

Orthodontic Key Performance Indicators

How to create, capture and submit an Orthodontic PAR Score Sample

It is a requirement for providers working with an NHS England Orthodontic contract that started in April 2019 or after to submit independently calibrated Peer Assessment Rating (PAR) scores twice per year along with the number of Managed Clinical Networks (MCN) meetings that they have attended once per year.

Please note, NHS orthodontic contracts starting **prior to April 2019** must submit their PAR scores on the FP170 in the Orthodontic Conclusion section of the completion form, these contracts must submit:

100% of cases, if the contract has 20 or fewer cases per year

or

20 cases plus 10% of the remaining cases, if the contract has more than 20 cases per year

This guide will show you how to:

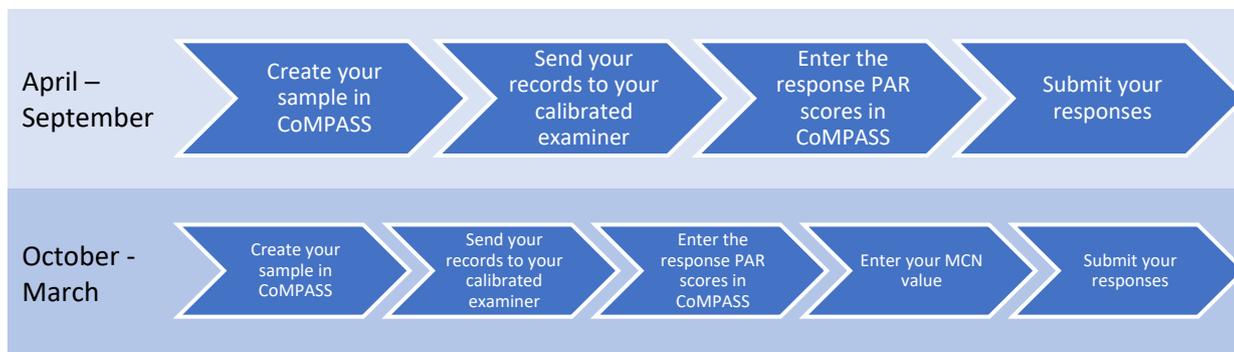
- Create an Orthodontic PAR Score Sample Request
- Capture the Calibrated Orthodontic PAR Scores
- Submit the Calibrated Orthodontic PAR Scores
- View past Calibrated Orthodontic PAR Score Samples
- Submit your MCN attendance

You will need:

1. Access to the NHSBSA CoMPASS system.
 - a. If you do not have access to CoMPASS, please see further details on how to gain access on the NHSBSA website:

<https://www.nhsbsa.nhs.uk/compass>

The Calibrated PAR Score & MCN Process



Please ensure you leave plenty of time to arrange the assessment of your requested cases by your chosen independent calibrated examiner and to submit your results, the returned information **must be** submitted no later than the last day of each six-month period.

How to create an Orthodontic PAR Score Sample

Step 1: Log into the Compass system.

NHS
Business Services Authority

Please log in with your username and password below

Username

Password

Memorable word characters

1st 4th 7th

Log In

[Change Password](#) | [Change Memorable Word](#) | [FAQ](#) | [Cookie Usage](#) | [Privacy](#) | [Forgotten Password or Memorable Word](#) | [Blocked Account](#)

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Messages

Welcome
to the Contract Management, Payment And Superannuation System

Frequently Asked Questions

- › Ask Us
- › eDEN Reporting
- › Forgotten Password or Memorable Word
- › Total Reward Statements
- › NHS Choices Provider Login
- › Compass Accessibility Statement
- › Compass Guides

[View All...](#)

Step 2: Click on the 'Activity' folder.

- ### Homepage Menu
- My Profile
 - User Maintenance
 - Provider
 - Contract
 - Performer
 - Payments
 - Pensions
 - ARR
 - Activity**
 - Reporting
 - COVID-19
 - Participant Update
 - PPE Reimbursement
 - Sedation declaration

Step 3: To request a new half yearly sample (Ortho PAR Score Sample Request), click on **Ortho PAR Score Sample Request**.

Homepage Menu

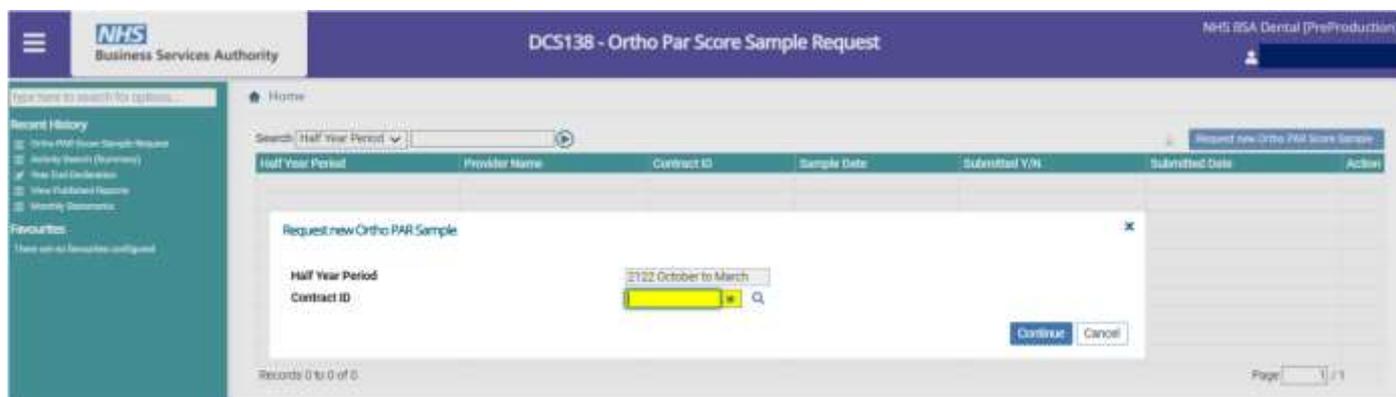
-  [Back To Provider Homepage](#)
-  [Activity Actuals](#)
-  [Activity Actuals \(Performer\)](#)
-  [Activity Authorisation Search](#)
-  [Activity Creation](#)
-  [Activity Creation \(Performer\)](#)
-  [Activity Dashboard](#)
-  [Activity Dashboard \(Performer\)](#)
-  [Activity Report for Quarter 4](#)
-  [Activity Report for Quarter 4 \(Performer\)](#)
-  [Activity Report for Quarters 1 and 2 \(Calendar Month\)](#)
-  [Activity Report for Quarters 1 and 2 \(Scheduling Month\)](#)
-  [Activity Report for Quarters 1 and 2 \(Performer\)](#)
-  [Activity Search \(Detail\)](#)
-  [Activity Search \(Detail - Performer\)](#)
-  [Activity Search \(Summary\)](#)
-  [Activity Search \(Summary - Performer\)](#)
-  [Maintain or Finalise Draft Claims](#)
-  [Maintain or Finalise Draft Claims \(Performer\)](#)
-  [Ortho PAR Score Capture and Submission](#)
-  [Ortho PAR Score Sample Request](#)
-  [Performer PIN Request](#)
-  [Request Bulk Transfer of Patients for a Prototype Contract](#)
-  [View Authorisation List](#)
-  [WebEDI Account Update](#)

Step 4: You will be presented with the screen below.

Click on **'Request New Ortho PAR Score Sample'**.



Step 5: You will then be presented with the box below.



It is required that in each half year period (April to September inclusive and October to March inclusive), orthodontic practices in England will need to obtain a sample of normally 10 Orthodontic Completion claims on which Peer Assessment Rating (PAR) scores will need to be carried out by an independent calibrated examiner.

The **'Half Year Period'** will be pre-determined according to the current date. Therefore, in order to request an Orthodontic PAR Score Sample, this complete process must take place **no later than the last day** of the final month in the half year period involved.

Please note that if the last day in the last month for the PAR score period has passed it will not be possible to request a PAR score sample or enter returned PAR score details retrospectively.

Enter the contract number for the sample and click **'Continue'**.

Please Note that this contract must:

- a) Be open at a point during the half year period concerned
- b) Have an Orthodontic Service recorded in Compass for the period concerned
- c) Must have been commissioned by an English health body

The system will retrieve the sample request (usually 10 sequential claims) of the most recently completed orthodontic courses of treatment. These will be those Treatment Completed claims with the most recent Dates of Completion which fall within the half year period in question.

If there are insufficient numbers of claims to fill the required sample size, the request will fail and an error message will display, a further request can be made when an appropriate number of Treatment Completed claims have been submitted and processed.

In exceptional circumstances, where 10 cases are not available, please contact NHSBSA on 0300 330 1348 or email nhsbsa.dentalservices@nhsbsa.nhs.uk where a request can be made for a lower sample amount, in these circumstances please advise how many cases are available for the request.

Please note that in order to be selected the claim does not have to have appeared on a pay statement; it merely has to have passed Compass validation.

The request will also fail if a request for the same half year period and contract has already been made and created.

If a full sample can be successfully found then the results will be displayed on the screen below.

View Ortho Par Score Sample ✕

Half Year Period	<input type="text" value="2021 October to March"/>	Calibrated Examiner Name	<input type="text"/>
Contract ID	<input type="text" value="9251790001"/> MR MJ COX	Calibrated Examiner Address	<input type="text"/>
Sample Date	<input type="text" value="06/11/2020"/> Friday, 06 November 2020		<input type="text"/>
Submitted	<input type="text" value="N"/>		<input type="text"/>
Number of Managed Clinical Network Meetings attended	<input type="text" value="0"/>	Calibrated Examiner Postcode	<input type="text"/>

The PAR Scores for this sample must be submitted by 31/03/2021 which is the last day of March.

Search ▶ ↓

CRN/Image Index No.	Patient Surname	Patient Forename	Patient Sex	Date of Birth	Date of Completion	Form Status	Pre-Treatment PAR Score	Post-Treatment PAR Score	% Reduction	Action
444025	SABBOTSBURY	SYDNEY	F	03/07/2005	03/10/2020	Processed				View
444029	SCHICKERELL	DAVID	M	08/05/1999	27/10/2020	Processed				View
116	SDORCHESTER	TERRY	M	19/03/2007	21/10/2020	Processed				View
444023	SEASTFLEET	BARRY	M	30/06/2004	10/10/2020	Processed				View
444022	SFLEET	JOHN	M	30/06/2006	18/10/2020	Processed				View
444027	SHERRING	RICHARD	M	14/06/2009	21/10/2020	Processed				View
444028	SRODDEN	DALE	M	31/10/2005	12/10/2020	Processed				View
444024	SWESTFLEET	ALISON	F	21/05/2004	02/10/2020	Processed				View
444021	SWEYMOUTH	ALAN	M	30/06/2006	16/10/2020	Processed				View
444030	SWYKEREIS	BRENDA	F	30/01/2003	07/10/2020	Processed				View

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[Close](#)

The sample taken will exclude any Interceptive Treatment i.e. patient aged under 10 years of age at the start of treatment and will also exclude any where the original Assess/Appliance Fitted claim is not present or was submitted under a different contract ID.

Full details of individual claims can be viewed by clicking 'View'.

This sample will require PAR scores provided by an independent calibrated examiner. Once this screen is displayed, the selected claims **cannot be exchanged** for others.

For the selected sample, send the study casts or the electronic equivalent to your chosen calibrated examiner.

Note that a message will appear to advise the date by when the PAR score results must be submitted.

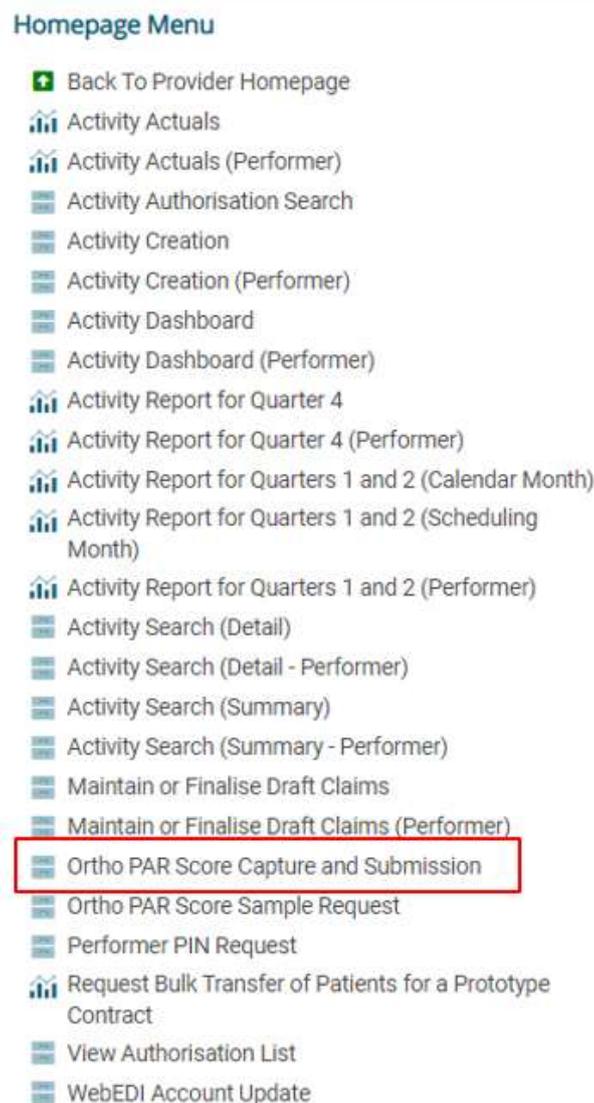
Also, there is a facility to Export Grid to a file for taking off-line.

Capture and Submit Orthodontic PAR Scores Sample

Step 1: Click on the 'Activity' folder.



Step 2: To capture and submit an Orthodontic PAR Score sample click on **Ortho PAR Score Capture and Submission**.



Step 3: You will be presented with the screen below.

Home

Search Contract ID 9251790001

Half Year Period	Provider Name	Contract ID	Sample Date	Submitted Y/N	Submitted Date	Action
2021 October to March	MR MJ COX	9251790001	06/11/2020	N		Edit
1920 October to March	MR MJ COX	9251790001	02/03/2020	Y	02/03/2020	View
1920 April to September	MR MJ COX	9251790001	07/05/2019	Y	09/05/2019	View
1819 October to March	MR MJ COX	9251790001	16/04/2019	Y	09/05/2019	View
1718 October to March	MR MJ COX	9251790001	12/04/2019	Y	12/03/2018	View
1718 April to September	MR MJ COX	9251790001	12/04/2019	Y	14/08/2017	View

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For un-submitted samples, click **'Edit'** and the below screen being displayed.

Edit Ortho PAR Score Sample

Half Year Period: 2021 October to March

Contract ID: 9251790001 MR MJ COX

Sample Date: 06/11/2020 Friday, 06 November 2020

Submitted: N

Number of Managed Clinical Network Meetings attended: 0 *

Calibrated Examiner Name: *

Calibrated Examiner Address: *

Calibrated Examiner Postcode: *

The PAR Scores for this sample must be submitted by 31/03/2021 which is the last day of March.

Search CRN/Image Index No

CRN/Image Index No	Patient Surname	Patient Forename	Patient Sex	Date of Birth	Date of Completion	Form Status	Pre-Treatment PAR Score	Post-Treatment PAR Score	% Reduction	Action
444025	SABBOTSBURY	SYDNEY	F	03/07/2005	03/10/2020	Processed	25	18	28.0	Edit
444029	SCHICKERELL	DAVID	M	08/05/1999	27/10/2020	Processed				Edit
116	SDORCHESTER	TERRY	M	19/03/2007	21/10/2020	Processed	81	30	63.0	Edit
444023	SEASTFLEET	BARRY	M	30/06/2004	10/10/2020	Processed	91	60	34.1	Edit
444022	SFLEET	JOHN	M	30/06/2006	18/10/2020	Processed				Edit
444027	SHERRING	RICHARD	M	14/06/2009	21/10/2020	Processed				Edit
444028	SRODDEN	DALE	M	31/10/2005	12/10/2020	Processed				Edit
444024	SWESTFLEET	ALISON	F	21/05/2004	02/10/2020	Processed				Edit
444021	SWEYMOUTH	ALAN	M	30/06/2006	16/10/2020	Processed				Edit
444030	SWYKEREKIS	BRENDA	F	30/01/2003	07/10/2020	Processed				Edit

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Submit Back

As with previous screens the detail of each claim within the sample is displayed, advice is given as to by when the sample must be submitted, an Export Grid button appears to allow the data to be offloaded to a file and the full claim details can be viewed by selecting **'View'** from the drop-down list available in the **'Action'** column.

In most cases these un-submitted samples will be incomplete as not all the scores will have been captured. In order to capture the scores, click **'Edit'** in the **'Action'** column and the following box will be displayed.

Edit Ortho PAR Score Sample

Half Year Period: 2021 October to March
 Contract ID: 9251790001 MR MJ COX
 Sample Date: 06/11/2020 Friday, 06 November 2020
 Submitted: N

Calibrated Examiner Name: *
 Calibrated Examiner Address: *
 *
 *

Ortho PAR Score Edit

Patient: SCHICKERELL DAVID Male DOB: 08/05/1999

Contract ID: 9251790001 MR MJ COX
 Half Year Period: 2122 October to March
 Pre-Treatment PAR Score: *
 Post-Treatment PAR Score:

[Save](#) [Cancel](#)

444023	SEASTFLEET	BARRY	M	30/06/2004	10/10/2020	Processed	91	60	34.1	Edit
444022	SFLEET	JOHN	M	30/06/2006	18/10/2020	Processed				Edit
444027	SHERRING	RICHARD	M	14/06/2009	21/10/2020	Processed				Edit
444028	SRODDEN	DALE	M	31/10/2005	12/10/2020	Processed				Edit
444024	SWESTFLEET	ALISON	F	21/05/2004	02/10/2020	Processed				Edit
444021	SWEYMOUTH	ALAN	M	30/06/2006	16/10/2020	Processed				Edit
444030	SWYKEREKIS	BRENDA	F	30/01/2003	07/10/2020	Processed				Edit

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A Pre Treatment PAR Score must be entered. The Post Treatment Score can be added at a later date if necessary. Any one or two digit value is acceptable as a score, including zero. Pre-treatment PAR scores are typically 20 to 30. Post-treatment PAR scores are usually in the low single figures. However it is technically possible to have a post-treatment PAR score of zero. Once entered press **'Save'** and the scores will be shown on the updated list.

If for some reason information for the pre-treatment PAR score is not available for a requested case, the entries for **both** Pre and Post scores should be zero filled which will allow the submission of the remaining cases.

Step 4: Submitting the PAR Score Sample

Until all Pre and Post Treatment PAR Scores have been captured for each of the claims within the sample the **'Submit'** button will remain greyed out and cannot be selected. However, once all the results are recorded, the **'Submit'** button can be used to make available the PAR scores for review.

Step 5: Adding a Calibrated Examiner

Before submission of a sample, details of the Calibrated Examiner must be entered. This will include the examiner's name and the address.

Edit Ortho PAR Score Sample

Half Year Period	<input type="text" value="2021 October to March"/>	Calibrated Examiner Name	<input type="text" value="*"/>
Contract ID	<input type="text" value="9251790001"/> MR MJ COX	Calibrated Examiner Address	<input type="text" value="*"/>
Sample Date	<input type="text" value="06/11/2020"/> Friday, 06 November 2020		<input type="text" value="*"/>
Submitted	<input type="text" value="N"/>		<input type="text" value=""/>
Number of Managed Clinical Network Meetings attended	<input type="text" value="0"/>	Calibrated Examiner Postcode	<input type="text" value="*"/> <input type="button" value="Q"/>

The PAR Scores for this sample must be submitted by 31/03/2021 which is the last day of March.

Search

CRN/Image Index No	Patient Surname	Patient Forename	Patient Sex	Date of Birth	Date of Completion	Form Status	Pre-Treatment PAR Score	Post-Treatment PAR Score	% Reduction	Action
444025	SABBOTSBURY	SYDNEY	F	03/07/2005	03/10/2020	Processed	25	18	28.0	Edit
444029	SCHICKERELL	DAVID	M	08/05/1999	27/10/2020	Processed				Edit
116	ENDBROUGHT	TEBBY	M	10/03/2007	01/10/2020	Processed	81	50	63.0	Edit

The latter can be obtained from a look up table by entering the postcode, pressing the magnifying glass next to the postcode field and selecting the appropriate address from the list supplied.

Half Year Period	<input type="text" value="2021 October to March"/>	Calibrated Examiner Name	<input type="text" value="MR JR LITTLE"/>
Contract ID	<input type="text" value="9251790001"/> MR MJ COX	Calibrated Examiner Address	<input type="text" value="*"/>
Sample Date	<input type="text" value="06/11/2020"/> Friday, 06 November 2020		<input type="text" value="*"/>
Submitted	<input type="text" value="N"/>		<input type="text" value=""/>
Number of Managed Clinical Network Meetings attended	<input type="text" value="0"/>	Calibrated Examiner Postcode	<input type="text" value="BN20 8AD"/> <input type="button" value="Q"/>

The PAR Scores for this sample must be submitted by 31/03/2021 which is the last day of March.

Search

CRN/Image Index No	Patient Surname	Patient Forename	Patient Sex	Date of Birth	Date of Completion	Form Status	Pre-Treatment PAR Score	Post-Treatment PAR Score	% Reduction	Action
444025	SABBOTSBURY	SYDNEY	F	03/07/2005	03/10/2020	Processed	25	18	28.0	Edit
444029	SCHICKERELL	DAVID	M	08/05/1999	27/10/2020	Processed				Edit
116	ENDBROUGHT	TEBBY	M	10/03/2007	01/10/2020	Processed	81	50	63.0	Edit
444023	SEASTON	SFLEET	M	03/07/1999	03/10/2020	Processed	25	18	34.1	Edit
444027	SHERRIN	TEMPLE	M	03/07/1999	03/10/2020	Processed	25	18		Edit
444028	SRODD	TEMPLE	M	03/07/1999	03/10/2020	Processed	25	18		Edit
444024	SWESTON	TEMPLE	M	03/07/1999	03/10/2020	Processed	25	18		Edit
444021	SWEYN	TEMPLE	M	03/07/1999	03/10/2020	Processed	25	18		Edit
444030	SWYKE	TEMPLE	M	03/07/1999	03/10/2020	Processed	25	18		Edit

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Address Selection

Postcode

Location Id	Line 1	Line 2	Line 3	Line 4	Line 5	Action
26403	DUMMY ADDRESS FOR TST DENTIST	DUMMY TOWN	DUMMY COUNTY			Select
30040	PARADISE PARK	EAST GLASGOW	SCOTLAND			Select
12502	Dental Practice Board	Temple Grove	Compton Place Road	EASTBOURNE	East Sussex	Select

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The Calibrated Examiner's details will be stored for later use even if the sample is not submitted. NB. The third line of Calibrated Examiner's Address is no longer mandatory.



Half Year Period	<input type="text" value="2021 October to March"/>	Calibrated Examiner Name	<input type="text" value="MR JR LITTLE"/>
Contract ID	<input type="text" value="9251790001"/> MR MJ COX	Calibrated Examiner Address	<input type="text" value="Dental Practice Board"/>
Sample Date	<input type="text" value="06/11/2020"/> Friday, 06 November 2020		<input type="text" value="Temple Grove"/>
Submitted	<input type="text" value="N"/>		<input type="text" value="Compton Place Road"/>
			<input type="text" value="EASTBOURNE"/>
Number of Managed Clinical Network Meetings attended	<input type="text" value="0"/>	Calibrated Examiner Postcode	<input type="text" value="BN20 8AD"/>

The PAR Scores for this sample must be submitted by 31/03/2021 which is the last day of March.

Search



CRN/Image Index No	Patient Surname	Patient Forename	Patient Sex	Date of Birth	Date of Completion	Form Status	Pre-Treatment PAR Score	Post-Treatment PAR Score	% Reduction	Action
444025	SABBOTSBURY	SYDNEY	F	03/07/2005	03/10/2020	Processed	25	18	28.0	Edit
444029	SCHICKERELL	DAVID	M	08/05/1999	27/10/2020	Processed				Edit
116	SDORCHESTER	TERRY	M	19/03/2007	21/10/2020	Processed	81	30	63.0	Edit
444023	SEASTFLEET	BARRY	M	30/06/2004	10/10/2020	Processed	91	60	34.1	Edit
444022	SFLEET	JOHN	M	30/06/2006	18/10/2020	Processed				Edit
444027	SHERRING	RICHARD	M	14/06/2009	21/10/2020	Processed				Edit
444028	SRODDEN	DALE	M	31/10/2005	12/10/2020	Processed				Edit
444024	SWESTFLEET	ALISON	F	21/05/2004	02/10/2020	Processed				Edit
444021	SWEYMOUTH	ALAN	M	30/06/2006	16/10/2020	Processed				Edit
444030	SWYKEREGIS	BRENDA	F	30/01/2003	07/10/2020	Processed				Edit

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If the sample is not to be completed at this visit then the 'Back' button should be used. If it is complete then use the 'Submit' button.

Submitting an MCN Attendance Figure

If the sample being submitted is for the second half of the year (i.e. the October to March period) then it will also be necessary to record the number of Managed Clinical Network meetings attended during the year. This field will not be displayed or made available for the results of any April to September period.

Edit Ortho PAR Score Sample ✕

Half Year Period	<input type="text" value="2021 October to March"/>	Calibrated Examiner Name	<input type="text" value="MR JR LITTLE"/>
Contract ID	<input type="text" value="9251790001"/> MR MJ COX	Calibrated Examiner Address	<input type="text" value="Dental Practice Board"/>
Sample Date	<input type="text" value="06/11/2020"/> Friday, 06 November 2020		<input type="text" value="Temple Grove"/>
Submitted	<input type="text" value="N"/>		<input type="text" value="Compton Place Road"/>
			<input type="text" value="EASTBOURNE"/>
Number of Managed Clinical Network Meetings attended	<input type="text" value="0"/>	Calibrated Examiner Postcode	<input type="text" value="BN20 8AD"/>

The PAR Scores for this sample must be submitted by 31/03/2021 which is the last day of March.

Search

CRN/Image Index No	Patient Surname	Patient Forename	Patient Sex	Date of Birth	Date of Completion	Form Status	Pre-Treatment PAR Score	Post-Treatment PAR Score	% Reduction	Action
444025	SABBOTSBURY	SYDNEY	F	03/07/2005	03/10/2020	Processed	25	18	28.0	Edit
444029	SCHICKERELL	DAVID	M	08/05/1999	27/10/2020	Processed				Edit
116	SDORCHESTER	TERRY	M	19/03/2007	21/10/2020	Processed	81	30	63.0	Edit
444023	SEASTFLEET	BARRY	M	30/06/2004	10/10/2020	Processed	91	60	34.1	Edit
444022	SFLEET	JOHN	M	30/06/2006	18/10/2020	Processed				Edit
444027	SHERRING	RICHARD	M	14/06/2009	21/10/2020	Processed				Edit
444028	SRODDEN	DALE	M	31/10/2005	12/10/2020	Processed				Edit
444024	SWESTFLEET	ALISON	F	21/05/2004	02/10/2020	Processed				Edit
444021	SWEYMOUTH	ALAN	M	30/06/2006	16/10/2020	Processed				Edit
444030	SWYKEREKIS	BRENDA	F	30/01/2003	07/10/2020	Processed				Edit

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Once submitted the sample cannot be edited further.

Viewing Past Orthodontic PAR Score Samples

Past samples can be viewed on the screen below by clicking 'View' against the sample showing to which half year period belongs.

Step 1: Click on the 'Activity' folder.



Step 2: click on Ortho PAR Score Sample Request.



To view the contents of each past Orthodontic PAR Score Sample submission click **'View'** against the particular sample in the **'Action'** column and in the box presented.

View Ortho Par Score Sample

Half Year Period: 1900 October to March
 Contract ID: 9251790001 MR MJ COX
 Sample Date: 02/03/2020 Monday, 02 March 2020
 Submitted: 02/03/2020

Calibrated Examiner Name: JR GODFREY
 Calibrated Examiner Address: 37 PARAMOUR DRIVE, WALSALL

Number of Managed Clinical Network Meetings attended: 0
 Calibrated Examiner Postcode: W813 8RF

Search: CRN/Image Index No. []

CRN/Image Index No.	Patient Surname	Patient Forename	Patient Sex	Date of Birth	Date of Completion	Form Status	Pre-Treatment PAR Score	Post-Treatment PAR Score	% Reduction	Action
140026	BEN	BELIAMIN	M	30/06/2006	27/01/2020	Processed	9	1	88.9	View
140025	BELL	WILLIAM	M	30/06/2006	28/01/2020	Processed	0	0	0.0	View
140022	GONZO	JOSE	M	30/06/2006	31/01/2020	Processed	29	-4	86.2	View
140023	HOPPHY	JOE	M	30/06/2006	30/01/2020	Processed	24	6	75.0	View
140020	KERMIT	FRANCIS	M	30/06/2006	01/02/2020	Processed	13	13	0.0	View
140018	LAMB	LARRY	M	30/06/2006	02/02/2020	Processed	10	2	80.0	View
140024	LAMBCHOP	SHARI	F	30/06/2006	29/01/2020	Processed	24	1	95.8	View
140017	SARAH	LOTTIE	F	30/06/2006	03/02/2020	Processed	12	13	-8.3	View
140019	TWIZLE	LOFTY	M	30/06/2006	01/02/2020	Processed	13	1	92.3	View
140027	WEED	SALLY	F	30/06/2006	26/01/2020	Processed	71	21	70.4	View

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Click on **'View'** to then display the full claim details

View Activity

Contract No: 9251790001 MR MJ COX
 Paper Image No.:
 Claim Ref. No.: 140026
 Site ID: 1009
 Performer ID: 835773 AMANDA JANE PAMELA GRANT
 Location: Dental Surgery, Brooklyn Court, 390 Wilmslow Road, Manchester, M20 3NA
 Location ID: 4470

Patient ID: 11575
 Sex: M Male
 BENJAMIN BEN, 100, OXFORD STREET, LEIGH, WN7 1NJ
 Date of Birth: 30/06/2006
 Previous Surname:
 Email Address:
 Mobile No.:

Treatment Details

Date of Acceptance: 27/01/2020
 Date of Referral:
 Date of Completion or Last Visit: 27/01/2020
 Date of Assessment:
 Date Appliance Fitted:
 Patient Charge Collected: 0.00
 On Referral:
 Exemption / Remission: Patient Under 18

Processing Details

Status: Processed
 Paper/Electronic: Electronic
 Created via DCS:
 Amended via DCS:
 SQ Indicator:
 Date of Receipt: 02/03/2020 12:02
 Date of Validation: 02/03/2020 12:02
 Charge Period: 192012
 Number of Errors: 0
 Number of Comments: 1
 Patient Charge: 0.00
 Remitted Amount: 0.00
 Disallowed Amount: 0.00
 UDAs: 0.00
 UOAs: 0.00

Activity Group	Activity Description	No.
Orthodontic Assessment / Completion	Index of Orthodontic Treatment Need (9015)	1
Orthodontic Completion	Treatment Completed (9161)	3
Other	Patient Declined - Email Address (9175)	
Other	Patient Declined - Mobile Phone Number (9176)	
Clinical/Orthodontic Data Set	Radiographs (9304)	1
Orthodontic Data Set - Treatment Proposed	Removable Upper Appliance (9401)	

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Enter Refund Close