



891 Graham Rd Suite C • Cuyahoga Falls, OH 44221
 877.622.3533 • Fax 234.407.4007
 mabeldental.com

Lab Name _____ Phone # _____ Deliver by 5 p.m. on See Next Page For Working Times

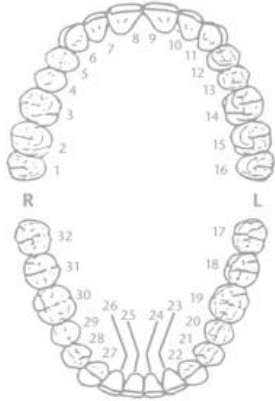
Address _____ Email _____

Patient ID/Name _____ Male Female _____ Age _____

First Last

Enclosed with Case: Impressions Models Bite Photos Other: _____

Send case photos to: support@mabeldental.com or upload to DDX



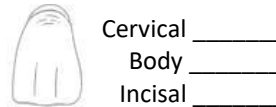
Please mark all teeth to be extracted and replaced
 Dark

Signature _____ Date _____

Submission of this Rx constitutes agreement with limited warranty terms and conditions. See page 2 for details.

Teeth #s _____

SHADE _____



OCCUSAL STAINING

- None* Light
- Medium

PMMA TEMP CROWN

PORCELAIN FUSED TO METAL

- Non-Precious* Noble
- Yellow High Noble White High Noble

FULL-CAST

- Non-Precious 2% Yellow Gold*
- 40% Yellow Gold 40% White Gold
- 60% Yellow Gold

METAL DESIGN

- Traditional PFM (with Lingual Band)*
- Butt Shoulder with Lingual Band
- Butt Shoulder no lingual Band
- All Porcelain Shoulder 360°
- Metal Collar 360° Show No Metal

CONTACT STYLE

- Light Normal* Heavy/Tight

OCCUSAL CLEARANCE

- In Occlusion* Light Occlusion
- Out of Occlusion Foil on Opposing

IF NO OCCUSAL CLEARANCE

- Email* Metal occlusal
- Trim opposing Metal island
- Reduction coping: Resin* Metal
- Make this a permanent note

ZIRCONIA

- Full Contour* Multi-Layered
- Porcelain fused to Zirconia

E.MAX

- IPS e.max CAD/CAM* IPS e. max Veneer
- Inlay Onlay

STUMP SHADE _____ required

CUSTOM ABUTMENTS

- Titanium* Gold Tone Titanium
- Gold Alloy Zirconia w/ Ti-Base
- Prepare existing abutment OEM Custom

Implant System _____

Implant Diameter _____ mm

- Cement Retained* Screw-Retained

- Splinted* Individual Units

Abutment #s _____ Pontic #s _____

Total Units _____

PONTIC DESIGN



DENTURES | **FLEXIBLE PARTIALS**

- Upper Lower

- Denture Immediate Flexible TCS
- Digital Denture: 3D-Print (no try-in) Milled
- Custom tray Bite block
- Set-up try-in Reset Finish

Tooth Setup Ideal Characterized
 Study Model

TOOTH SHADE

Shade _____ Mould _____
 8 in-lab days all stages

Prestige – use Removable Rx

METAL PARTIALS

- Upper Lower

Frame Type: SLM* Titanium Vitallium 2000

Duplicate Model: Yes No*

Add Esthetic Clasps: Flexible Tooth-Colored

- Custom tray Frame try-in Frame w/ bite block
- Frame w/ set-up try-in Reset Finish

DURACETAL | **VISICLEAR** **PARTIAL**

- Upper Lower

- Custom tray Frame try-in Frame w/ bite block
- Frame w/ set-up try-in Reset Finish

ACRYLIC FLIPPERS

- Upper Lower

Wrought Wire Clasps: Yes No*

TISSUE GUM SHADE

ACRYLIC: Original* Light Light Reddish Dark

FLEXIBLE: Std* Light Light Dark Dark Natural

NIGHTGUARDS | RETAINERS

- Upper* Lower

- Hard/Soft Impak H/S Milled Soft Hard
- 3D Printed (flexible hard)
- Hawley Retainer Essix Space Maintainer

REPAIRS

- Reline Soft Liner Add Teeth Replace Teeth
- Fracture Rebase/Jump Add Mesh Add Wire
- Add Clasp: Cast* Wire Itsoclear Flexible
- Tooth Colored: A1 A2 A3 A3.5 B1

SNORING | SLEEP APNEA DEVICES

Upper & lower models with bite required

- Silent Nite EMA TAP 3L flexTAP
- dreamTAP OASYS Hinge Scan/Save File

CLEAR ALIGNERS – SMILE SHAPERS

see separate Rx online

SPORTS MOUTHGUARDS

- Upper Lower

Color _____ Sport _____

Helmet Strap

**Standard if an option is not selected*

Lab use only PAN# _____

IN-LAB WORKING TIMES

Please allow the full working time for each product selected.

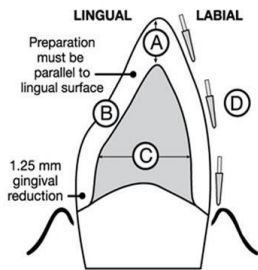
Working times are NOT guaranteed and do NOT include shipping times, weekends or holidays.

Fixed Restorations	8 Days
Removables – Standard all stages	8 Days
Digital Impressions	6 Days
Custom Abutments / Implant Crowns	+2 Days
Prestige Removables – see Removable Rx	
Mouthguards / Sports guards	6 Days
Orthodontics	7 Days
Sleep Apnea / Snoring Devices	8 Days

Rush service available on select services for an add'l fee but must be pre-scheduled by calling **877.622.3533** or emailing us before the case is shipped. Time of pick-up and delivery may affect turnaround time.

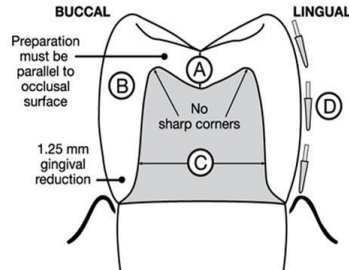
PREPARATION GUIDELINES

PFM ANTERIOR



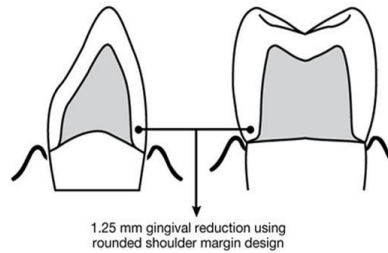
- A. 2 mm incisal reduction
- B. 1.5 mm middle third reduction
- C. Labial and lingual walls must be convergent
- D. Preparation should be cut in three planes

PFM POSTERIOR

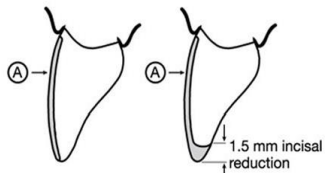


- A. 2 mm occlusal reduction
- B. 1.5 mm middle third reduction
- C. Buccal and lingual walls must be convergent
- D. Preparation should be cut in three planes

PFM-PORCELAIN LABIAL OR 360° MARGIN

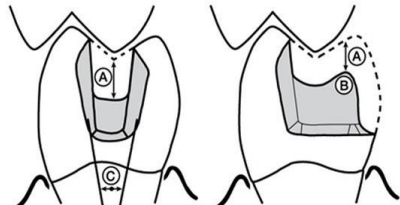


ALL-CERAMIC/COMPOSITE VENEERS



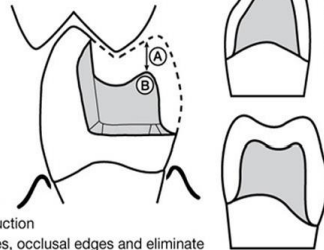
- A. 0.3 to 1 mm labial reduction

INLAY

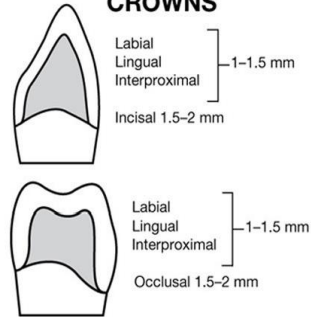


- A. 1.5 to 2 mm occlusal reduction
- B. Round all sharp line angles, occlusal edges and eliminate undercuts.
- C. Proximal and occlusal walls should have 6-8 degrees taper.

ONLAY



ALL-CERAMIC/COMPOSITE CROWNS



TERMS AND WARRANTY INFORMATION

We honor VISA, MASTERCARD, AMEX AND DISCOVER.

TERMS: Credit card required to be on file with auto payment. Cost of collection of any account will be paid by the customer. **Accounts not paid within the stated terms will be subject to COD status and a late charge of 2 percent of the unpaid balance.** Any declines will result in case holds.

Prices subject to change without notice.

NO-FAULT REMAKE POLICY: Mabel Dental Lab is happy 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 including models and impressions.

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

Email: support@mabeldental.com

Website: www.mabeldental.com

Download Prescription Rx
mabeldental.com/downloads

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