

Straumann Group Advanced CARES® Bars & Bridges

Scan & Shape Order Form - CARES® Advanced Bars & Frameworks



INSTRUCTIONS - *Work-orders with incomplete RX forms cannot be processed!*

1. Please fill out all applicable fields and check boxes in this form, in order to process your order smoothly
2. **Diagnostic Wax Up and Vertical registration are pre-requisite. Please see addendum for details.**
3. **Your signature is required on the back of this form to complete the order**

For internal use only

Project No: _____
 Date received: _____
 Operation: _____
 SiaB Ref#: _____

Customer details (Shipping Address)






Name of Business		State / Zip code	
Contact Person		Fax	
Address			
City		Straumann® Customer No.	
Phone		Patient (initials or ID# only)	
Email			
Smile in a Box Case Reference# (If Applicable)			

Billing Address (if different)








Name of Business	
Address	
City	
State / Zip code	

Ship to address and billing address are identical

Ti Implant Bars - Removable Prosthetics

 CARES® MP Clip Flex Bar	 Preci-VH	
 MP-Clip Flex	 Horizontal Preci-Horix®	 Distal Vertical Preci-Vertix®




Ti Implant Bars for Acrylic Wrap Around Prosthetics

 Advanced Hybrid	 Abutment Hybrid	 Low Profile Hybrid	
 Distance to gingiva _____ mm	 Metal contact to gingiva _____ mm	 Adapted to gingiva	 Wrap Around

Ti Implant Bars for telescopic Removables

 Removable Telescopic
Attachment Type: LOCATORS® Novaloc®

CoCr Implant Bridges *Straumann Platforms only!*

 Partial Bridges	 Full Arch Bridges	 Screw-Retained Bridge with gingiva Support
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CARES Advanced Copy Mill Options: Copy Milling Scanable model of Frame / Bar design submitted			
Spaces (mm)			
Lingual: _____	Reduction: _____	Buccal: _____	Occlusal: _____

TOOTH CHART

- **Add for all orders:** Please indicate implant platform, platform and tooth # in the table below
- **Screw-Retained bridge only:** Please indicate all tooth positions replaced with a pontic with “X” below

Platform																
Tooth Position	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17
Platform																

PLATFORM SELECTION CHART

Straumann®

- BL > Bone Level
- TL > Tissue Level
- BX > BLX
- TX > TLXTX
- ZG > Zygomatic

Neodent®

- GM > GM
- GM > Helix
- GM > Drive
- GM > Titamax
- GM > GM Zygomatic
- GM > Helix LG

Nobel Biocare

- RS > NobelReplace Select
- NA > NobelActive
- BM > Branemark

Dentsply

- EV > ASTRA TECH Osseo Speed EV
- TX > ASTRA TECH Osseo Speed TX
- XV > XiVE S

Biomet 3i

- CT > Certain
- EH > External Hex

Zimmer

- TS > Tapered Screw-Vent

ORDER TERMS AND CONDITIONS

By signing and sending this prescription form, I confirm that:

1. This prescription is made upon the authority of a licensed dentist
2. I have used new and genuine implant analogs
3. I acknowledge that Straumann will manufacture using only the exact specifications which I have provided and approved
Straumann is not liable for any subsequent modifications or remakes made by anyone other than Straumann
4. I agree to pay the final product price plus shipping and sales tax *(if applicable)*
5. **I understand the delivery times are dependant upon the materials chosen and my response time to approve the proposed design**
6. I have read and understood Straumann’s General Terms and Conditions
7. I have disinfected all materials prior to shipment to Straumann
(Please use disinfection products with EPA approved emerging trail pathogens claims. See www.epa.gov for more details)
8. I have properly packaged and shipped the materials in accordance with all State and Federal laws and regulations regarding the transportation of potentially biohazardous materials including Code of Federal Regulation Title 49 Part 173

SHIPMENT CHECKLIST

This is a shipping checklist to help you ensure that your order is processed efficiently and accurately
(Please only use the required shipping box which is supplied by Straumann)

- Signed order form with all required details
- Verified master model with genuine implant analog(s) and soft tissue mask
- Diagnostic waxup of the final prosthesis
- Copy mill wax ups supplied *(if copy mill is selected)*

Important order processing Information: CARES® Advanced orders missing one of the 2 items listed above will not be processed and sent back to the sender.

For further information regarding SRBB products, please refer to our website at <http://www.straumann.us/SRBB>

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Please ship to:

Attention of CARES®
Advanced SRBB
CARES® Scan & Shape Team
Straumann Manufacturing, Inc.
1961 Heritage Parkway
Mansfield, TX 76063

Comments:

Sign here ►

(Signature of the customer/date) Required