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**NHS Greater Glasgow & Clyde**

**Oral Health Directorate, Urgent Dental Centres**

**PDS Surgery Booking Form**

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| In order to facilitate arrangements please email this form to ggc.publicdentalspecialcare@nhs.scot  |
| Site requested |  |
| Date |  |
| Appointment Time |  |
| Duration of appointment |  |
| Dentist’s name and GDC registration number |  |
| Dental Nurse’s name and registration number |  |
| Dentist List number |  |
| Dental Practice contact details |  |
| What FFP3 Mask does the attending **dentist** require .i.e. 3M 1863 or 1863+ etc. |  |
| What FFP3 mask does the attending **nurse** require .i.e. 3M 1863 or 1863+ etc. |  |

**PDS Sites Available**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Location** | **Number of surgeries available** | **Number of appointment slots available per day** | **Report to****Address** | **Office Contact** |
| **Bridgeton Health Centre** | **2** | **2** | **Dental Reception** | **0141 201 5090** |
| **Vale Centre for Health and Care** | **1** | **2** | **Dental Reception** | **01389 828 350** |
| **Royal Alexandra Hospital** | **2** | **6** | **Dental Reception** | **0141 531 8427** |
| **Pollok Health Centre** | **2** | **6** | **Dental Reception** | **0141 5316833** |