Derwent Dental Care

Derwent House
Wakefield Road
Cockermouth
CA13 0HS
01900 824111
derwentdentalcare.co.uk
reception@derwentdentalcare.co.uk

CBCT Scan & Digital Impression referrals

Patient Name: ……

Date of Birth: ……

Address: ……
……

Contact Number: ……
Patients Email: ……

Imaging required:

Digital Impression Upper & Lower	£150	
CBCT Scan (without report) with digital Impression upper & lower	£270	
CBCT scan (without report)	£150	
OPT	£80	

Area requiring imaging:

Clinical justification for imaging:

Referring Dentist & Practice:
……
……

Please email to referral@derwentdentalcare.co.uk