tapered Implant is a trademark of Prismatik Dentalcraft, Inc. All other trademarks are property of their respective owners.

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.

