

Dr. Name _____ Phone # _____

Acct. # _____ Patient ID/Name _____
First Last

Address/Email _____ Deliver by 5 p.m. on _____



Tooth No. _____

Stump Shade _____

Final Shade _____






PONTIC DESIGN



ANTERIOR METAL DESIGN



POSTERIOR METAL DESIGN

-  Full ceramic coverage
-  Ceramic with lingual metal collar*
-  360° metal hairline or _____mm
-  Metal occlusal excluding buccal cusp
-  Metal occlusal including buccal cusp

INSTRUCTION FOR BUCCAL MARGIN

- Metal-ceramic junction margin*
- Ceramic butt margin

OCCUSAL STAINING

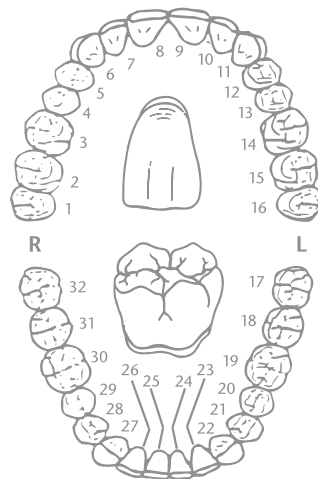
- None Light* Medium Dark

SCREW-RETAINED RESTORATIONS

- BruxZir Full-Strength* (w/ Ti-Base)
- IPS e.max (w/ Ti-Base)
- NEW!** BruxZir Esthetic (w/ Ti-Base)
- Obsidian Fused to White Noble
- Obsidian Fused to White High Noble

Enclosed with case: Impressions Models Bite Photos Other: _____ Try-In: Yes No

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



Implant System _____
 (if applicable)

Diameter _____
 (if applicable)

IF NO OCCLUSAL CLEARANCE

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

Place Shipping Airbill Tracking Sticker Here

Signature _____

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

License # _____ Date _____

CERAMIC TO METAL

- Obsidian Fused to Non-Precious*
- Obsidian Fused to White Noble
- Obsidian Fused to White High Noble
- Yellow High Noble (76.6% Au)

VIVANEER VENEER

- IPS e.max veneer*
- Layered IPS e.max veneer
- NEW!** BruxZir Esthetic veneer

FULL-CAST METAL

- Non-Precious
- Yellow Noble (41% Au)
- Yellow High Noble* (57.5% Au)

CUSTOM ABUTMENTS

- Titanium
- Zirconia w/ Ti-Base
- Prepare existing abutment

ALL-CERAMIC/COMPOSITE

- BruxZir Full-Strength* (1,150 MPa)
- NEW!** BruxZir Esthetic (870 MPa) (stump shade recommended for restorations less than 1.5 mm thick)
- IPS e.max
- Bilayered CZ
- Generic Zirconia
- Composite
- Maryland Bridge

PLAYSAFE MOUTHGUARDS

- Specify color(s) on Rx
- Upper* Lower
 -
 - Light Pro Medium*
 - Heavy

TEMPORARIES

- Hi-Tech Temps*
- Hi-Tech Temps with metal
- Diagnostic Wax-Up

BITE SPLINTS

- Upper* Lower
- Comfort H/S (hard, with soft reline)
- Soft Bite Splint
- CLEARsplint or day guard (self-adjusting, hard)

TERMS AND WARRANTY INFORMATION

We honor VISA, MASTERCARD, AMEX and DISCOVER.

All rush cases must be prescheduled by calling **800-395-8205** before the case is shipped. Time of pickup and delivery may affect turnaround time.

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: Smith-Sterling Dental 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.



- BruxZir® Restorations



- Custom Abutments



- All-Ceramic Restorations
- PFM Restorations
- Full-Cast Restorations



- Nightguards
- Bite Splints
- Mouthguards

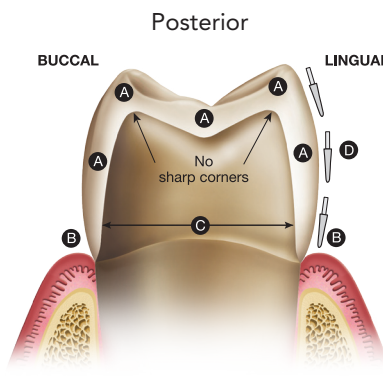
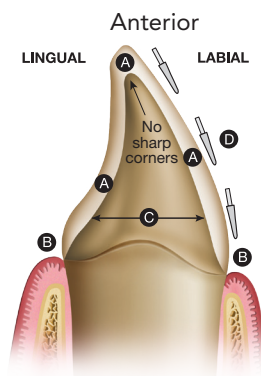


LIMITED WARRANTY/LIMITATION OF LIABILITY: For warranty terms and conditions and limitation of liability, visit smithsterling.com/pura-vida-warranty.



DENTISTS: There is no charge for one inbound and one outbound shipment per case. Additional shipments for die trims, bisque bake, coping or framework try-ins, reshades to a new shade, and oversized articulators will incur additional fees.

PREPARATION GUIDELINES



BruxZir Esthetic

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

BruxZir Full-Strength

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

FLAT-RATE PRICE ON CUSTOM ABUTMENTS AND SCREW-RETAINED CROWNS IS AVAILABLE FOR THE FOLLOWING IMPLANT SYSTEMS

BIOMET 3i™
Certain®

CAMLOG®
SCREW-LINE

DENTSPLY Implants
ANKYLOS® C/X
ASTRA TECH Implant System®
ASTRA TECH Implant System® EV

Glidewell Direct
Hahn™ Tapered Implant System
Inclusive® Tapered Implant System

HIOSSSEN®
HG System

MegaGen
AnyRidge® Implant System

Nobel Biocare
Brånemark System® RP
NobelActive®
NobelReplace®

Straumann®
Bone Level
Tissue Level

Zimmer Dental
Screw-Vent®

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