



2033 Swanson Ave. • Lake Havasu City, AZ 86403  
**800-321-1614 • Fax 855-250-2830**  
 newwestlab.com

Dr. Name \_\_\_\_\_ Phone # \_\_\_\_\_

Acct. # \_\_\_\_\_ Patient Name/ID \_\_\_\_\_  
First Last

Address \_\_\_\_\_ **Deliver by 5 p.m. on \_\_\_\_\_**

Enclosed with case:  Impressions  Models  Bite  Photos  Other: \_\_\_\_\_

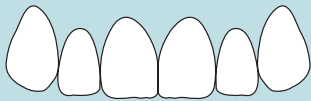
**ALL-CERAMIC & COMPOSITE**

- BruxZir Full-Strength\* [1,150 MPa]
- BruxZir Esthetic [870 MPa]  
(stump shade recommended for restorations less than 1.5 mm thick)
- IPS e.max \_\_\_\_\_ **Stump Shade**
- Composite

**PFM**

- Obsidian Fused to Non-Precious\*
- Obsidian Fused to White Noble
- Obsidian Fused to White High Noble

**SHADE INSTRUCTIONS**



Final Shade \_\_\_\_\_ **Indicate Shade Here**

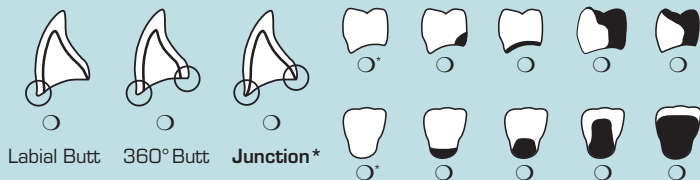
Stump Shade \_\_\_\_\_ **Indicate Shade Here**

Occlusal Staining:  Light\*  Med  Dark  None

**PONTIC DESIGN**



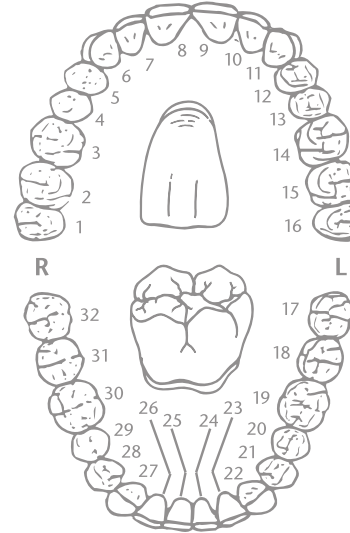
**MARGIN/METAL DESIGN**



**Rx**

**IF NO OCCLUSAL CLEARANCE**

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



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

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

**PROVISIONAL RESTORATIONS**

- Transition Crowns & Bridges  
 Abutment #(s) \_\_\_\_\_  
 Pontic #(s) \_\_\_\_\_ Total units \_\_\_\_\_
- Splinted units\*  Individual units
- Cement-on implant
- Screw-retained implant
- BioTemps Provisionals  
 Reinforcement:  
 None  Wire\*  Fiber
- Perio treatment: Prepare tooth below gingival on tooth #(s) \_\_\_\_\_ by \_\_\_\_\_ mm
- Pontic site healing: Prepare ovate socket on tooth #(s) \_\_\_\_\_ by \_\_\_\_\_ mm

**FULL-CAST**

- Noble-Cast 60\*
- Noble-Cast 45
- Non-Precious

**CUSTOM ABUTMENTS**

- Titanium\*  Zirconia w/Ti-Base
- Prepare existing abutment
- Implant System \_\_\_\_\_
- Diameter \_\_\_\_\_

**NIGHTGUARDS/BITE SPLINTS**

- Upper  Lower
- Comfort H/S [hard, with soft relines]\*
- Semi-hard EVA  Soft EVA
- Bleach tray
- CLEARsplint or day guard  
(self-adjusting, hard)
- Clear ortho retainer
- Essix retainer [one tooth]
- Clear-Lock Retainers  
 Set of 2  Set of 4  Set of 6

**PLAYSAFE MOUTHGUARDS**

- Jr  Lt  Lt Pro
- Med  Hvy  Hvy Pro
- Helmet Strap  
(available in red or black)
- Name \_\_\_\_\_

*Specify color(s) on Rx*

**VIVANEER VENEERS**

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

## 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:** New West 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 newwestlab.com/warranty](http://visit.newwestlab.com/warranty).



- BruxZir® Restorations



- Custom Abutments



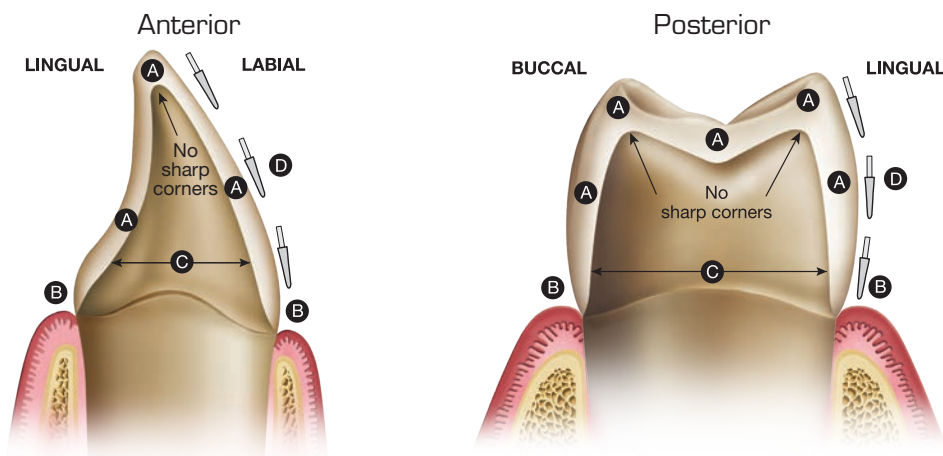
- All-Ceramic Restorations
- PFM Restorations
- Full-Cast Restorations



- Nightguards
- Bite Splints
- Mouthguards

All rush cases must be prescheduled by calling **800-321-1614** 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

## CUSTOM ABUTMENTS AND SCREW-RETAINED CROWNS ARE COMPATIBLE WITH THE FOLLOWING IMPLANT SYSTEMS

BIOMET 3i™  
Certain®\*

CAMLOG®  
SCREW-LINE™

Dentium®  
Implantium®†  
SimpleLine® II†  
SuperLine®†

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\*

Keystone Dental  
PrimaConnex®†

MegaGen  
AnyRidge®  
Implant System\*

Neoss®  
Neoss®  
Implant  
System†

Nobel Biocare  
Brånemark System® RP†  
NobelActive®\*  
NobelReplace®\*

Straumann®  
Bone Level†  
Tissue Level\*

Sweden & Martina  
Premium†  
Shelta†

Zimmer Dental  
Screw-Vent®\*

\*Manufactured using Inclusive® components. †Manufactured using original equipment manufacturer (OEM) components. Inclusive is a registered trademark of Prismatic Dentalcraft, Inc. Hahn Tapered Implant is a trademark of Prismatic Dentalcraft, Inc. All other trademarks are property of their respective owners. For Dentium implant systems, only titanium custom abutments are available.