

OPG/CBCT Referral form

Date:

Referring Dentist :

Referring practice :

Patient Name :D.O.B :

Patient Address :

Home Number :

Mobile Number :

Email addresss :

Please circle requested scan

OPG(£65) Upper and Lower Jaw CBCT(£185) Upper/Lower Jaw CBCT(£150) Micro CT (endo)(£100)

CBCT Section ,please specify

Would you like a report on the CBCT scan(additional £80) YES NO

Reason for request and any clinical findings

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Practice stamp

Email
meavywayappointments@hotmail.co.uk
Post
Meavy Way Dental Practice
45 Crownhill RD
Plymouth
PL5 3AL

For more information, please call
01752 773412