JOB NO.

MHRA No. 24892

MAREN DENTAL LAB

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Pembrokeshire SA71 4BJ

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PRESCRIBER

SURGERY

PATIENT

DATE

SPECIAL TRAYS ↑ ↓ Date Required

BITE BLOCKS ↑ ↓ Date Required

F / / F P / / P

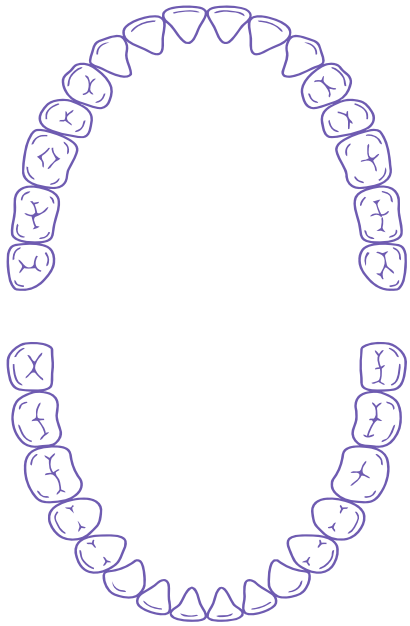
TRY-IN Date Required

APPROVED FOR MANUFACTURE

RE-TRY Date Required

FINISH Date Required

SHADE



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OTHER INSTRUCTIONS

DENTURE TYPES

- ACRYLIC
- CHROME
- FLEXI
- HYBRID
- DURACETAL
- RESIN PRINTED
- KARADENT
- iFLEX

CLASPS

- STEEL
- FLEXI
- AESTHETIC

EXTRA FEATURES

- GUM CONTOURING
- CLEAR PALATE
- FIBER FORCE

OTHER

- RELINE
- SOFT LINING
- ADDITION
- REPAIR
- STUDY MODEL ↑ ↓
- ESSIX RETAINER ↑ ↓
- NIGHT APPLIANCE ↑ ↓
  - SOFT
  - SEMI-RIGID
- BLEACHING TRAY ↑ ↓
  - RESERVOIRS Y N
- MOUTH GUARD
  - COLOUR(S)
  - THICKNESS: LT / MED, MED / HVY
  - SPORT

DATE REQUIRED

APPROVED FOR MANUFACTURE

This device has been approved for release by a GDC registered technician. It is supplied in a non-sterile state.

SIGNED FOR RELEASE

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Your attention is drawn to the following statement: This is a custom-made medical device that has been manufactured to satisfy the design characteristics and properties specified by the prescriber for the above-named patient. This medical device is intended for exclusive use by this patient and conforms to the applicable general safety and performance requirements specified in the UK & EU Medical Devices Regulations. This statement does not apply to medical devices that have been repaired and/or refurbished for an individual patient's use.

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 as possible.