

Queensway Dental Practice
Children Private Patient Details

Mr Mst Miss

Surname _____

Forename(s) _____

Date of Birth _____

Address _____

Town _____

Postcode _____

Tel: Home _____

Tel: Business _____

Mobile (1) _____

Mobile (2) _____

Home Email _____

Work Email _____

Occupation _____

Introduced by

Medical History Alert

Date last Medical History Signed:

Insurance Details

Name of previous/current dentist

Other Notes

**I realise that I am being treated as a private patient
And I undertake to pay the necessary fees.**

Signed:-

Dated:-

*Queenway Dental Practice
Children Private Fee Guide*

Examination (Free if Parent is a new patient)	£7
Small X-ray (PA)	£5
Large X-ray (OPG)	£10
Silver Fillings (From)	£15
White Fillings (From)	£25
Pulpectomy Adult teeth	£75
Pulpotomy Milk Teeth (From)	£35
Extraction (Simple) (From)	£20
Extraction (Complex) (From)	£50
Emergency Fee	Free
Prescription (Private)	Free
Metal Braces (Single Arch)	£1900
Metal Braces (dual arch) (From)	£1900
Invisible braces (From)	£1900