



... Please, fill in completely and keep a copy ...



www.medimatch.ie

MediMatch dental laboratory IRELAND T: 01 830 9375

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1 Dr. _____ (name) Acc./PO no.: _____
 Post code: _____ - _____ Mobile: _____

2 *No patient personal data*
 Your case reference: _____ Age: _____ Initials: ____ / ____

3 **Delivery date** Standard is **10 full** working days.
 (d/m/y) ____ / ____ / ____ = 1 working day before the real appointment

FULL CERAMIC PRIVATE
 for lab use only, real app.

..... - @
 - @

4 **Instructions** - For anterior cases: Study model _____
 Wax up _____
 Stent for temporaries on wax up _____

5 **E.MAX**

VENEER INLAY ONLAY CROWN BRIDGE

e.max press, posterior and anterior
 A very aesthetic option - 10 days in lab needed - €110

ZIRCONIA

VENEER INLAY ONLAY CROWN BIG SPAM BRIDGE

Standard is **10 full** working days.

Zirconia aesthetic, posterior and anterior
 A zirconia core with porcelain build up - €110

Full contour zirconia, Posterior only
 With staining & glazing of the core but no porcelain build up - €90

Cercon Zirconia, the original brand
 At a surcharge - €135

6 **Shade** use VITA guide

Bridge B
 Crown C
 Inlay I
 Onlay O
 Veneer V

(please circle and indicate: B, C, I, O, V)

R											L							
18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28			
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38			
R											L							

Remarks / Notes

I have disinfected the impression with: _____
by: _____

PRIVATE

This case is a remake case
 I have enclosed the following new or old components _____

Custom Made Device | Supplied in an unsterilized state | Terms and conditions apply | Visit www.medimatch.ie

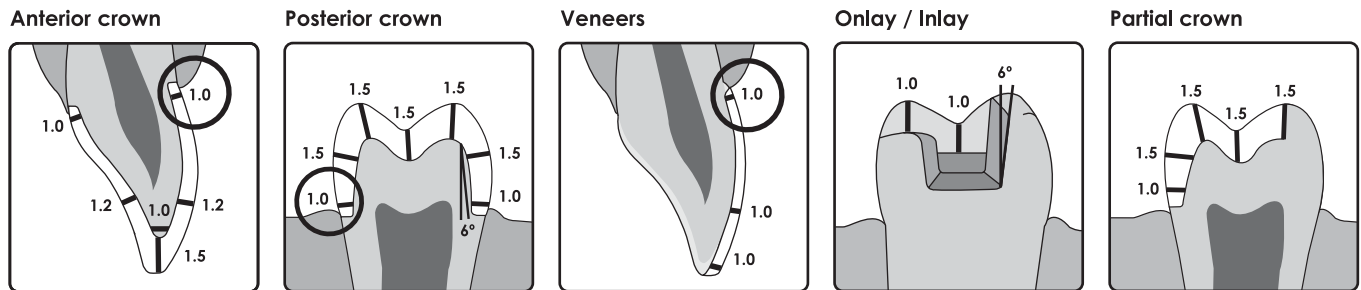
Dental appliance information and delivery note: Dental product designed to satisfy the information, properties and detail of what has been prescribed by the above dentist. Purely for use for the patient described with the above reference. The product meets the requirements entailed in the Annex I and Annex VIII of the Medical Devices Directive and the Republic of Ireland Medical Devices Regulations act SI 252/1994. This product may have been produced in either or all three Ireland, UK or China by MediMatch.

Instructions for use, storing & handling: It is highly recommended that the product is stored in a clean and safe environment if not used immediately. It is also advised that there must be no contact with materials, liquids or acids that could cause disfiguration or damage to the product. The product should not be subjected to extreme heat. Where applicable, you should take care not to damage the dental piece(s) when removing from its model.

THIS DENTAL APPLIANCE IS SUPPLIED IN AN UNSTERILIZED STATE

FULL CERAMIC PRIVATE ADVICE AND INFORMATION

AS A GUIDELINE ONLY



4 Instructions - For anterior cases:
Manage the expectation of your patient by making a wax up and requesting a stent over the wax up to be able to base your temporaries on the wax up. Send us an impressions of the temporaries and tell us what you would like to copy and what you would like to improve.

5 E.MAX

Contraindications:

- very deep subgingival preparations
- patients with severely reduced residual dentition
- parafunctions, e.g. bruxism
- provisional insertion/trial wear period
- bridges with a pontic beyond 5's or bigger than 9mm
- cantilever bridges
- more than 3 unit bridges
- adjustments without polishing (please use appropriate burs only)
- always indicate if there is strong discolourations on the die
- don't make sharp corner preparations
- for inlays/onlays the preparation margins must not be located on centric antagonist contacts

ZIRCONIA

Contraindications:

- very deep subgingival preparations
- provisional insertion/trial wear period
- adjustments without polishing (please use appropriate burs only)
- always indicate if there is strong discolourations on the die
- don't make sharp corner preparations
- for veneer cases give us a "wrap around the incisal edge"

6 Shade
**** Do you want to email a picture?** Show the shade tab in the picture, specify what shade you have used and send it to questions@medimatch.ie
Please put patient name and post code in the subject field of your email.

7 Cements advice for E.MAX

ivoclar vivadent: VARIOLINK ESTHETIC or MULTILINK AUTOMIX

Cements advice for ZIRCONIA

ivoclar vivadent: SPEEDCEM or MULTILINK AUTOMIX

Legal disclaimer: In addition to MediMatch's normal terms and conditions we would like to point out that: This protocol is based on very limited experience MediMatch has with their cases and should only be used as an indication and not restrictive in any way or form. This protocol was not based on experience in a clinical environment. Clinicians will use their own technique, according to individual experience and training. This protocol should not be followed if the circumstances are different or if in any way or form it is clinically not appropriate to follow it even if the circumstances are similar as in the protocol. Each clinician should make their own decisions and not restrict himself or herself to following a protocol made by MediMatch dental laboratory Ltd. MediMatch dental laboratory Ltd is in no way liable for any clinical procedures and will not take responsibility for the use of the content of this protocol in a clinical or non clinical environment. Each clinician is ultimately responsible for their own clinical decisions regardless of any advice given by MediMatch dental Laboratory Ltd in any form.