|  |  |  |
| --- | --- | --- |
| PRO 3 | **Protocol for Cephalometric Exposures** | *Name of Dental Practice* |

Guideline exposure settings for cephalometric exposures for adults and children (up to 16 years old).

*Complete for each cephalometric x-ray machine in the practice (duplicate tables as required).*

|  |  |  |
| --- | --- | --- |
| **Model & Manufacturer:** | **Serial no.:** | |
| **Location:** | | **kV rating:** |
|  | | |
| **Image receptor details:** | | |
| **Film type/sensitivity/density/coefficient/other setting used for this x-ray machine**: | | |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Examination** | **Exposure Settings** e.g. anatomical exposure selection, exposure time etc | **Comments**  e.g. special techniques, recommended views, specific dose reduction details |
| **Adult** | Lat Ceph |  |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Child** | Lat Ceph |  |  |