

800-411-9723 Fax 800-471-9761 www.bdlprosthetics.com

2181 Dupont Dr., Irvine, CA 92612

# Special Bite Splint Rx Offer\*

- 1. Carefully package your case, including this Rx, and tape box securely closed.
- 2. To schedule overnight shipping pickup, call us at 800-411-9723.
- 3. Save \$20 on one bite splint with this special offer. Use all four prescriptions for one appliance each for a total savings of \$80.

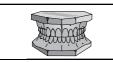
Offer expires July 31, 2015. \*This personalized prescription is intended for the dentist and account number listed. It is nontransferable. Price does not include round-trip overnight shipping (\$14 per box) or applicable taxes. No copies accepted. Limit one specially priced Rx per case. Special pricing not valid with any other offer.

AUTHORIZATION FOR LABORATORY PROCEDURE	ENCLOSED WITH CASE
Dr. Name Mrs. Joan Newcomb Acct. # 10-11111Z	☐ Impressions ☐ Models ☐ Bite ☐ Other:
Patient Name	By Mail_
COUPON CODE: \$20 Off Comfort Bite Splint — 7/31/2015 *DYA803*	Upper and lower impressions or models with bite registration required
11 4 2 14 2 15 16 17 18 19 19 19 19 19 19 19 19 19 19	CHOOSE ONE  ☐ Colored Comfort H/S™ Bite Splint (hard/soft)  \$64
R L 32 7 7 17 18	☐ Clear Comfort H/S™ Bite Splint (hard/soft)  \$59
All Restorations Made in the USA  30 29 20 21 21 21 22 21 21 22 21	Colored Comfort Bite Splint (hard) \$54you pay \$34* O Upper O Lower Color options: O Turquoise
ignature License #  (see reverse for limited warranty details)	☐ Clear Comfort Bite Splint (hard) \$49you pay \$29* ☐ Upper ☐ Lower Color options: ☐ Clear

## IMPRESSION AND BITE REGISTRATION GUIDELINES



impression materials.



powder ratio before sending to relation. lab with Rx.



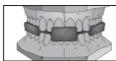
Take full-arch upper and lower Pour wet alginate impressions A quick bite technique is to place impressions using alginate or VPS with dental stone following the two cotton rolls behind the cusmanufacturer's proper water-to- pids and guide patient into centric



quadrants.



tion, inject bite registration into anterior opening to capture a com- construction bite. Note the openthe posterior opening of both plete open construction bite at ing between anterior teeth. centric relation.



With patient in open centric rela- Next, inject bite registration into Stone models mounted with open

### FOR LAB USE ONLY

### TELEPHONE CALL RECORD

DR	ACCT. #
PATIENT NAME	
RE:	
RESULT	
DATE DUE IN OFFICE	
DATE OF CALL	INITIALS

## TERMS AND WARRANTY INFORMATION

Please allow full working time for each product selected. Working times are NOT guaranteed and do NOT include weekends or holidays.

Only \$7 shipping per box EACH way (contiguous U.S. only; shipping charge varies for Alaska, Hawaii and Puerto Rico).

#### We bonor 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.

LIMITED WARRANTY/LIMITATION OF LIABILITY. BDL Prosthetics ("the lab") warrants that all dental devices (a "device") are made according to your specification and approval in the belief that the device will be useful and MAKES NO OTHER WARRANTIES INCLUDING. BUT NOT LIMITED TO, ANY IMPLIED WARRANTY OF MERCHANTABILITY OR FITNESS FOR A PARTICULAR PURPOSE. Subject to the return of a device that is placed and then fails, the lab will repair or replace the device without charge for the cost of materials and workmanship or refund the original price paid, at the lab's option, as follows: (1) screw-retained implant abutments up to 20 years (including replacement of a device that was made by the lab that was attached to said abutments and including an Inclusive® Tapered titanium dental implant upon request at no extra charge); (2) porcelain to metal, all ceramic, all metal, single-unit inlay, onlay and crown composite resin final prosthetics, and screw-retained crowns and implant bars, up to seven years; (3) composite resin bridges (excluding Maryland and inlay/onlay bridges) up to five years; (4) Transition Crowns and Bridges® up to two years; (5) thermoformed appliances and splints if the failure is due to defects in materials or workmanship, provisionals, composite resin Maryland and inlay/ onlay bridges, up to six months; (6) Smile Transitions™ and all other dental devices up to 30 days if the failure is due to defects in materials or workmanship. This Warranty is exclusively for your benefit, is not transferable and does not extend to any patients. You agree to pay all other costs of adjustment, repair and replacement of a device. Except where prohibited by law, the lab WILL NOT BE LIABLE FOR ANY LOSS OR DAMAGES ARISING FROM THE USE OF A DEVICE, WHETHER DIRECT, INDIRECT, SPECIAL, INCIDENTAL OR CONSEQUENTIAL, regardless of the theory asserted, including warranty, contract, negligence or strict liability and if such disclaimer is not permitted by law, the duration of any implied warranty is limited to 90 days from the date of delivery. In the event of a dispute and absent an amicable resolution the parties mutually agree to waive class actions in favor of mandatory individual arbitration of claims under this limited warranty in and in accordance with the laws of California. The lab does not guarantee the performance of independent carriers.