

<u>Crabtree Road Dental Practice</u> <u>Endodontic Referral Form</u>

Please Email the referral to: <u>Crabtreecare@hotmail.com</u>

Dentist Details

Dentist Referring Name	
Practice Name	
& Address	
Telephone Number	
Email Address	
Patient Details	
Full Name	
Address	
Date of Birth	
Telephone	
Email	
Medical History:	
Medication	
Allergies	

Referral Details		
Tooth to be addressed		
Pain 0- No pain 1- Mild/mod 2- Severe Pain/ Urgent	0 / 1 / 2	
Has the tooth had a previous RCT	YES / NO	
Further Details		
Radiographs/ images	YES / NO Please attach	

Endodontic Referral Prices

Consultation £80

(non-refundable, credited towards treatment if suitable)

Incisors £400

Canines and premolars £450

Molar £800

Repeat molar root canal treatment quotation on consultation

 $*Prices\ subject\ to\ change\ on\ complexity\ of\ case\ following\ consultation$