

PRICE LIST

PREMIOtemp PMMA Blanks



		MULTICOLOR
		<p>High-End PMMA Blanks</p> <p>MULTI</p> <p>For highly aesthetic long term temporary restorations</p> <ul style="list-style-type: none"> Impressive aesthetics by 5 layers of color Multilayered with no separation between layers Natural fluorescence
Diameters:	98mm with 2 steps 95mm (ZZ-Shape)	
Heights:	16mm, 20mm, 25mm (30mm on request)	
Colors:	A1 to D4, plus Bleach, Pink (Gingiva) and Bicolor	
Price:	129,00 Euro	
		MONOCOLOR
		<p>High-End PMMA Blanks</p> <p>MONO</p> <p>Good aesthetics for regular short term provisionals</p> <ul style="list-style-type: none"> Excellent combination of color and translucency Easy to mill Highly biocompatible
Diameters:	98mm with 2 steps 95mm (ZZ-Shape)	
Heights:	16mm, 20mm, 25mm or 30mm	
Colors:	A1 to D4, plus Bleach and Pink (Gingiva)	
Price:	59,00 Euro (98x16 or 20mm, 2 steps) 69,00 Euro (98x25mm or 98x30mm) 69,00 Euro (95x16 or 20mm, ZZ-Shape) 79,00 Euro (95x25mm, ZZ-Shape)	
		CLEAR
		<p>High-End PMMA Blanks</p> <p>CLEAR</p> <p>State of the art for milled bite splints</p> <ul style="list-style-type: none"> Glossy surface directly after milling Transparent as glass High strength (>130MPa)
Diameters:	98mm with 2 steps 95mm (ZZ-Shape)	
Heights:	16mm, 20mm (25/30mm on request)	
Colors:	Transparent	
Price:	49,00 Euro (98mm, 2 steps) 59,00 Euro (95mm, ZZ-Form)	Certified as Class 2A medical devices according to EC Directive 93/42/EEC
		CLEAR FLEX

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PREMIOtemp PMMA Blanks



High-End PMMA Blanks

CLEAR FLEX

The thermoplastic material for milled bite splints

- Innovative milling blank
- Automatically adapts to the patient's dental situation when warmed up
- Tension-free wearing comfort
- Durable due to maximum break resistance

Diameters: 98mm with 2 steps
95mm (ZZ-Shape)

Heights: 16mm, 20mm or 25mm

Colors: Translucent

Price: **69,00 Euro**

Certified as Class 1

ORDER

- by Email: primotec@primogroup.de
- by fax: +49(0)6172 - 99 770-99
- or by phone: +49(0)6172 - 99 770-0

Your Order:

1

- Type **MULTI**
Type **MONO**
Type **CLEAR**
Type **CLEAR FLEX**

2

Diameter: _____
Height: _____
Color: _____
Quantity: _____

If you are already a **primotec customer**, please insert only your **name** and **customer number**:

Name / Lab: _____ Customer number: _____

Please send us our order to following address*:

Name / Lab: _____

Contact person / Position: _____

Street: _____

ZIP / City: _____

Telephone: _____ Fax: _____

Email: _____

Date / Signature: _____

*Privacy:

At any time you have a right for information, rectification and cancellation regarding the processing and use of your data. For sure, you can revoke your consent at any time at primotec.