2 Wadsworth Road, Perivale, London UB6 7JD - Phone: 07581 290631 - Email: info@csdentallaboratory.co.uk

CS DENTAL LABORATORY

NHS ☐ PRIVATE ☐	
Dentist:	
Address:	
Patient:	
Date Sent:	

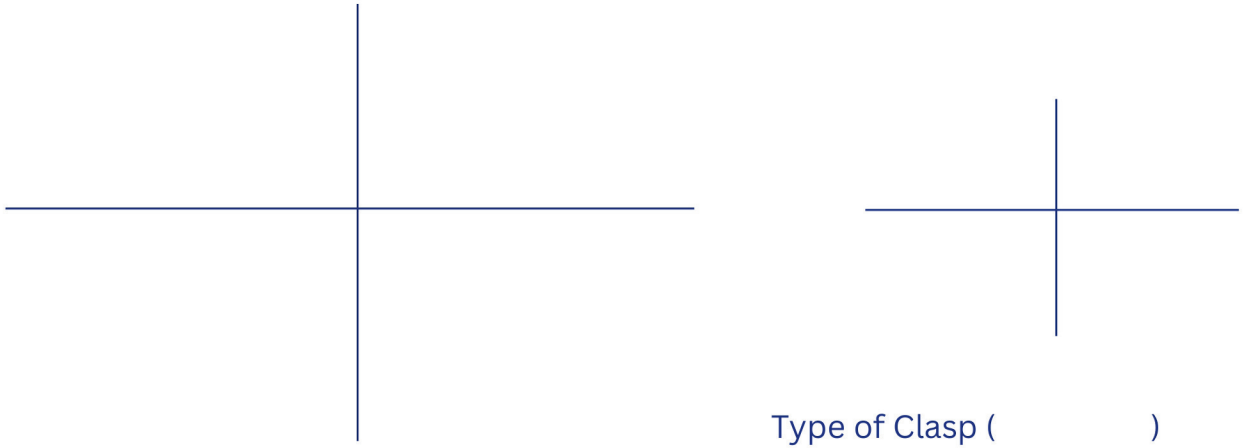
LAB USE ONLY

Shade: _____

Full
Full

Partial
Partial

Chrome
Chrome



Type of Clasp ( )

NOTES / INSTRUCTIONS

1. Bite:	
2. S/Tray:	
3. Try In:	
4. Retry:	
5. Finish:	

6. Mouthguard:	
7. Dual Laminate:	
8. Whitening Tray:	
9. Retainer:	
10. Repair:	

This is a custom-made dental appliance that has been manufactured to satisfy the attributes, characteristics, properties & features specified by prescriber of the above named patient. This appliance is intended for exclusive use by this patient and conforms to the relevant essential requirements specified in annexe 1 of the Medical Device Directives (93/42 EEC) & the United Kingdom Medical Devices Regulations S1 1994 No. 3017

GDC 157966

MHRA