



**Crystal
Dental
Imaging**

Dental Referral

**ICS
Imaging**



Last Name : _____ First Name : _____ D.O.B : _____ Sex M F
 Address : _____
 Phone : _____ Pregnant Yes No

Cone Beam

- MAXILLA IMPLANT SURVEY
 MANDIBLE IAN SURVEY

Dental Imaging

- OPG
 LAT CEPH

Regions / Clinical

Special Instructions : _____

18	17	16	15	14	13	12	11	21	22	23	24	25	26	27	28
48	47	46	45	44	43	42	41	31	32	33	34	35	36	37	38

Referrer Details

Date : _____
 Referring Dr : _____
 Signature : _____ Prov. No : _____
 Address : _____
 Email : _____

Image Delivery

- Email
 Hard copy
 DVD
(Requires Viewer for Implants)

For Office Use Only

Health Fund
 Medicare
 Oasis No

Collection of Films - Patient Signature: _____ Date: _____



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1029 Whitehorse Rd
Box Hill, VIC 3128

* Parking available at Court Street carpark *



470 Blackburn Rd
Glen Waverley, VIC 3150



41 - 46 Albert St
Moë, VIC 3825



189 Graham St
Wonthaggi, VIC 3995

CRYSTAL DENTAL IMAGING BRANCHES AND FACILITIES

Branch	Address	Phone	Fax	OPG	LAT CEPH	3D
BOX HILL	1029 Whitehorse Rd	9897 1569	9899 7778	✓	✓	✓
GLEN WAVERLEY	470 Blackburn Rd	9802 0198	9803 7378	✓	✓	
MOE	41 - 46 Albert St	5127 1866	5127 1013	✓	✓	
WONTHAGGI	189 Graham St	5672 1026	5672 4495	✓	✓	

Opening Hours:
 BOX HILL | Mon to Fri: 9am - 6pm | Sat: 9am - 3pm | Sun: CLOSED
 GLEN WAVERLEY | Mon to Fri: 9am - 6pm | Sat: 9am - 1pm | Sun: CLOSED
 MOE | Mon to Fri: 9am - 6pm | Sat: CLOSED | Sun: CLOSED
 WONTHAGGI | Mon to Fri: 9am - 6pm | Sat: 9am - 2pm | Sun: CLOSED

"Your doctor has recommended that you use Crystal Dental Imaging. You may choose another provider but please discuss this with your doctor first".