Creative Chrome

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PRESCRIPTION FORM

PLEASE SUPPLY IN ACCORDANCE WITH
CREATIVE CHROME'S CURRENT TERMS OF TRADE

THIS DEVICE IS CUSTOM MADE FOR THE EXCLUSIVE USE OF THE PATIENT AS STATED AND CONFORMS TO THE RELEVANT ESSENTIAL REQUIREMENTS SET OUT IN THE MEDICAL DEVICES DIRECTIVE, (93/42/EEC) AND IS THE STATEMENT TO THAT EFFECT.

INVOICE CC N^{o}
JOB No

PRESCRIBING SURGEON'S NAME & ADDRESS

THIS IS A CUSTOM MADE DEVICE FOR THE EXCLUSIVE USE OF :-

ITEMS ENCLOSED

MODELS	☐
RUBBER OR SILICONE IMP	☐
ALGINATE IMP	☐
BITE REGISTER	☐
WAX SETUP	☐
PHOTOGRAPHS	☐
OTHER	☐

PATIENT'S NAME

AGE

Please tick as appropriate

		Return date
SPECIAL TRAY	☐	
BITE	☐	
TRY IN	☐	
RETRY	☐	
FINISH	☐	

SHADE

MOULD

DESIGN TYPE

See also detailed design chart below

SKELETON	☐	BACKINGS	☐
LINGUAL BAR	☐	ONLAYS	☐
PLATE	☐	RESTS	☐
CAST CLASPS	☐	STIPPLED	☐
GOLD CLASPS	☐	MIRROR	☐
'D' CLASPS	☐	GOLD	☐

SPECIAL INSTRUCTIONS

Please indicate teeth to be replaced

18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38

PRICING

TOTAL		

Approved for manufacture:

Approved for Release:

DO NOT EXPOSE WORK TO EXTREMES OF TEMPERATURE

British Dental Technology
Clinically Compliant | Professionally Produced