

Oral Radiology Service

Dr. Meredith Brownlee • Dr. Catherine Nolet-Lévesque

3250 Bloor St West, Unit 115
Toronto, ON M8X 2X9

(437) 774 - 8221
info@thebloorclinic.com

****Please send or email any films taken in the area of clinical interest.
N.B. All sections to be completed as per RCDSO for CT to be taken.****

First Name:

Last Name:

Gender:

Age:

DOB:

Mailing Address:

Referring Dentist:

Office email:

Region of Interest - *specify desired sites. For implants, you must indicate*
EACH implant site:

Pertinent Clinical Details:

Pertinent Medical History:

Provisional Diagnosis:

Proposed Treatment:

Report Preferences:

Imaging:

Other:

Please email the completed form to radiology@thebloorclinic.com

Based on details above, smallest field of view(s) CBCT will be taken. .