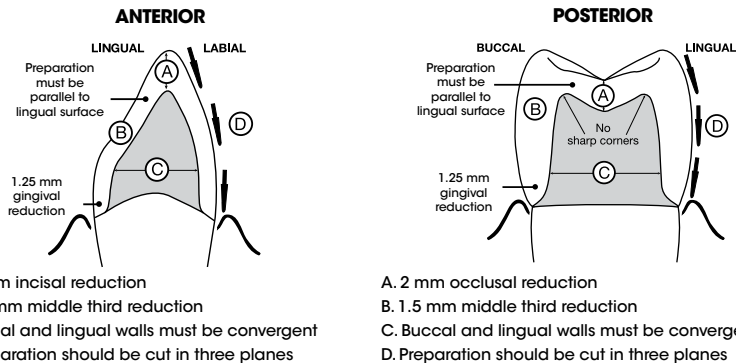


CROWN PREPARATION GUIDELINES



INCLUSIVE® CUSTOM TITANIUM AND ZIRCONIA W/TI-BASE ABUTMENTS ARE COMPATIBLE WITH THE FOLLOWING IMPLANT SYSTEMS

BIOMET 3i™ Certain®	CAMLOG® SCREW-LINE	DENTSPLY Implants ASTRA TECH Implant System®	Glidewell Direct Inclusive® Tapered Implant System	Keystone Dental PrimaConnex®
Neoss® Neoss®	Nobel Biocare Brånemark System® RP NobelActive® NobelReplace®	Straumann® Bone Level Tissue Level	Zimmer Dental Screw-Vent®	

INCLUSIVE® CUSTOM ALL-ZIRCONIA ABUTMENTS ARE COMPATIBLE WITH THE FOLLOWING IMPLANT SYSTEMS

BIOMET 3i™ Certain®	Glidewell Direct Inclusive® Tapered Implant System	Nobel Biocare NobelReplace®	Zimmer Dental Screw-Vent®
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Inclusive is a registered trademark of PrismaDent Dentalcraft, Inc. All other trademarks are property of their respective owners.

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

We honor VISA, MASTERCARD, AMEX and DISCOVER.

TERMS: 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. Smith-Sterling Dental Laboratories ("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 of 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) 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; (5) 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 Florida. The lab does not guarantee the performance of independent carriers.

DENTISTS: There is no charge for one inbound and one outbound shipment per case.

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8880 NW 20th St. • Ste. C • Doral, FL 33172

800-395-8205 • Fax 800-471-9762

www.smithsterling.com • mail@smithsterling.com

Special Implant Restoration Rx Offer**

- Carefully package your case, including this Rx, and tape box securely closed.
- To schedule overnight shipping pickup, call us at **800-395-8205**.
- Send this Rx with your next ceramic crown over implant case to save \$45 per crown or implant abutment (up to 3 units).

Offer expires June 30, 2015

***This personalized prescription is intended for the dentist and account number listed below. It is nontransferable. Limit one special offer per case. Offer applicable for a maximum of four specially priced Rx's per account for specified products only. No copies accepted. Special pricing not valid with any other offer.*

Dr. Name Mrs. Joan Newcomb

Acct. # 10-11111Z

Patient Name _____ ☐ Male ☐ Female

Deliver by 5 p.m. on ☐ Call before starting case



COUPON CODE: \$45 off Crown Over Implant Abutment — 06/30/2015 ***WUG239***
\$45 off Implant Abutment — 06/30/2015 ***GAB049***



All restorations are handcrafted using FDA-registered dental alloys and ceramics.

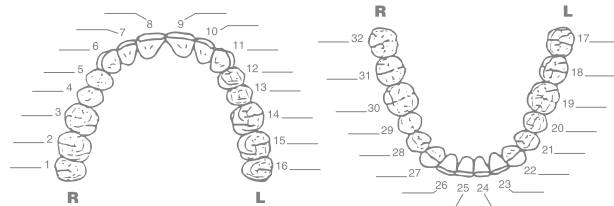
*U.S. Food and Drug Administration
Registration No. 3004749721*

Signature _____ (see reverse for limited warranty details)

License # _____

Indicate implant system

Indicate diameter below



CERAMIC SHADE INSTRUCTIONS



Indicate Shade Here

Occlusal Staining: ☐ Light* ☐ Med ☐ Dark ☐ None

SELECT ABUTMENT TYPE INCLUSIVE CUSTOM IMPLANT ABUTMENTS

- ☐ Titanium Abutment* ☐ All-Zirconia Abutment
☐ Zirconia w/ Ti-Base ☐ Prepare existing abutment
See reverse for implant systems supported

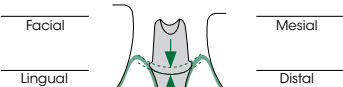
SCREW-RETAINED RESTORATIONS

- ☐ BruxZir (w/ Ti-Base) ☐ IPS e.max (w/ Ti-Base)

PARALLEL ABUTMENTS

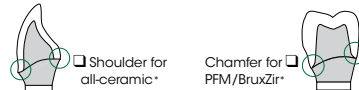
- ☐ No ☐ Yes (Indicate which abutments will have restorations splinted together for insertion.)

ABUTMENT MARGIN DEPTH

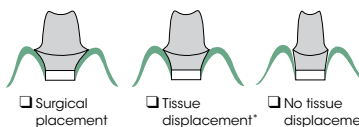


If left blank, default values will be used.

ABUTMENT MARGIN DESIGN



ABUTMENT EMERGENCE PROFILE



SELECT RESTORATION TYPE

- ☐ Crown ☐ Splinted Crowns ☐ Bridge

CEMENT-RETAINED PFMS AND ALL-CERAMICS

- ☐ BruxZir Solid Zirconia ☐ IPS e.max ☐ PrismaDent CZ
☐ Non-Precious PFM ☐ Semi-Precious PFM

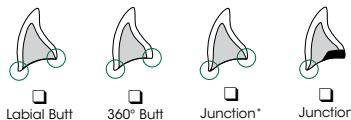
CERAMIC CONTOUR DESIGN

- Embrasures: ☐ Open ☐ Closed*
Occlusion: ☐ Heavy ☐ Light*
Contacts: ☐ Pinpoint ☐ Light ☐ Broad & Tight*

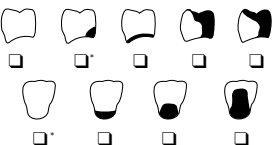
CERAMIC PONTIC DESIGN



CERAMIC MARGIN DESIGN



CERAMIC METAL DESIGN



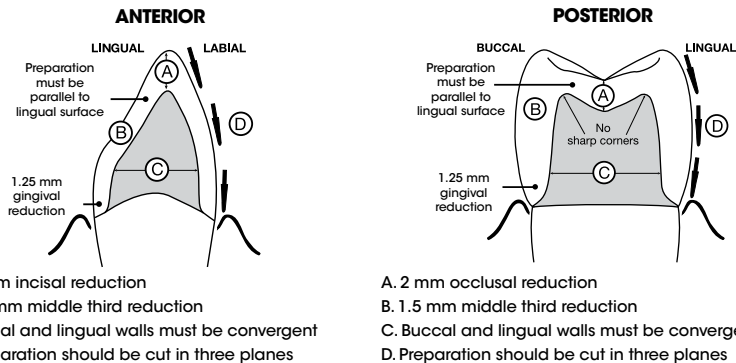
IF NO OCCLUSAL CLEARANCE

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

Laboratory Use Only

By: _____ Mail: _____

CROWN PREPARATION GUIDELINES



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Acct. # 10-11111Z

Patient Name _____ ☐ Male ☐ Female

First Last

Deliver by 5 p.m. on ☐ Call before starting case



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\$45 off Implant Abutment — 06/30/2015 ***GAB049***



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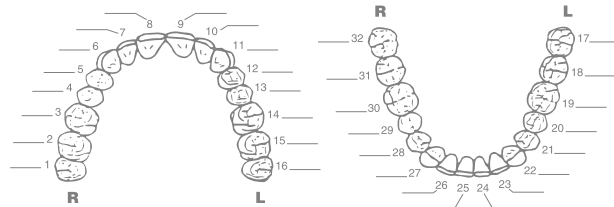
*U.S. Food and Drug Administration
Registration No. 3004749721*

Signature _____ (see reverse for limited warranty details)

License # _____

Indicate implant system

Indicate diameter below



CERAMIC SHADE INSTRUCTIONS



Indicate Shade Here

Occlusal Staining: ☐ Light* ☐ Med ☐ Dark ☐ None

SELECT ABUTMENT TYPE INCLUSIVE CUSTOM IMPLANT ABUTMENTS

- ☐ Titanium Abutment* ☐ All-Zirconia Abutment
☐ Zirconia w/ Ti-Base ☐ Prepare existing abutment
- See reverse for implant systems supported*

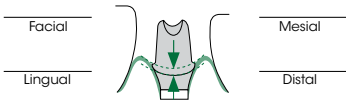
SCREW-RETAINED RESTORATIONS

- ☐ BruxZir (w/ Ti-Base) ☐ IPS e.max (w/ Ti-Base)

PARALLEL ABUTMENTS

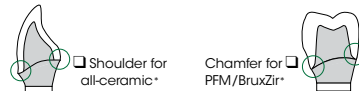
- ☐ No ☐ Yes (Indicate which abutments will have restorations splinted together for insertion.)

ABUTMENT MARGIN DEPTH

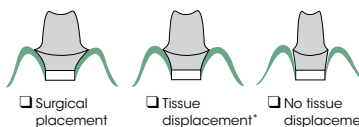


If left blank, default values will be used.

ABUTMENT MARGIN DESIGN



ABUTMENT EMERGENCE PROFILE



SELECT RESTORATION TYPE

- ☐ Crown ☐ Splinted Crowns ☐ Bridge

CEMENT-RETAINED PFMS AND ALL-CERAMICS

- ☐ BruxZir Solid Zirconia ☐ IPS e.max ☐ PrismaTek CZ
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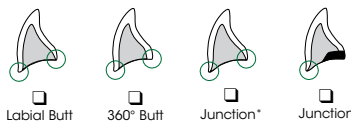
CERAMIC CONTOUR DESIGN

- Embrasures: ☐ Open ☐ Closed*
Occlusion: ☐ Heavy ☐ Light*
Contacts: ☐ Pinpoint ☐ Light ☐ Broad & Tight*

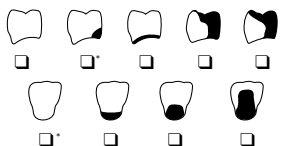
CERAMIC PONTIC DESIGN



CERAMIC MARGIN DESIGN



CERAMIC METAL DESIGN



*Standard unless specified otherwise

IF NO OCCLUSAL CLEARANCE

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

Laboratory Use Only

By: _____ Mail: _____