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As suggested per the 2018 American Dental Association Guidelines, a list of the most common services along with customary fees is provided below. Please note that these prices do not reflect those with dental insurance, as Peregrine Family Dentistry will only charge the negotiated contracted fees for your particular dental insurance.

<u>Procedure Code</u>	<u>Description</u>	<u>Customary Fee</u>
D0120	Periodic Oral Evaluation	\$49
D1110	Prophylaxis – Adult	\$84
D1120	Prophylaxis – child	\$61
D0274	Bitewing X-Rays – 4 films	\$58
D0330	Panoramic X-Ray	\$99
D1351	Sealant	\$49
D2391	Resin-composite – 1Surface	\$160
D2392	Resin-composite – 2Surface	\$210
D2393	Resin-composite – 3Surface	\$260
D2394	Resin-composite – 4Surface	\$313
D2950	Core Buildup	\$246
D2740	Crown-Porcelain/Ceramic	\$1026
D3310	Root Canal Therapy-Anterior	\$653
D3320	Root Canal Therapy-Bicuspid	\$760