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“the smarter way to smile”

IQ ORTHODONTICS

NHS Private

Tooth-coloured braces Incognito™ (lingual) Clear aligners
Damon® Hidden braces

Referring dentist details:

Name

Practice name & address

Postcode

Telephone

Facsimile

Email

Patient details:

Name

Title

Address

Postcode

Telephone

Mobile

Email

Date of birth

Referral information

(Please include reason for referral, specific problem areas & any relevant radiographs)

Medical history

(Please continue overleaf if more space is required)

We can accept referrals by post, email or online