



15 Kinross Crescent, Portsmouth, Hampshire PO6 2NP

T: 023 9243 9047

E: rebecca@jhayersmilestudio.co.uk

www.jhaytersmilestudio.co.uk



Dental Laboratories Association
Registered Member



Dentist _____

Return Date (please allow 10 working days)

--	--	--	--	--	--	--

Surgery _____

Express Service (50% surcharge)

Patient _____

NHS

Insurance

Private

Emax

- Crown
- Inlay
- Veneer
- Bridge

Zirconia

- Crown
- Bridge
- Monolithic

Porcelain Bonded

- Crown
- Bridge
- Maryland
- Post & Core
- Gold Crown
- Silver Crown
- Gold Inlay
- Silver Inlay
- Precious
- Non-Precious

Shade Required _____

Core Shade (for Emax) _____



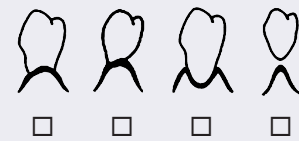
Case Instructions

Occlusal Contact

- Heavy
- Light
- Open

- Occlusal Staining
- Neck Staining

Pontic Design



This device conforms to the relevant essential requirements set out in Annexe 1 of the Medical Devices Directive (93/42/EEC). Those relevant essential requirements not met and the reasons why are listed separately.

Lab use only

Signed

Date

Booked in _____

Signed out _____

Job No _____



**Quality Dental Restorations
Made in Britain**