

How to Order a CT or CBCT Scan

Step 1:

Go to <u>www.idtscans.com</u>:



To find a scanning site in your area click on **Search** (SEARCH):

	Find a scanning site in the UK or Ireland	
SEARCH	Cartistican Charles Control Co	

By clicking on **Search** you can find your preferred scanning site by **Location**, **Keyword** or from the **A-Z list**.



Please Note – not all scanning sites will accept online bookings. Please follow the instructions on the screen.



Step 2:

When you've found your preferred scanning site, select **Click Here to Request a Scan**:



If you already know the scanning site you want to use, please click on **Request a New Dental CT Scan** (REQUESTANEW DENTAL CT SCAN)

Step 3:

Log in (Login) with your email address and password to begin the booking process:



You will need to **Register as a Prescriber** (**Register as Prescriber**) if you have not already done so:



Step 4:

Choose Next – Scan D	etails (<mark>N</mark> e	ext - Scan Det	ails)	
E IDT	WWW.i Home	dtscans. About Us	COM Services Support	Knowledge Base Contact Us
Lour image	My Profile	My Home	Logout	
Back		Next - Scan Details		
CT Scan and Reforma	- atting - Co	ne Beam Ima	iging Centre	
Price includes CT Scan plus Reformattin	g			
This Wizard will help submit your Order				
Mandatory fields are marked with *				
Information is available by clicking or ho	vering over this icon	n:- 🤋		
You may exit this Wizard and restart or the Exit button.	select a different Wi	zard by clicking		
Please click Next - Scan Details to get st	arted.			
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Step 5:

Please enter the scan details and then continue to next page (\fbox Next - Scan Region). You must complete all sections marked with *

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Back	Exit	Next - Scan Region	
Scan Details Imaging Centre Equipment 	Please Select		
 Stent Clinical Question to be 	Yes ∪ No .		
			Please enter reasons for the scan
800 characters left			
Additional clinical info	ormation		Ex. Medical history, allergies, mobility, etc.

Step 6:

Please tick the required scan region – **Scan Maxilla** and / or **Scan Mandible**. Please tick **Full Arch** if applicable. Then continue to next page (Next - Patient Details).



Step 7:

Please complete all sections marked with * and then continue to next page (Next - Prescriber)

A and the monopole	WWW.idtscans.com Home About Us Support Knowledge Base Contact Us My Profile My Home Logout
Back	Exit Next - Prescriber
Patient Details Title First Name Last Name Date of birth	Ms V Jo Bloggs
* Sex Patient ID	1 May 1981 ✓ Male Female
* Address * Line 1	53 Windermere Way, London, England, W 53 Windermere Way
Line 3	London
County * Country	England V
 Post Code Tel 1 Tel 2 	W5 41 J 0208 819 9158
Tel 3 * Email	Info@idtscans.com ?

Step 8:

Please confirm the Prescriber's details and who will be clinically evaluating the images (you, another clinician or an IDT Radiology Report – for an additional fee). Please continue to the next page (Next - Reformatting Options).

Sour image	Home	About Us	COM Services Logout	Support	Knowledge Bas	e Contact Us
Back Exit	Next - R	eformatting Options				
Prescriber Details Name Reg. Number Tel 1 Images will be clinically evaluated an Myself Other Clinician IDT Radiology Report Price so far Refresh	0214709501 d findings recorded by [add GBP £]					
©2008-19 IDT	Scans		Terms & Cond	ditions		Privacy Policy

Step 9:

Please select your preferred reformatting option:

Cour image	Home	dtscans. About Us My Home	COM Services Logout	Support	Knowledge Base	Contact Us	Ι
Back		Next - File Format					_
Reformatting Options DICOM Files Simplant InVivo Viewer For more information about the Simpl Cone Beam Discount	[GBP £ [GBP £ [GBP £ [GBP £ ant software family pl [- GBP £	? ? ? ease click here					
Price so far GBP £ Refresh							

- DICOM Files the original axial slices from the scanner, with basic viewing software (DO NOT use this option if you want SIMPLANT View, Planner, Pro, Master, GO or OneShot format – select SIMPLANT instead).
- **Simplant** the service most frequently selected by SIMPLANT Planner and OneShot users. All datasets include "Separate Teeth" (virtual teeth extraction) and "Separate Skin" (transparent skin surface) where applicable.
- InVivo Viewer a service requested by dentists who use InVivo Dental software produced by Anatomage. Datasets are supplied in proprietary InVivo format. A copy of the InVivo Dental Viewer is also supplied.

Please continue to the next page (Next - File Format).

Step 10:

Choose your file format and any of the optional extras that you want (fees apply).

The example below is based on choosing **SIMPLANT** in step 8. If you choose **DICOM Files** in step 8, you will see a different list of file formats.

Returns we have	WWW.idtscans.com Home About Services Support Knowledge Contact My Profile My Home Logout
Back	Next - Advanced Processing
Ouput File Format Please select Simplant View or Simplant OneSh have a Simplant software licence. Simplant View [subtract - GBF] ® Simplant View [lncluded in Pr] Simplant Go [Included in Pr] Simplant Pro [Included in Pr] Simplant Master [Included in Pr] Simplant OneShot [add GBP £	? ot if the End User does not ? ice] ? ice] ? ice] ? ice] ? ice] ?
Optional Extras STL file (3D only) [add GBP £.] Physical Model [quotation will] Price so far (inc. 90% discount) GBP £ [R]] ? be sent separately] ? tefresh

NOTES:

End User is the person who will be viewing the images using SIMPLANT software. This is not necessarily the person who is requesting the scan.

- Simplant View is free viewing software. Select this option if the End User needs to view the images and take measurements but does not need to place virtual implants, create a treatment plan or order a surgical drill guide.
- **Simplant Planner** is not free (a licence is required). Select this option if the End User owns Simplant Planner software.
- Simplant GO is entry-level, user-friendly software optimised for ordering surgical guides. It is not free (a licence is required). Select this option if the End User owns Simplant GO software.
- Simplant Pro is not free (a licence is required). Select this option if the End User owns Simplant Pro software.
- **Simplant Master** is not free (a licence is required). Select this option if the End User owns Simplant Master software.
- Simplant OneShot is free viewing software with all the features of Simplant Planner, however, an extra fee is added to the price of the scan. Select this option if the End User doesn't own Simplant but needs to place virtual implants, create a treatment plan or order a surgical drill guide.
- **STL File** if you require a 3D dataset in STL (stereolithography) format. You can use this to print your own 3D model.
- **Physical Model** select this option if you require a 3D Model made by IDT using 3D printing.

Step 11:

You can select Draw ID Nerve at this point if you wish (an extra fee applies)

E IDT of		WWW.id	dtscans About Us	.COM Services	Support	Knowledge Base	Contact Us
or Lour image		Ms Fealy My Profile	My Home	Logout			
Back	Exit	Next -	Additional Services				
Advanced Processing Draw ID Nerve		[add GBP £	?				
Price so far GBP £	Refresh						

• The ID Nerve Canal will be estimated by a member of IDT Scans staff supervised by a Registered Clinical Scientist. IDT Scans cannot guarantee the accuracy of the ID Nerve Location. You should rely on your own professional judgement and not base your treatment plan or surgery on this estimate. If you are in doubt do not select this option.

Step 12:

Here you can select any additional services you would like/require (extra fees apply):

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^{Lour} im ²⁹	My Profile	My Home	Logout			
Back		Next - Delivery				
Optional Additional Services						
Disclaimer: Some of these services an treatment plan or surgery solely on t	re sub-contracted to qu he services provided h	ualified external spe ere. If you are in dou	cialists. IDT cannot guarant bt do not select these optic	ee and canno	t be held responsible f	for the accuracy of the result
Radiology Report	[add GBP £	?				
Please outline the patient's clinical h leading to the report request. Please	istory and describe an indicate any specific n	y symptoms egions of interest.				
800 characters left Implant Simulation Implantologist's Treatment Plan Please state the proposed implant si describe the clinical outcome to be a	[add GBP £ [add GBP £ ites, the implant system ichieved.	r to be used and				
800_characters left Price so far GBP £ Refresh						
©2008-19 IDT Sc	ans		Terms & Conditions			Privacy Policy

- **Radiology Report** tick this box if you want the images to be clinically evaluated and any abnormalities reported by a Dental Radiologist.
- Implant Simulation tick this box if you would like a Dental Technologist to provide screenshots illustrating possible implant sizes and locations.
- Implantologist's Treatment Plan tick this box if you would like a dentist specialising in Dental Implants to create a treatment plan for your patient.

Step 13:

Choose how you would like to receive the results. Please proceed to the next page (Next - Order Summary).



Step 14:

This page shows you a summary of your order. You can edit your order by clicking **Back.** When you are satisfied that everything is correct, please tick the boxes and click **Next - Referral Letter**.

eraking the	T T mage	Home	Itscans. About Us My Home	COM Services Logout	Support	Knowledge Base	Contact Us
Back	Exit	Ne	ext - Referral Letter				
Please review	your order carefully - Click	"Back" to change it.					
CT Scan and	d Reformatting - Cone B	leam Imaging Cent	tre				
Address Date of birth Sex Tel 1 Email Scan Details Imaging Centre Region Reasons Prescriber Email Tel Reformatting Reformatting	Ms Jo Bloggs 53 Windermere Way, Lonc 01-Apr-1981 female 0208 819 9158 info@idtscans.com Mandible, no Stent To assess bone suitability a placing dental implants. 0214709501 cOptions	ion, England, W5 4TJ	ructures prior to				
Format	Simplant						
Delivery Deliver via Deliver to Schedule I have revi I have read Price so far G	MailBigFile 5-10 working days after th iewed this order and confirr d and agree to abide by IDT BP f Refresh	ie scan n that it is correct Scans Terms & Condi	tions				

Step 15:

The **Referral Letter** must be signed by the prescribing dentist, otherwise it will not be accepted by the scanning site. If you are the prescribing dentist, you can sign the Referral Letter online, or email it to yourself to sign later.

Couring the most	Home	About Us	COM Services	Support	Knowledge Base	Contact Us
Back		Next - Payment				
Referral Letter A <i>Referral Letter</i> has been created auton Please review it carefully here .	natically.					
Please Indicate your approval by signing box below. Sign Online Now	in the					
Alternatively you can print the Referral L your practice letterhead and sign it offlin Sign Offline	letter on Ie.					
Click here for the Referral Letter. Ple print, sign and scan it, then upload it email it to bookings@idtscans.com	ease here or					
A copy of the Referral Letter will be emai you for your records.	iled to					
Price so far GBP £						

Step 16:

Choose how you would like to pay for the scan. You can either **Pay Online** immediately with a Credit Card, Debit Card, PayPal or select **Pay By Invoice.**

<u>Unless you have arranged credit facilities with us, payment will be required before the scan can take place.</u>

If you select 'Pay By Invoice', we will send an Invoice to you or your patient, but we may not schedule the scan until the Invoice has been paid.

If you wish to avoid delays we suggest that you Pay Online.

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OF Y	our image	My Profile	My Home	Logout				
Back]	Exit	Submit Order					
Paym To ens	ent Options ure our fastest turnaroun	d times, please pay online no	w.					
۲	Credit card		?					
0	PayPal	PayPal	?					
0	Invoice		?					
Final F	Price GBP £							

Step 17:

If you choose to pay by Credit or Debit Card, you will be redirected to the **Stripe** secure web payment services where your card details will be taken.

Please click **Pay** when you are ready to pay. Alternatively, you can select **Image Diagnostic Technology Limited** to return to IDT's website and choose a different payment option.

	Or	
Email		
email@example.com		
Payment method		
Card information		
1234 1234 1234 1234	VISA	💌 🌃 🥵
MM / YY	CVC	
Cardholder name		
Full name on card		
Country or region		
United Kingdom		~
Postal code		
Pay faster on Image Diageverywhere Link is accept	mation for 1-clic mostic Technolog	ck checkout y Limited and
everywhere Link is accep	ted.	
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If you choose to pay by PayPal, you will be redirected to PayPal's website.

Please click **Next** when you are ready to pay. Alternatively, you can select **Cancel and return to Image Diagnostic Ltd** and choose a different payment option.

Enter your email or mobile number to get started.

Email or mobile number
Next
Or
Pay with a Bank Account or Credit Card
Cancel and return to Image Diagnostic Technology Ltd
English Français Español 中文

If you need assistance, please phone us while you are at the computer on

+ 44 20 8819 9158 UK + 44 7767 366596 Mobile + 353 21 470 9501 IRL

and we will do our best to help.