



Imaging Referral Form

Referred By:

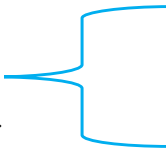
Name
Address
.....
Email
Tel
Date/...../..... Signature.....

Patient Details:

Title Forename
Surname
Address.....
.....
DOB/...../..... Tel
Possibility of pregnancy? YES / NO

Payment: *

Patient to pay Medical Insurance:
 Account to referrer P.O.



Insurance company
Membership No
Authorisation No

Examination Required:

Digital Panoramic Digital Cephalometric: With tracing report
 Cone Beam CT My patient will wear a stent Optical Scan: Model Wax-up

Purpose: (mandatory)

Region of Interest:

Dental:

Upper jaw

Lower jaw

Small Volume: please use the tooth diagram

8	7	6	5	4	3	2	1	1	2	3	4	5	6	7	8
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(if no teeth are selected, the whole jaw will be scanned)

Maxillofacial / ENT:

Zygomas Paranasal Sinus Orbits
 Right TMJ Maxillary Sinus Right Ear
 Left TMJ Frontal Sinus Left Ear
 Full Height Sleep Apnea Airways

Software Options for Cone Beam CT Scans:

CT Viewer DICOM for (please indicate) Nobel Clinician Viewer
SimPlant Conversion: One Shot View Planner Without teeth segmentation With teeth segmentation
 Other Please contact me to discuss options

Delivery Options:

CD Via cavendishimaging.com
 Other

Package: Scan + Anatomical Model
 Scan + Dental Implant Planning

Notes

e.g. specific imaging parameters / protocols / scanner preference / concern / medical history

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.....
.....

IRMER 2000 Regulations: Cavendish Imaging does not routinely report upon scans or radiographs. To comply with the IRMER 2000 regulations all radiographs and scans are required to be reviewed and reported into the clinical notes by the referring practitioner or by a radiologist. Cavendish Imaging strongly recommends that all CT and other radiographic examinations should be reported upon to rule out the possibility of coincidental pathology. Cavendish Imaging offers a reporting service by a Consultant Radiologist.

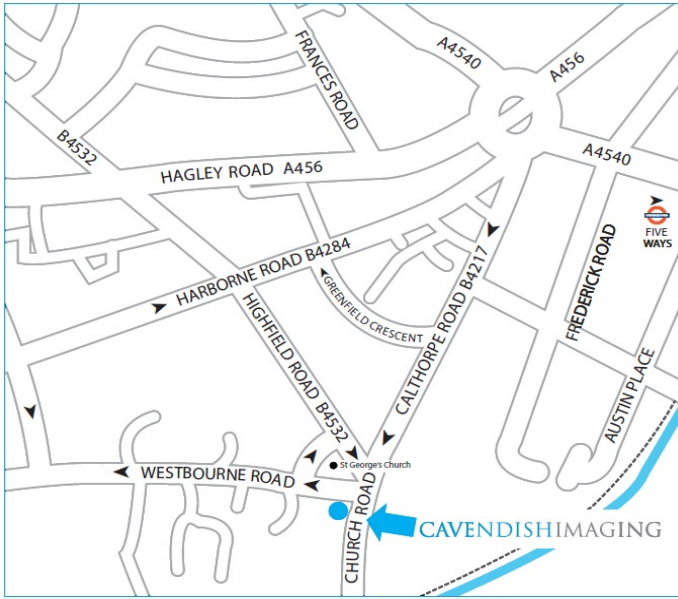
I have added my patient's **medical history** in the notes above for this radiographic examination to be reported upon by your Consultant Radiologist
 I will make my own reporting arrangements



CAVENDISHIMAGING

Dental and Medical Imaging, Anatomical Model Specialists

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By car from the M6 :M6

Exit the M6 at junction 6 on to the A38(M) Aston Expressway to City Centre. Stay in the right hand lane and follow the A38 over the flyover and down into St.Chad's tunnel and through the Queensway tunnel. Move into the left hand lane, join the slip road to the roundabout, where you turn right at this island.

You are now on Holloway Head. Turn left at the top of the hill into Wheeley's Lane, before the petrol station. At the traffic lights, go straight ahead over a dual carriageway and along Wheeley's Road. Take the first turn on your right into St.James Road, and follow to the end. Turn left into Calthorpe Road, keep in the left hand lane and proceed to the traffic lights. Go straight on at the traffic lights into Church Road and turn immediately into the Westbourne Centre, the first building on your right.

By Bus :

Bus routes No.22 and 23 go from Colmore Row in the City Centre at Stand A and go to Harborne. Alight at the bus stop in Westbourne Road opposite St George's Church, just outside the Westbourne Centre.

By Rail:

Nearest Railway station is Five Ways Station, about a 20 minute walk. Cavendish Imaging is on the first floor of the building, with stairs access only.

We are open Monday, Wednesday, and Friday, from 9:00 am until 5:00 pm.

Please allow 30 minutes for your examination.

We accept all major credit cards, cheques and cash.

Cavendish Imaging is registered with most UK insurance companies. If your insurance covers the whole examination, you will not need to pay anything on the day of your examination as we will claim these costs from your insurance directly. You just need to bring your insurance membership and authorisation number.

Standard Terms & Conditions:

Cavendish Imaging services and products aim at assisting professionals and patients in diagnosis and treatment planning. Cavendish Imaging is not providing and is not responsible for providing any interpretation of images or clinical service such as diagnosis or treatment. Radiology reports can be ordered through Cavendish Imaging; they are provided under the named radiologist's professional responsibility, not under the responsibility of Cavendish Imaging. Data conversion (e.g. simplant, tracing) can be ordered though Cavendish Imaging but the results are not the responsibility of Cavendish Imaging.

Cavendish Imaging endeavours to provide the very highest quality results, however Cavendish Imaging will not accept any liability for incorrect or incomplete information on the referral form or inappropriate or inadequate patient preparation which may compromise the value of the final results. By referring a patient, the referring practitioner agrees to the terms of the Cavendish Imaging standard Service Level Agreement.

Cavendish Imaging endeavours to despatch the images to the referrer and/or the patient as quickly as possible, however e.g. equipment malfunction may introduce delays. Cavendish Imaging reserves the right not to accept referrals in such cases. Also, Cavendish Imaging cannot guarantee when radiology reports and data conversions will be available to the referrers as they are services that we outsource. Cavendish Imaging must be notified 24 hours in advance of the patient's visit to the imaging centre if a particular urgent service is required.

* To be completed by the patient on the day of visit:

Patients who are self-paying for the service(s) that Cavendish Imaging provides, need to settle their accounts on the day of their visit. If not, delay in the processing of the order or the delivery of the complete service may occur.

Patients who are not self-paying for the service(s) that Cavendish Imaging provides, will have the invoice for the service(s) sent to their insurer, referrer, or third party, providing adequate documentation is given to us.

Cavendish Imaging cannot accept any liability for any disagreement between patients and their insurer, referrer, or third party providing payment to Cavendish Imaging on their behalf. In the event of non-payment to Cavendish Imaging, within 2 months of the delivery of the service, the patient is ultimately responsible for settling the invoice.

I confirm that I have read and understood the terms and conditions above.

Name _____ Date _____ Signature _____