



Oral and Maxillofacial Surgery

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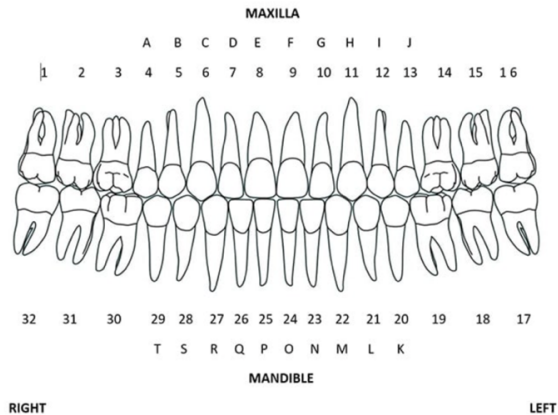
*****Parking is NOT on Falling Leaf Alley. Free Parking Lot on Colorado Blvd*****

I would like to refer: _____ Phone #: _____

- For: ☐ Consultation ☐ Pathology/Biopsy
☐ Extraction ☐ 3D CBCT Evaluation
☐ Wisdom Tooth Extraction ☐ Implant Placement

On Tooth # (Teeth #s) _____

Special Instructions/Comments:



Referring Doctor: _____ Date: _____

Patient has an appointment on: _____

