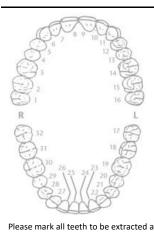
LABS ONLY - UNIVERSAL RX



Your Smile Partner

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	t Page For Working Times
Address			Email		
Patient ID/Name				□ Male □ Fer	nale Age
	First	Last			
Enclosed with Case	: 🗖 Impressions	☐ Models ☐ Bite	☐ Photos ☐ Ot	her:	
Send case photos t	o: upload via DDX; ma	peldental.com/file-uploac	l or by email: support	t@mabeldental.com	
		PORCELAIN F	PORCELAIN FUSED TO METAL		NIA
		☐ Non-Precious*	☐ Noble	☐ Full Contour*	Multi-Layered
5 th	Teeth #s	Yellow High Noble	White High Noble	Porcelain fused to Zircor	nia
VERSARY			FULL-CAST		AX
		Non-Precious		☐ IPS e.max CAD/CAM*	IPS e. max Veneer
	CHARE	Non-Precious		☐ Inlay	Onlay



Signature

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Please mark all teeth to be extracted and replaced

Teeth #s	PORCELAIN FUSED TO METAL Non-Precious* Noble Yellow High Noble White High Noble	ZIRCONIA ☐ Full Contour* ☐ Multi-Layered ☐ Porcelain fused to Zirconia	
SHADE	FULL-CAST Non-Precious 2% Yellow Gold* 40% Yellow Gold 40% White Gold 60% Yellow Gold	E.MAX IPS e.max CAD/CAM* IPS e. max Veneer Inlay Onlay STUMP SHADE required	
Cervical Body Incisal OCCLUSAL STAINING None* Light	☐ Traditional PFM (with Lingual Band)*	CUSTOM ABUTMENTS Titanium* Gold Tone Titanium Gold Alloy Zirconia w/ Ti-Base Prepare existing abutment GOEM Custom Implant System	
☐ Medium ☐ Dark ☐ PMMA TEMP CROWN	CONTACT STYLE ☐ Light ☐ Normal* ☐ Heavy/Tight	Implant Diameter mm ☐ Cement Retained* ☐ Screw-Retained	
	OCCLUSAL CLEARANCE In Occlusion* Light Occlusion Out of Occlusion Foil on Opposing	☐ Splinted* ☐ Individual Units Abutment #s Pontic #s	
s. See page 2 for details.	IF NO OCCLUSAL CLEARANCE □ Email* □ Metal occlusal □ Trim opposing □ Metal island □ Reduction coping: ○ Resin* ○ Metal □ Make this a permanent note	PONTIC DESIGN	
Lower	TISSUE GUM SHADE	SNORING SLEEP APNEA DEVICES	

	-		
DENTURES FLEXIBLE PARTIALS Upper Lower			
☐ Denture:	_ Handcrafted [®] 3D-printed		
☐ Flexible: Handcrafted ☐ 3D-printed ☐ Custom tray ☐ Bite block ☐ Set-up try-in ☐ 3D-printed try-in (monochrome) ☐ Reset ☐ Finish ☐ Digital Finish (req. tooth shade)			
Tooth Setup	☐ Ideal ☐ Characterized ☐ Study Model		
CASE TYPE & TEETH SELECTION (must match)			
☐ Standard* ☐ Prestige			
Shade	Mould		

Submission of this Rx constitutes agreement

Date			
vith limited warranty terms and conditions. See page 2 for details.			
PARTIALS			
☐ Upper ☐ Lower			
METAL Frame Material: Dup Model: ☐ Yes ☐ No*			
□ SLM-printed* □ Titanium □ Vitallium Add Esthetic Clasps: □ Flexible □ Tooth-Colored □ Custom tray □ Frame try-in □ Frame w/ bite block □ Frame w/ set-up try-in □ Reset □ Finish			
ESTHETIC Non-Metal Frame Material: DURACETAL — Shade: O A1 O A2 O A3 O A3.5 O B1			
□ VISICLEAR [®] □ Custom tray □ Frame try-in □ Frame w/ bite block □ Frame w/ set-up try-in □ Reset □ Finish			
FLIPPERS (*)			
Add Wire Clasps: ☐ Yes ☐ No*			

		OCCLUSAL CLEARANCE	
		☐ In Occlusion* ☐ Light Occlusion	Abu
		☐ Out of Occlusion ☐ Foil on Opposing	Abu
		IF NO OCCLUSAL CLEARANCE	Tota
		☐ Email* ☐ Metal occlusal	
_		☐ Trim opposing ☐ Metal island	
		☐ Reduction coping: ○ Resin* ○ Metal	
		Make this a permanent note	
		TISSUE GUM SHADE	
	ACRYLIC:	□Original* □Light □Light Reddish □Dark	□ s
	FLEXIBLE:	□Std* □Light □Light Dark □Dark □Natural	□ d
	NIGHT	GUARDS RETAINERS SNAP ON SMILE Upper* Ucower	
	☐ Hard/S	ioft🕐 🗖 Soft🕐 📮 Hard🕐 📮 Impak H/S Milled	
	☐ 3D-Prir	nted (flexible hard)	
	☐ Hawley	y Retainer 🚨 Essix 🚨 Space Maintainer	
		REPAIRS 🕑	(
	☐ Reline	☐ Soft Liner ☐ Add Teeth ☐ Replace Teeth	
	☐ Fractu	re 🚨 Rebase/Jump 🚨 Add Mesh 🖵 Add Wire	***
	Add Clasp	: ☐ Cast* ☐ Wire ☐ Itsoclear ☐ Flexible	*Sta
	□т	ooth Colored: O A1 O A2 O A3 O A3.5 O B1	
	-	•	

SNORING SLEEP APNEA DEVICES				
Upper & lower models with bite required				
☐ Silent Nite	□ EMA	□ TAP 31	L ☐ flexTAP	
☐ dreamTAP	OASYS	Hinge \Box	Scan/Save File	
CLEAR ALIGNERS (SMILE SHAPERS)				

see specific Rx on website **MOUTHGUARDS** Upper ☐ Lower SPORT _____ **□** ORB SPORT Color _ includes digital file 7 yrs

Helmet Strap andard unless otherwise specified Lab use only PAN# _

IN-LAB WORKING TIMES

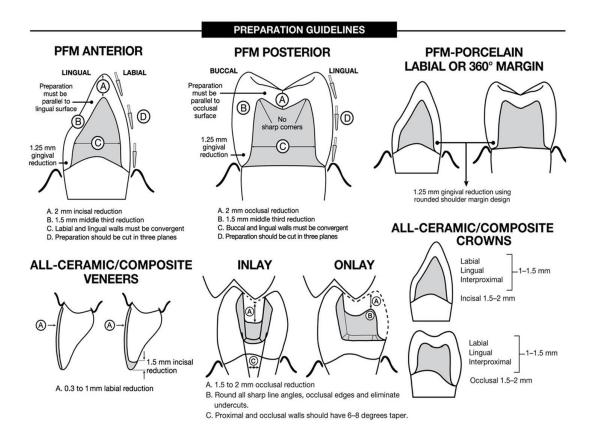
Please allow the full working time for each product selected.

Working times are <u>NOT</u> guaranteed and do <u>NOT</u> include shipping times, weekends or holidays.

Fixed Restorations	8 Days	
Removables – Standard all stages	8 Days	
Digital Cases – Fixed & Standard Removable	6 Days	
Prestige Removables [®] – see Removable Rx or website		
Custom Abutments / Implant Crowns	+2 Days	
Mouthguards / Sports guards	8 Days	
Orthodontics	8 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.



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.
Rx must be enclosed with original case submission.

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.

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

Bite Blocks (standard)

If you prefer a light-cured base plate, please note on the Rx for an additional \$5 fee (wax baseplate by default).

Prestige: a light-cured base is included at no extra charge.

Prestige® Removables - restorations made in the USA