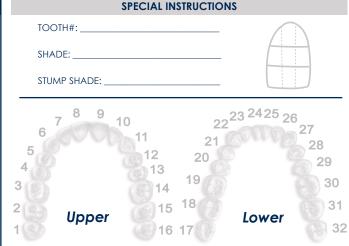
REQUIRED INFORMATION			
Doctor: Lic. #:	Account #:	Check the expected delivery date on our turnaround calendar.	NDX Pacific
Address:	Rx Date:		1601 Sepulveda Blvd. #628,
City/State/Zip:	Patient Next Appt.: Patient Name: (First)		Manhattan Beach, CA 90266-5111 (310) 220-6241 • Fax: (866) 469-0306
Phone:	(Last)		www.ndxpacific.com · sales@ndxpacific.com
Dr. Signature:	RUSH: 4 Day Select: M G F		Send Your Cases to NDX Pacific Today! (866) 469-0305

CROWN & BRIDGE

SELECT:				ONLAY	
			AMIC nax CAD	FULL	CAST
			nax Press	Gol Gol	ld 60%
	N-FUSED-TO-A	NETAL			n-precious ni-precious
 Non-Pre Semi-Pr High No 	ecious			🗆 Res 🗋 Win	
	SITE		RARY	🗖 Dia	gnostic Wax-up
	(Servicing All Mo IMENT: 🔲 Titan	•	-	ybrid	
Stock A Custom	butment Abutment	Size			
🛛 Parts Su	pplied by Doc	tor Manuf	acturer		

FIXED CASE SPECIFICATIONS

SELECT STAGE:	Complete	 Porcelain Bake Bisque Bake 	□ Glaze/Polish □ Finish
BUCCAL MARGIN Porcelain Butt Margin 360° Porcelain Butt Margin		STAINING Light Medium	□ Heavy □ None
METAL DESIGN			
No Mtl. Collar	360 Mtl. Collar Metal Lingual Anterior	Metal Lingual Collar	. Mtl. Occl. al Incl. Buccal Cusp.
1 611	GN Codified Ridge Ridge	No Contact	Ovate
OCCLUSAL C Light Open Tight		Light Adju Medium Red	IFFICIENT ROOM: ist Opposing uction Coping al Occlusal/Lingual



REDO:	VES)
ORIGIN	AL PRODU	JCT EN	CLOSED

ENCLOSED: YES NO

FOR LAB USE ONLY

Flexible Partial Standard Valplast Premium **ACRYLIC PARTIALS** IMMEDIATES □ Flipper (1 Tooth) Extract All □ Stayplate* (2-5 Teeth) □ Extract tooth #_ □ Acrylic Partial* (6+ Teeth) **BITESOFT SPLINT THERAPY** *Includes wire clasps (Upper Arch only) CAST METAL PARTIALS □ Anterior □ Full Arch Cast Metal (Chrome Cobalt) SELECT: Dual Laminate □ Vitallium 2000 □ Thermo-lined **COMBO PARTIALS NIGHT GUARDS** Cast Metal Frame w/Flexible Partial □ Hard □ Soft □ Vitallium 2000 Frame w/ Valplast □ Hard/Soft Combo **CLASP DESIGN** SPORTS GUARD Lab Select 🗆 RPI □ Pro-Form Sports Guard Akers Roach MAJOR CONNECTOR Lab Select Full Palate Lingual Plate Horseshoe Lingual Bar A-P Bar Palatal Strap **REMOVABLE EXTRAS** □ Wax Bite Block □ Custom Tray Reline Hard 🛛 Wax Bite Rim Bleach Tray Reline Soft Cusil # Rebase Repair

REMOVABLE PROSTHETICS

Complete (One Stage)

□ Set to Enclosed Frame

□ Wax Try-in w/Teeth

SELECT STAGE:

□ Frame Try-in

□ Finish & Process

PARTIAL

UPGRADE TO

PREMIUM

TEETH

FULL DENTURES

SELECT: DENTURE

NON-METAL PARTIALS

TISSUE SHADE:

Light Pink

Pink

Ethnic

CASE MATERIALS ENCLOSED: Impressions I Bite Registration I Models Implant Parts

REQUEST FREE SUPPLIES

Rx Forms

Case Boxes

FedEx Labels

TURNAROUND TIME Days InLab^{*}

Fixed & Removable	7-10
Implants*	10+

*Additional time may be required to order parts. *Excludes Weekends & Holidays. Working times are not guaranteed.

Please Note: A case requiring a call from a technician or scheduling department may cause delays to the fabrication process.

RUSH SERVICES/FEES* Days InLab

"Rush 25" - \$25 Per Unit/Per Arch

Asush services/fees are not available for all products and subject to change during the holiday seasons. To arrange rush service for your case, contact NDX Pacific Scheduling Department. Rush fees not subject to credit.

STANDARD PICK-UP/DELIVERY CHARGES (Monday - Friday)

\$2.50 per case inbound / \$2.50 per case outbound. Applies to removable cases only.

NO SHIPPING FEES

Applies only to fixed cases.

*All cases are delivered next day air by 5 pm to your office. Additional time and fees may apply to outlying areas. Alaska, Hawaii and International excluded.

NDX PACIFIC TERMS & POLICIES[^]

By signing or sending this Rx slip (or a substitute therefore) to NDX Pacific (d.b.a. NDX Pacific), I agree to abide by all terms and policies listed below.

All statements must be paid in full by the 22nd of the month in which the statement is prepared. Any amounts not paid by the last business day of such month will incur a 2% finance charge per month, and the account will be automatically placed on C.O.D. terms. All cases will be billed in stages and will be paid in full according to stage. All cases and items sent remain the property of NDX Pacific, until client's account is paid in full. A minimum of \$50.00 will be charged for returned checks. All disputes shall be governed in all respects by Los Angeles law and client agrees to submit to the exclusive jurisdiction of, and venue in the County of Los Angeles, State of California in any dispute, with the prevailing party to recover attorney's fees, court costs and other expenses, including actual expert witness fees, if any, in addition to any other relief to which prevailing party may be entitled.

WARRANTY[^]

1. Repair or replacement of a fixed or removable prosthetic.

WARRANTY CONDITIONS^

- 1. Prosthesis must be inserted by a licensed practicing dentist.
- 2. Patient must adhere to semi-annual dental maintenance (cleaning and exam) program, in the office of a licensed and practicing dentist.
- 3. The maintenance schedule on this certificate must be documented by the attending dentist each visit to validate this warranty.
- 4. Dental prosthetic must be returned with model work in order for the credit to be issued.

WARRANTY COVERAGE EXCLUDES[^]

- 1. Cash refund for prosthesis.
- 2. Cost incurred for removal or insertion.
- 3. Incidental or consequential damages, including inconvenience, lost wages, chairtime or pain and suffering.
- 4. Repairs resulting from accident, neglect, abuse, failure of supportive tooth or tissue structures, improper adjustments or improper dental hygiene.
- 5. NDX Pacific is not liable for any fixed (over 5 [five] units), or any removable prosthetics, that has not been appropriately fitted prior to process.
- 6. Repairs, relines, temporaries, implants, immediate dentures or partials, and appliances partially or completely fabricated by another lab other than NDX Pacific.
- A Warranty begins at delivery date. This warranty is in lieu of all other warranties, whether expressed or implied and may not be modified by any agent, employee, representative or distributor of NDX Pacific.
- ^ All warranty terms and conditions are subject to change without notice. Please visit www.ndxpacific.com to receive the latest applicable terms and conditions.
- ^ All prices are subject to change without notice and are quoted as complete (one stage) or one unit. Some products are subject to additional fees, e.g., C&B and removable extras, attachments and additional implant parts, multiple stages, and metal surcharges.
- ^ All discounts will be applied to promoted product and current pricing. Discount terms are subject to change without notice.

Date	Type of Exam	Dr. Initials