



1

Dr. _____ (name) Acc./PO no.: _____

Post code: _____ - _____ Mobile: _____

DIRECT BONDING

For lab use only, real app.

..... - @
..... - @

2

No patient personal data

Your case reference: _____ Age: _____ Initials: ____ / ____

3

Delivery Date

U / L Date: _____ / _____ / _____

For lab use only, Opened by:

1	2
4	3

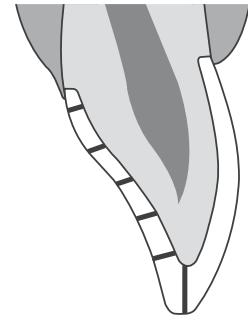
4

Detail:

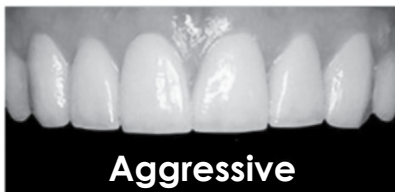
Select the shape of cusps:

☐ Flat ☐ Pointed ☐ Round

Please shade in where to stop the wax up on the palatal surface. →



Circle smile shape and draw preference onto picture.



Aggressive



Enhanced



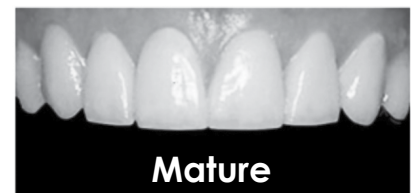
Dominant



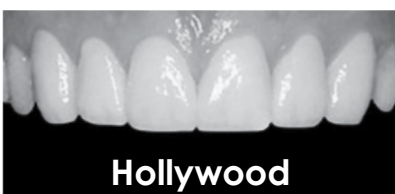
Functional



Focused



Mature



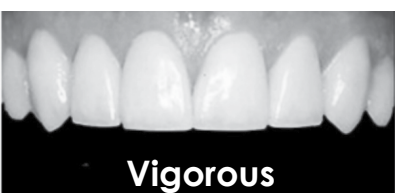
Hollywood



Natural



Oval



Vigorous



Soften



Youthful



5

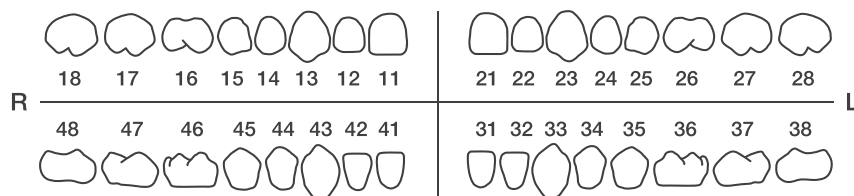
Instructions: (please tick and select teeth)

- ☐ Digital Wax Up
- ☐ Print Models

Tell us what you are sending:

Which scanner do you use?

- ☐ Digital Impressions
- ☐ Digital and Analogue impressions



Tell us which stent you want:

- ☐ Stent covering all teeth - soft or exaclear (please circle)
- ☐ Stent covering alternating teeth - soft or exaclear (please circle)
- ☐ Putty for temporaries

6

Additional Information:

7

Add materials and products to your order:

☐ G-aenial Universal Injectable (£33.99 4g) Shade: _____

- | | | | | | | | |
|---------------------------|--------------------------|---------------------------|---------------------------|---------------------------|----------------------------|--------------------------|--------------------------|
| <input type="radio"/> XBW | <input type="radio"/> BW | <input type="radio"/> A1 | <input type="radio"/> A2 | <input type="radio"/> A3 | <input type="radio"/> A3.5 | <input type="radio"/> A4 | <input type="radio"/> B1 |
| <input type="radio"/> B2 | <input type="radio"/> CV | <input type="radio"/> CVD | <input type="radio"/> AO1 | <input type="radio"/> AO2 | <input type="radio"/> AO3 | <input type="radio"/> AE | <input type="radio"/> JE |

- ☐ Exaclear Cartridge (£55 51g 2pack)
- ☐ GC Diapolisher Paste (£37.99 2g)
- ☐ G permio-bond (£99 50pk)
- ☐ G-aenial A'CHORD Refill Syringe 2.1ml 4g (£50) Shade: _____
- ☐ EVE Diacomp Plus Twist (Polisher bur for GC injectable) 11mm (£36), 14mm (£40)
- ☐ ED II Wireless Light Cure Woodpecker (£195)

ORDER YOUR
GC MATERIAL
HERE



8

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- ☐ Please always check your impressions, poor impressions may be liable to a minimum handling charge of £10
- ☐ This case is a remake case
- ☐ I have enclosed new or old components _____

Custom Made Device | Supplied in an unsterilized state | Terms and conditions apply | Visit medimatch.co.uk

Dental appliance information and delivery note: Dental product designed to satisfy the information, properties and detail of what has been prescribed by the above dentist. Purely for use for the patient described with the above reference. The product meets the general safety and performance requirements entailed in the Annex I and Annex VIII of the Medical Devices Directive and the United Kingdom Medical Devices Regulations act SI 2002 No. 618. This product may have been produced in either or both UK and China by MediMatch. **Instructions for use, storing & handling:** It is highly recommended that the product is stored in a clean and safe environment if not used immediately. It is also advised that there must be no contact with materials, liquids or acids that could cause disfiguration or damage to the product. The product should not be subjected to extreme heat. Where applicable, you should take care not to damage the dental piece(s) when removing from its model. **Prescriber Feedback:** To enable our laboratory to comply with the medical devices regulations for post market surveillance, please inform us of any feedback or issues regarding the enclosed device as soon as possible. THIS DENTAL APPLIANCE IS SUPPLIED IN AN UNSTERILIZED STATE