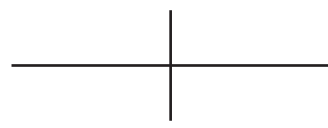
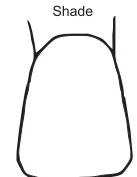

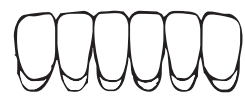




<p>Delivery Date & Time <input style="width:100%; height: 20px;" type="text"/> Delivery 5-10 working days (upon receipt in the laboratory)</p>	<p>NON-PRECIOUS BONDED CROWN <input type="checkbox"/> PRECIOUS BONDED CROWN <input type="checkbox"/> NON-PRECIOUS BONDED BRIDGE <input type="checkbox"/> PRECIOUS BONDED BRIDGE <input type="checkbox"/> MARYLAND BRIDGE <input type="checkbox"/> POST & CORE <input type="checkbox"/> DENTINE BONDED CROWN <input type="checkbox"/> PORCELAIN VENEER <input type="checkbox"/> PORCELAIN INLAY <input type="checkbox"/> COMPOSITE INLAY <input type="checkbox"/> E.MAX PRESS CROWN <input type="checkbox"/> E.MAX PRESS BRIDGE <input type="checkbox"/> E.MAX PRESS VENEER <input type="checkbox"/> E.MAX PRESS INLAY <input type="checkbox"/> ZIRCONIA CROWN <input type="checkbox"/> ZIRCONIA BRIDGE <input type="checkbox"/> GOLD SHELL CROWN <input type="checkbox"/> GOLD INLAY <input type="checkbox"/> WHITE GOLD CROWN <input type="checkbox"/> STUDY MODELS <input type="checkbox"/> BLEACHING TRAYS <input type="checkbox"/> BITE / NIGHT GUARD <input type="checkbox"/> DIAGNOSTIC WAX-UP <input type="checkbox"/> DENAR ARTICULATION <input type="checkbox"/></p>	 Shade   
<p>Surgeons Name: Practice Address: </p>		
<p>This is a custom made device for the exclusive use of Patients Name Male <input type="checkbox"/> Female <input type="checkbox"/> Age: Econ <input type="checkbox"/> IND <input type="checkbox"/> Private <input type="checkbox"/></p>		
<p>Alloy required for Shell Crowns & Inlays: Yellow: Non Precious <input type="checkbox"/> 20% <input type="checkbox"/> 40% <input type="checkbox"/> 60% <input type="checkbox"/> White: Non Precious <input type="checkbox"/> Precious <input type="checkbox"/></p>		

Special Instructions

For lab use only

Imps	U / L
Models	U / L
Bite	U / L
Study	U / L
Shade match	Y / N
Photo	Y / N
Weight	g
Total Cost	£

BOOKED IN	MODEL	METAL	CERAMIC	APPROVED BY	BOOKED OUT
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KEEP AWAY FROM EXTREMES OF HEAT AND COLD

PATIENT STATEMENT

Your attention is drawn to the following statement: this is a custom made medical device that has been manufactured to satisfy the attributes, characteristics, properties and features specified by the prescriber for the above named patient. This medical device is intended for the exclusive use by this patient and conforms to the relevant essential requirements specified in Annex I of the Medical Devices Directive and the United Kingdom Medical Devices Regulations.

This complete appliance has been wholly manufactured within the EU.