

CASE NO.

Robinson Dental Ceramics Limited 6 Myton Road Ingleby Barwick Stockton on Tees TS17 0WA

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**Full Service Dental Laboratory** 

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All fields must be complete in full and without abbreviation in order to comply with the Medical Devices Directive.

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PRESCRIBING DENTIST		DATE DISPATCHED	DATE REQUIRED + APPT TIME					
		BITE						
CLINIC NAME & ADDRESS	5							
		TRY-IN						
TELEPHONE NUMBER								
		RE-TRY						
DATIFALTO NIABAT /ID								
PATIENTS NAME/ID		FINISH						
SHADE REQUIRED	NHS	CHARTING						
	PRIVATE							
	INDEPENDENT							
IMPRESSIONS DISINFECTED IN THE		ALLOY REQUIRED	ALLOY WEIGHT g					
DENTAL SURGERY			J					
DATE I	NITIALS							
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SPECIAL INSTRUCTIONS								





British Dental Technology
Clinically Compliant | Professionally Produced





Dental Laboratories Association Registered Member

Prescriber Feedback: To enable our dental laboratory to comply with the Medical Devices Regulations for Post Market Surveillance, please inform us of any feedback or issues regarding the enclosed device(s) as soon possible.

Models	Imps	Posts	Crowns	Other	Models	Construction	Approved for Construction (Prescriber)	Metal/Foil	Wax	Ceramic	Polish
Bite/Tray	Try/Tray	Re-Try	Re-Try	Finishing		FOR LAB USE ONLY FINAL INSPECTION AND RELEASED BY					