

DENTAL IMAGING REQUEST

PATIENT DETAILS

Name: D.O.B: / /
 Address: Telephone:
 Suburb: P/code: Medicare No:

DENTAL

- OPG Bone Age
 Lateral Cephalogram TMJ's
 Frontal (PA) Cephalogram Lat C Spine

CT Dentascan

- Maxilla
 Mandible
 Both



CLINICAL NOTES

- Implant Placement Mandibular Canal Marking Maxillofacial Surgery
 Trauma Sinuses TMJ
 Impacted Teeth Orthodontic Planning Soft Tissue / Airway
 Other: _____

Image Delivery:

- On-line Films CD

REFERRER DETAILS

Referrer Name: Provider Number:
 Address: Telephone:
 Postcode:
 Signature: Date: / /

OFFICE USE ONLY

Verbal Consent Given
 Procedure:
 Justified and approved by:
 Date: / /

Time out check...

1. Correct Patient
 2. Correct exam
 3. Correct side
 4. Pregnant YES NO

Wendouree Clinic

1017 Howitt Street, Wendouree 3355
 T: 4333 0333
 F: 5303 0218
 W: www.sovereignradiology.com.au
 E: info@sovereignradiology.com.au

Sebastopol Clinic

Ground Floor 49-51 Albert Street, Sebastopol 3356
 T: 4333 0355
 F: 9957 0366
 W: www.sovereignradiology.com.au
 E: sebas@sovereignradiology.com.au

OPENING HOURS: Mon to Fri 8:30am to 5:30pm

OPG is a walk-in service. No appointment required.

Please bring this request form and your Medicare card to the appointment

LOCATION	X-RAY	OPG	DEXA	US	ECHO	CT	MRI	IR
Wendouree Clinic	✓	✓	✗	✓	✓	✓	✓	✓
Sebastopol Clinic	✓	✓	✓	✓	✗	✓	✗	✓



IR = Interventional Radiology & Pain Management



"A proudly Ballarat owned and operated clinic"