



Patient _____ Doctor _____
 Patient Date of Birth _____ Office Name _____
 Patient Phone _____ Office City _____
 Patient Email _____ Office Phone _____
 Date of next Appointment _____

Bill Doctor for Scan Patient charged unless Bill Doctor is checked

3D CBCT IMAGING

FIELD OF VIEW:

- One Arch
- Both Arches
- Lower Skull (24x19cm)
- Limited Field of View (Focus, 3 consecutive teeth)

AREA OF INTEREST

Tooth# _____

INDICATION:

- Implant
 - Scan w/ appliance provided by doctor
 - Scan in occlusion (default 5mm separation)
- Endo
- Impaction
- TMJ
 - Open Closed
 - Wearing Appliance
- Pathology
- Sleep Apnea/Airway
- Orthognathic
- Sinus
- Chiropractic- Upper Cervical
- Other _____

ORTHODONTIC

- 3D Ortho Bundle** CBCT scan, ceph, pano, TMJ, airway, photos
- 2D Ortho Bundle** Ceph, ceph tracing, pano and photos
- 2D Limited Ortho Bundle** ceph, pano, photos

GUIDED SURGERY

- Dual scan - Marked denture or radiographic guide
- Reveal to design guide and send proposal to doctor (full arch scan required)
- Provide DICOMS for doctor to plan guided surgery without Reveal

* Please provide stone model OR request optical impression below

INTRAORAL IMPRESSION

(for implants and printed models)

- Invisalign
- Invisalign
- Invisalign Refinement Scan
- Invisalign and iRecord
- Vivera Retainer
arch wire removed before scan
- Surgical Guide Impression
- "STL" File for Laboratory Use

Laboratory Name _____

2D IMAGING

- Pano
- Ceph Tracing
- CBCT FMX
- Ceph
- Photography

DELIVERY

- Online
- Print
- CD
- DICOMS only
- Jpeg
- Rush (4 hour + \$50)
- Rush (1 hour + \$150)
- Radiologist Review (4 day return, 1 day with rush, additional charge)

Send digital copy to another doctor

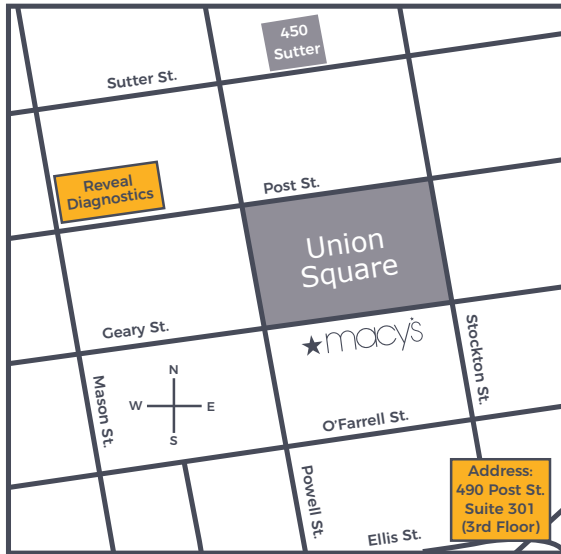
Doctor _____
 Email _____
 Office Phone _____

Reason for Scan/ Special Instructions

Doctor Signature _____ **Date** _____

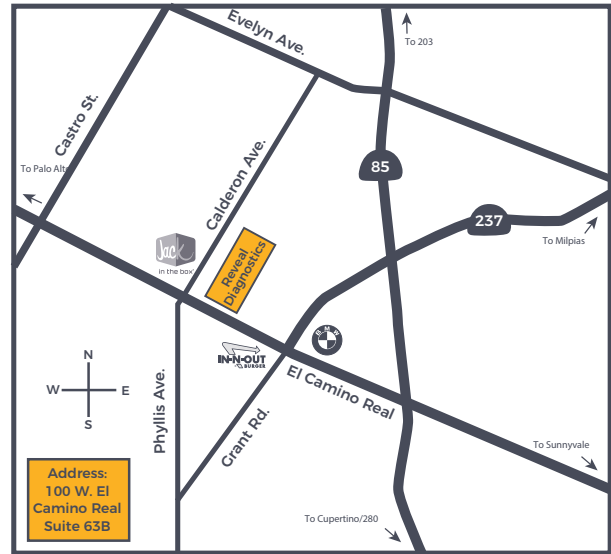
State law requires this order be presented at the time of service. Payment in full is collected at the appointment.
 Check, cash, visa, mastercard, discover, Amex, care credit, HSA and FSA.

San Francisco 490 Post St., Suite 301 94102



Parking: 520 Mason (located inside building)
333 Post Street (Union Square Garage)
BART & Muni: Powell Station, follow Powell four blocks to Post, turn left, walk one more block

Mountain View 100 W. El Camino, Suite 63B, 94040



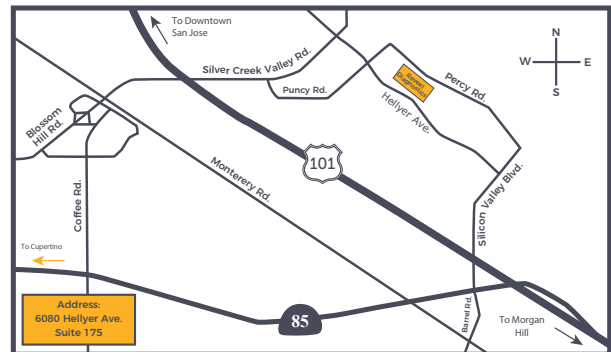
Location: Next to Smiles Dental
Parking: Enter on Calderon Ave., first right turn

Oakland 4217 Piedmont Ave., Suite B, 94611



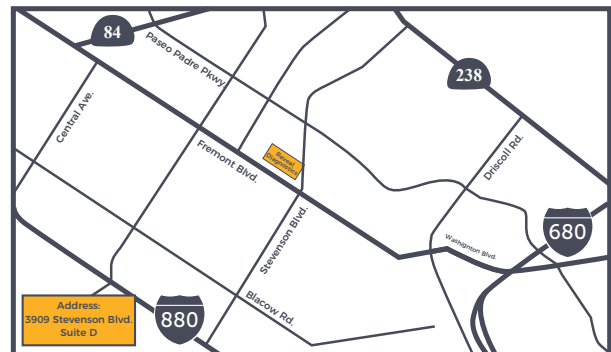
Location: Across from Fenton's, upstairs from The Dental Touch; not ADA accessible
Parking: Street parking on Piedmont (metered)
BART: 1 mile walk from MacArthur Station; go east on 40th St./40th St. Way, left on Piedmont

San Jose 6080 Hellyer Ave., Suite 175, 95138



Location: Last building in second row on the right

Fremont 3909 Stevenson Blvd., Suite D, 94538



Location: We are on the bottom floor of a 6 story building, and opposite the gas station. Google maps will take you to the gas station. You can park there and walk around the building. We share the space with Forest Chiropractic.

