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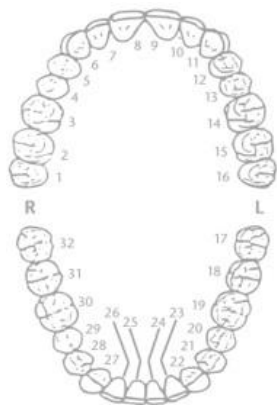
mabeldental.com

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

Address _____ Email _____

Patient ID/Name _____ ☐ Male ☐ Female _____ Age _____
First LastEnclosed 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.

DENTURES | **FLEXIBLE PARTIALS** ☐ Upper ☐ Lower☐ Denture ☐ Immediate ☐ Flexible TCS☐ Digital Denture: ☐ Try-in (monochrome)☐ Custom tray ☐ Bite block☐ Set-up try-in ☐ Reset ☐ FinishTooth Setup ☐ Ideal ☐ Characterized
☐ Study Model**TOOTH SHADE**☐ Shade _____ Mould _____
8 in-lab days all stages☐ Prestige – use Removable Rx

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METAL PARTIALS☐ Upper ☐ LowerFrame Type: ☐ SLM* ☐ Titanium ☐ Vitallium 2000Duplicate 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 ☐ LowerWrought Wire Clasps: ☐ Yes ☐ No***TISSUE GUM SHADE**ACRYLIC: ☐ Original* ☐ Light ☐ Light Reddish ☐ DarkFLEXIBLE: ☐ 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 WireAdd Clasp: ☐ Cast* ☐ Wire ☐ Itsoclear ☐ Flexible☐ Tooth Colored: ☐ A1 ☐ A2 ☐ A3 ☐ A3.5 ☐ B1**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**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.

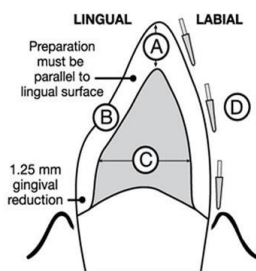
Working times are NOT guaranteed and do NOT include shipping times, weekends or holidays.

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.

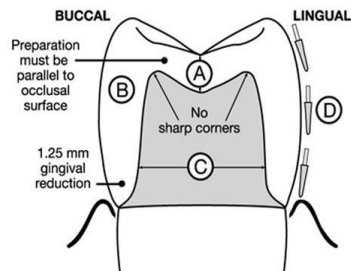
PREPARATION GUIDELINES

PFM ANTERIOR



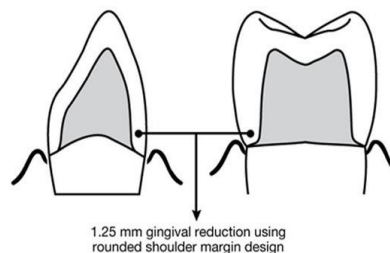
- A. 2 mm incisal reduction
- B. 1.5 mm middle third reduction
- C. Labial and lingual walls must be convergent
- D. Preparation should be cut in three planes

PFM POSTERIOR

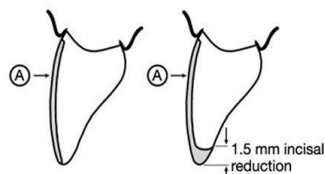


- A. 2 mm occlusal reduction
- B. 1.5 mm middle third reduction
- C. Buccal and lingual walls must be convergent
- D. Preparation should be cut in three planes

PFM-PORCELAIN LABIAL OR 360° MARGIN

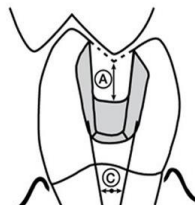


ALL-CERAMIC/COMPOSITE VENEERS



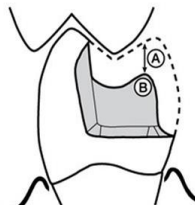
- A. 0.3 to 1 mm labial reduction

INLAY

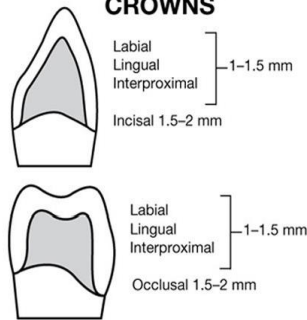


- A. 1.5 to 2 mm occlusal reduction
- B. Round all sharp line angles, occlusal edges and eliminate undercuts.
- C. Proximal and occlusal walls should have 6–8 degrees taper.

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

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