|  |  |  |
| --- | --- | --- |
| PRO 1 | **Protocol for Intra-Oral Exposures**  | *Name of Dental Practice* |

Guideline exposure settings for intra-oral exposures for adults and children (up to 16 years old). *Complete for each intra-oral 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** (if anatomical selection exposure control used): |

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Examination** | **Exposure Settings** e.g. anatomical exposure selection, exposure time etc | **Comments**e.g. special techniques, recommended views, specific dose reduction details  |
| **Adult** | Upper | 1-34-56-8 |  |  |
| Lower | 1-34-56-8 |  |  |
| Bitewing |  |  |
| Occlusals |  |  |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Child** | Upper | 1-34-56-8 |  |  |
| Lower | 1-34-56-8 |  |  |
| Bitewing |  |  |
| Occlusals |  |  |