



1867 Jonesboro Rd., Ste. 8 • McDonough, GA 30253

**Tel: 678-432-3971 • Fax: 404-393-1154**

**www.McDonoughSpecialist.com**

Date: \_\_\_\_\_

This is to introduce you to my patient,

\_\_\_\_\_

For:  Consultation  Treatment

Comments:

\_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Referring Doctor: \_\_\_\_\_ Phone #: \_\_\_\_\_

Extraction/Surgical Removal

			a	b	c	d	e		f	g	h	i	j						
<b>R</b>	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	<b>L</b>		
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17			
				t	s	r	q	p	o	n	m	l	k						

**Instructions for IV Sedation Patients:**

- 1) Nothing to eat or drink for 8 hours prior to surgery.
- 2) Bring someone to stay in the office during your surgery.
- 3) Patients under 18 years of age must be accompanied by a parent or legal guardian.
- 4) Patients are advised to wear loose fitting sleeves.
- 5) Please bring this referral sheet and any x-rays with you to our office.

**Please Evaluate & Treat:**

- Dental Implants
  - Infections
  - Pathology
  - Corrective Jaw Surgery
  - Dental Alveolar Surgery
  - Expose & Bracket
  - Cosmetic Surgery
  - Apicoectomy
  - Pre-Prosthetic Surgery
  - Other: \_\_\_\_\_
- \_\_\_\_\_  
 \_\_\_\_\_