

Service Level Agreement for the Referral of Patients to The Scanning Suite for Dental CBCT Examinations

Between: <i>Referring Practice Name and Address:</i>	And:
	The Scanning Suite
	12 Spring Garden St
	Lancaster
	LA1 1RQ
Postcode:	
Tel:	Tel: 020 3747 2940
Email:	Email: info@scanningsuite.co.uk
Legal Person:*	Legal person: Minesh Talati

Referral Criteria for Dental Exposures

The document to be used by both parties as the basis for the referral of patients and the justification and authorisation of dental CBCT examinations is 'Radiation Protection: Cone Beam CT for Dental and Maxillofacial Radiology (Evidence Based Guidelines)'. In May 2012 this document was formally published in the European Commission's Radiation Protection series. It can be downloaded from sedentexct.eu and is freely available and accessible to all.

Entitlement of Person

Enter below details of all persons at the referring practice who will refer patients for dental CBCT examination and/or report on dental CBCT images. Evidence of training (copies of CPD certificates) meeting the requirements of the HPA/BSDMFR Core Curriculum in Dental CBCT must be provided.

For Completion by Referring Practice


For Completion by The Scanning Suite

Name of Referring Clinicians	GDC/GMC Reg No	IRMER Roles (tick)			Registration Checked	Training Checked
		Referrer	Reporter (clinical evaluation)	Evidence Enclosed		

Signature of Agreement:

We the undersigned agree:

- To use the referral criteria stated above
- That evidence of adequate training has been provided for each of the persons named above appropriate to their IRMER roles
- That adequate information will accompany each referred patient to allow the justification process to proceed as set out in the Referral Form (available at www.scanning.suite.co.uk).

For the Referring Practice:	For:
Practice Name:	The Scanning Suite
Legal Person:*	Legal Person:* Minesh Talati
Signature:	Signature: 
Date:	Date: 26th June 2021

*The 'legal person' is the person/body corporate that takes legal responsibility for implementing the Ionising Radiations Regulation 1999 and the Ionising Radiation (Medical Exposure) Regulations 2000 within the Practice.

Please ensure copies of CPD certificates are enclosed for each clinician and return to:

Sarah Clarke,
The Scanning Suite,
12 Spring Garden St,
Lancaster,
LA1 1RQ

