



01279 815 397

1. Please print laboratory instruction sheet and postal label.
2. Complete instruction sheet in full.
3. Pack case sufficiently in box or jiffy bag for postage.
4. Cut out prepaid postal label following guidelines and attach.
5. Please contact to advise us of the incoming case and to confirm your preferred date of return to avoid any disappointment.
6. More lab dockets and postal labels will be sent upon completion of your first case



The Tooth Shop

Unit 2 The Courtyard, Forest Hall Road
Stansted Essex CM24 8TS

Tel: 01279 815397

www.thetoothshop.com

info@thetoothshop.com



LABORATORY PRESCRIPTION SHEET

DENTIST'S NAME:

PATIENT'S NAME:

Address

CHECKLIST: • U/L ALGINATE
IMPRESSIONS

• SQUASH BITE • VITA SHADE

Telephone

PLEASE ENSURE ALL IMPRESSIONS ARE
WRAPPED IN WET TISSUE PRIOR TO POSTING

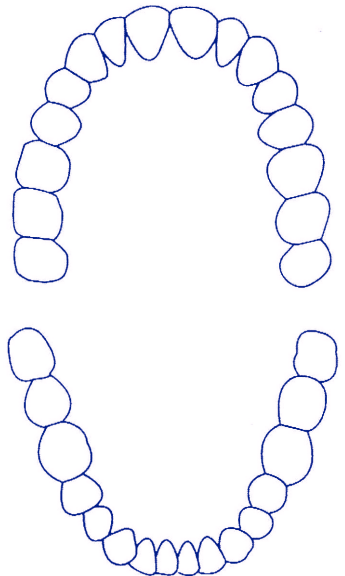
DELIVERY:

- Please allow at least 7 days from date of despatch
- Express Delivery - please ring for details

DATE SENT:

DATE OF RETURN:

CASE No:



CUSTOM MADE DEVICE FOR USE OF PATIENT ONLY

CLEAN BUT NOT STERILE

The Toothshop is a trading name of Diamond Dentures Ltd supplying this device which complies with the relevant essential requirements set out in annexe 1 of M.D.D. 93/42/EEC. Any relevant essential requirements not met are listed overleaf.

CA010031

White Copy: Dentist

Pink Copy: Patient

Yellow Copy: Laboratory

Business Reply
Licence Number
RSTK-EJRZ-XZSE



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Essex
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