

BAR ZERO PRECISION MILLED PROVISIONAL ORDER FORM

1 INFO	DOCTOR/LAB NAME	PATIENT IDENTIFIER	
	ADDRESS	CITY/STATE	ZIP CODE
	PHONE NUMBER	EMAIL ADDRESS	

2 TYPE & SHADE	SELECT BARZERO TYPE & SHADE		
	<input type="checkbox"/> BARZERO EXPRESS	IMMEDIATE PROVISIONAL	
	<input type="checkbox"/> BARZERO LTP	LONG-TERM PROVISIONAL	
SPECIFY VITA SHADE: BL1, BL3, BL4, B3, B4, C4, D4 SHADES ARE NOT AVAILABLE		TRIAD® GINGIVA SHADE:	LIGHT REGULAR DARK

3 BILLING INFO	NAME ON CREDIT CARD	
	CREDIT CARD NUMBER	
	CVS CODE	EXPIRATION DATE
	BILLING ZIP CODE	
	KEEP THIS CC INFO ON FILE? <input type="checkbox"/> YES <input type="checkbox"/> NO	

4 IMPLANT LOCATIONS	FOR BARZERO LTP ONLY			
		Tooth #	Analog/Abutment Manufacturer	Analog/Abutment Model
		FOR BARZERO LTP ONLY		

5 WHAT TO SEND	WHAT TO SUBMIT - BARZERO EXPRESS: <ul style="list-style-type: none"> • Pre-Surgical Study Casts • Pre-Surgical Wax-Up • Completed Order Form 	WHAT TO SUBMIT - BARZERO LTP: <ul style="list-style-type: none"> • Screw-Retained Diagnostic Wax-Up (3+ cylinders) • Verified Master Model • Completed Order Form
	FOR TIPS ON PROPER DIAGNOSTIC WAX-UP CREATION AND SUBMITTAL, PLEASE VISIT HTTP://CAGENIX.COM/CAGENIX-DOWNLOADS/	

6 DESIGN APPROVAL AND DELIVERY	DELIVERY OPTIONS	<input type="checkbox"/> OVERNIGHT <small>ADDITIONAL CHARGE</small>	<input type="checkbox"/> 2ND DAY
	NEED COPINGS & SCREWS?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
	<small>If copings & screws requested, please provide implant/abutment types above</small>		
	REQUEST DESIGN APPROVAL?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
<small>If design approval is requested, please provide Email address above</small>			
TURNAROUND TIMELINE: BarZERO frameless provisional restorations generally ship out 10 business days from the day we receive the case.			

NAME _____ **DATE** _____

I certify that the analog positions on the cast and the wax try-in have been verified for accuracy and the stated information is correct. All items that have contacted the oral environment have been disinfected. This form authorizes Cagenix to fabricate the AccuFrame™ dental framework using the information provided on this order form. Failure to submit appropriate elements can result in case being returned.

ORDER INFORMATION (READ CAREFULLY) <ul style="list-style-type: none"> • Only use new analogs WITHOUT abutments • Missing info/components can delay your case

Completing the Cagenix BarZero Order Form

C A G E N I X™ **BARZERO**

BAR ZERO PRECISION MILLED PROVISIONAL ORDER FORM

1 DOCTOR/LAB NAME PATIENT IDENTIFIER
ADDRESS CITY/STATE ZIP CODE
PHONE NUMBER EMAIL ADDRESS

2 SELECT BARZERO TYPE & SHADE
 BARZERO EXPRESS IMMEDIATE PROVISIONAL
 BARZERO LTP LONG-TERM PROVISIONAL
SPECIFY VITA SHADE: TRIAD® LIGHT
BL1, BL3, BL4, B3, B4, C4, D4 GINGIVA REGULAR
SHADES ARE NOT AVAILABLE SHADE: DARK

3 NAME ON CREDIT CARD
CREDIT CARD NUMBER
CVS CODE EXPIRATION DATE
BILLING ZIP CODE
KEEP THIS CC INFO ON FILE? YES NO

4 FOR BARZERO LTP ONLY Tooth # Analog/Abutment Manufacturer Analog/Abutment Model
MANDIBULAR
MANDIBULAR
FOR BARZERO LTP ONLY

5 WHAT TO SUBMIT - BARZERO EXPRESS:
• Pre-Surgical Study Casts
• Pre-Surgical Wax-Up
• Completed Order Form
WHAT TO SUBMIT - BARZERO LTP:
• Screw-Retained Diagnostic Wax-Up (3+ cylinders)
• Verified Master Model
• Completed Order Form
FOR TIPS ON PROPER DIAGNOSTIC WAX-UP CREATION AND SUBMITTAL, PLEASE VISIT [HTTP://CAGENIX.COM/CAGENIX-DOWNLOADS/](http://cagenix.com/cagenix-downloads/)

6 DELIVERY OPTIONS OVERNIGHT ADDITIONAL CHARGE 2ND DAY
NEED COPINGS & SCREWS? YES NO
REQUEST DESIGN APPROVAL? YES NO
TURNAROUND TIMELINE:
BarZero frameless provisional restorations generally ship out 10 business days from the day we receive the case.

7 NAME DATE
I certify that the analog positions on the cast and the wax try-in have been verified for accuracy and the stated information is correct. All items that have contacted the oral environment have been disinfected. This form authorizes Cagenix to fabricate the AccuFrame™ dental framework using the information provided on this order form. Failure to submit appropriate elements can result in case being returned.
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• Only use new analogs WITHOUT abutments
• Missing info/components can delay your case

ORDER FORM v0916.01
1680 Century Center Parkway • Building D, Suite 14 • Memphis, Tennessee 38134 • (866) 964-5736 • www.cagenix.com

- 1 Enter your patient & practice info
- 2 Select BarZero restoration type
 - Select Express or LTP option
 - Enter relevant shade information
- 3 Enter your billing information
- 4 Provide implant locations/types
 - For BarZero LTP cases only
- 5 List of items to submit for each BarZero product type
- 6 Shipping and approval options
 - Default shipping is FedEx 2nd Day
 - Overnight FedEx shipping available
 - 3D CAD design approval on request
- 7 Review requested components, then sign and date the form

For more info or assistance, call (866) 964-5736