



Imaging Referral Form

Referred By:

Clinician's Name
Practice
Address
.....
Email
Tel.
Date / / Signature

Patient Details:

Title Forename
Surname
Address
.....
Email
Tel.
D.O.B. / /

Billing Options:

Patient to Pay Medical Insurance
 Account to referrer P.O.

Insurance company
Membership No
Authorisation No

Examination Required:

Panoramic X-Ray Cephalometric X-Ray With Tracing Report 3D Photography With Clinical Measurements
 Cone Beam CT My patient will wear a stent Scan stent separately Optical Scan Model Wax-up

Package:

Scan + Anatomical Model
 Scan + Dental Implant Planning

Purpose (mandatory):

Region of Interest:

Dental*:

Full upper jaw Full lower jaw Small Volume: please use the tooth diagram

Maxillofacial/ENT:

Zygomas Orbits
 Right TMJ Right Ear
 Left TMJ Left Ear
 Paranasal Sinus Full Height
 Frontal Sinus Sleep Apnea
 Maxillary Sinus Airways
(incl. ostium)

* **IR(ME)R Regulations:** To comply, all radiographs must be clinically evaluated to rule out the possibility of coincidental pathology. Cavendish Imaging does not routinely report on dental scans or x-rays; by referring for dental imaging, the referrer accepts the responsibility for arranging reporting. Alternatively, Cavendish Imaging offers a radiology reporting service on request.

Radiology Report requested. I have added my patient's **medical history and the clinical question(s)** in the Notes section below for the Radiologist's attention. I will discuss the report with my patient and I will make a copy available to the patient on request.

Software Options for Cone Beam CT Scans:

CT Viewer DICOM for (please indicate)
 Simplant Conversion Without teeth segmentation Nobel Clinician Viewer Please contact me to discuss options

Delivery Options:

Via cavendishimaging.com
 Other

Notes: specific imaging parameters / scanner preference / medical history and clinical question(s) for the Radiologist / concerns / specific patient needs / additional information

Regulated and rated by:





CAVENDISHIMAGING

Medical and Dental Imaging, Anatomical Model Specialists

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Walk-in Service:

Monday	9am to 5pm
Tuesday	10am to 5pm
Wednesday	9am to 5pm
Thursday	9am to 5pm
Friday	9am to 5pm

Regulated and rated by:



Our average **walk-in visit time is 45-60 minutes.**

Appointment Service (contact us to arrange):

Selected evenings 5:45pm to 7pm and selected Saturdays.

Please allow **30 minutes for your appointment.**

Access to our dedicated radiography suite is via stairs or lift.
Please ring the bell at street level for the disabled ramp.

We accept all **major credit cards** apart from Amex.

Standard Terms & Conditions:

Cavendish Imaging services and products aim to assist healthcare professionals with diagnosis and treatment planning. Cavendish Imaging is not providing and is not responsible for providing any clinical treatment.

Cavendish Imaging endeavours to provide the 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.

Cavendish Imaging endeavours to despatch the images to the referrer and/or the patient in a timely manner, however unforeseen issues, 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 unless the timelines are explicitly agreed in advance. Cavendish Imaging must be notified a full working day in advance if a particular service is required urgently.

If the radiology report is requested and a copy is needed by the patient, **the patient should request it from their referrer first.** Cavendish Imaging can supply the radiology report to the patient from three weeks after the date of the report, on request.

Payment and Billing:

Cavendish Imaging is registered with **most UK medical insurance companies.** If the insurance covers the whole examination, there will be nothing to pay on the day of the examination as we will claim these costs from the insurer directly. Patients just need to bring on the day of their visit their insurance membership and **authorisation number specific to the imaging to be performed.**

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

Patients who are not self-paying for the services that Cavendish Imaging provides, will have the invoice for the services sent to their insurer/referrer/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 (this does not apply to NHS-funded referrals).

Radiation Exposure Risks:

Patients wishing to know more about the impact of the radiation used during the imaging procedure can refer to the Cone Beam CT Patient Information leaflet on display at the centre and discuss it with the equipment operator.

I confirm that I have read and understood the information presented.

Name: Date: Signature: