

Healthy Smiles Dental Practice, 6 Grange Avenue, Luton, LU4 9AT

Please post this form to the surgery and we will send out an appointment to your patient. Thank-You.

Dr. Kumar P Thanki, BDS (Lon) Dental Surgeon, Special Interest: Endodontics.

Referral letter for orthograde root canal treatment only

Private Referral Only

Fees guide for 2021: all fees are from and are inclusive of all radiographs and temporary restorations following RCT:
CONSULTATION: £40, Teeth 12345: £400, MOLARS: £500 ONWARDS. RE-ROOT CANAL: as per quote. Treatment is offered in the capacity of "Special Interest only" and NOT in the Capacity of a Specialist Endodontist.

Please diagnose and provide root canal treatment for the patient:

Name: _____

Address: _____

Tel: _____ D.O.B _____

If the patient is happy to receive appointment details by e mail then please provide an e mail ID.

Patients E Mail:

Has this patient been referred before (please circle) YES NO

Please diagnose and treat for Root Canal on:

8 7 6 5 4 3 2 1 / 1 2 3 4 5 6 7 8
8 7 6 5 4 3 2 1 / 1 2 3 4 5 6 7 8

Referring Dental Surgeon:

Name and Address: _____

Signature _____

Date: _____

Stamp:

☐ Tick Box if more forms are needed