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	1 2 3 4 5 6 7 8	9 10 11 12 13 14 15 16
Patient Instructions	ABCDE	FGHIJ
Bring this slip to your appointment.		
Bring any x-rays or pertinent information from your referring doctor.	RIGHT	LEFT
 Please bring your dental and medical insurance cards with you. 	RIGITI	
Bring a current list of medications and dosages you take.	TSRQP	ONMLK
If undergoing Sedation or General Anesthesia:	32 31 30 29 28 27 26 25	24 23 22 21 20 19 18 17
• Do not eat or drink anything for 8 hours prior to appointment.		
 Have a responsible person accompany you to your appointment and drive you home afterwards. 	Referring Dr.:	
• Minors must be accompanied by parent or guardian.		
	Phone:	
We will make every effort to see you promptly.		
	Notes:	
We accept MOST incurance plans. Please call us for details		
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Name: _____

Date: _____

Reconstruction

Trauma

Other

Phone: _____

Pathology / Biopsy

Extractions

Sedation

Dental Implants