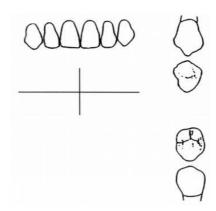


## Crown and bridge

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SURGEON	DATE
PATIENT NAME	DATE REQUIRED
SPECIAL'S	TRAY IN SHADE



	MODEL	GOLD	CERAMIC	SCAN	COMPOSITE
FINISHED					
CHECK					

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

ANY RELEVANT ESSENTIAL REQUIREMENTS NOT MET ARE LISTED OVERLEAF

KEEP ANWAY FROM THE EXTREMITIES OF HEAT AND COLD