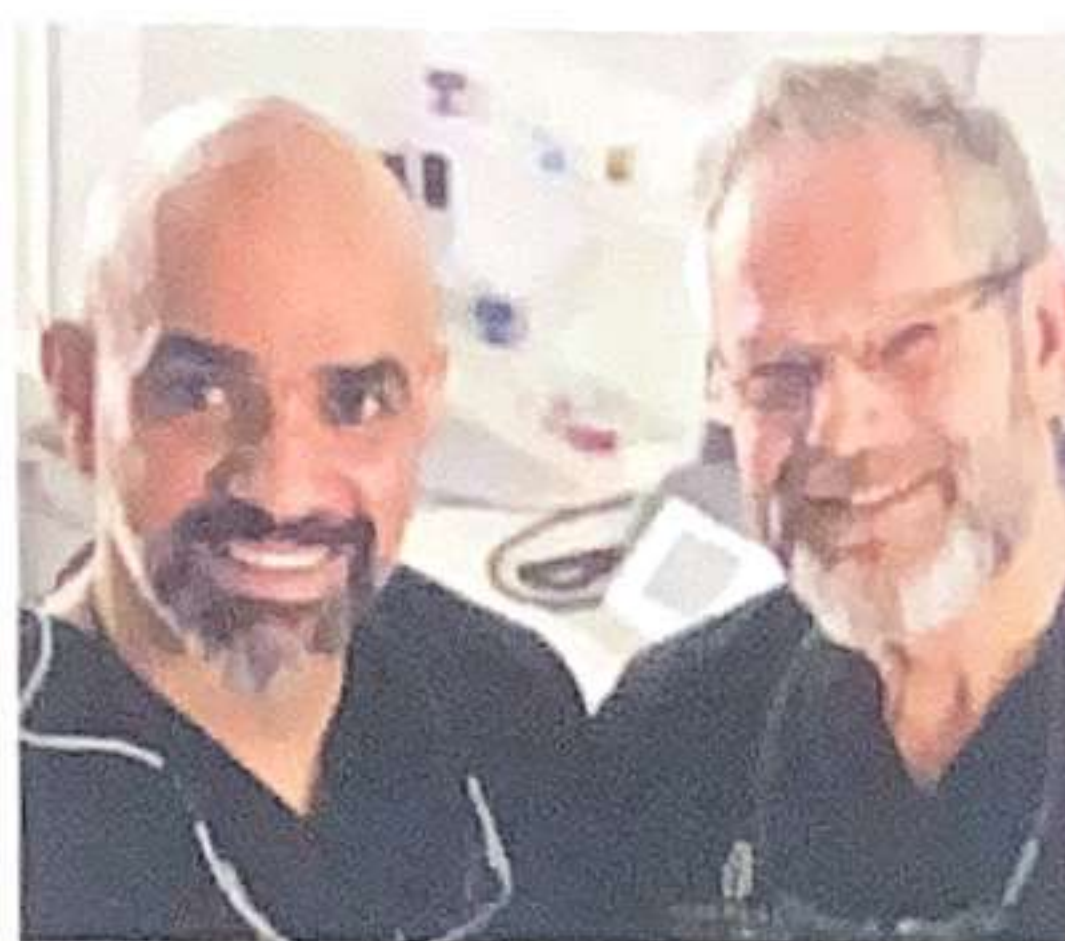


IMPLANT DENTISTRY

110 Queen Street East, Brampton ON L6V 1B1

905-866-6657



Anit Sharma DDS & Emil Svoboda PHD, DDS

Patient: _____ Referral Date: _____

Phone #: _____ Mobile: _____

Referring Doctor: _____

Phone #: _____ Email: _____

Consultation Date: _____

Reason for Referral:

☐ Consultation ☐ Extraction(s) ☐ Implant(s) ☐ Bone Grafting ☐ Prosthetic Restoration

Please indicate treatment site(s)

R	8	7	6	5	4	3	2	1		1	2	3	4	5	6	7	8	L
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Remarks:

Complimentary Implant Consultation and Panoramic Imaging as Required

Onsite Cone Beam CT and Sedation

☐ Take X-Rays ☐ X-Ray Sent with Patient ☐ X-Ray Emailed

REVERSEMARGIN™

Abutments & Crowns

Implant Treatment from Start to Finish

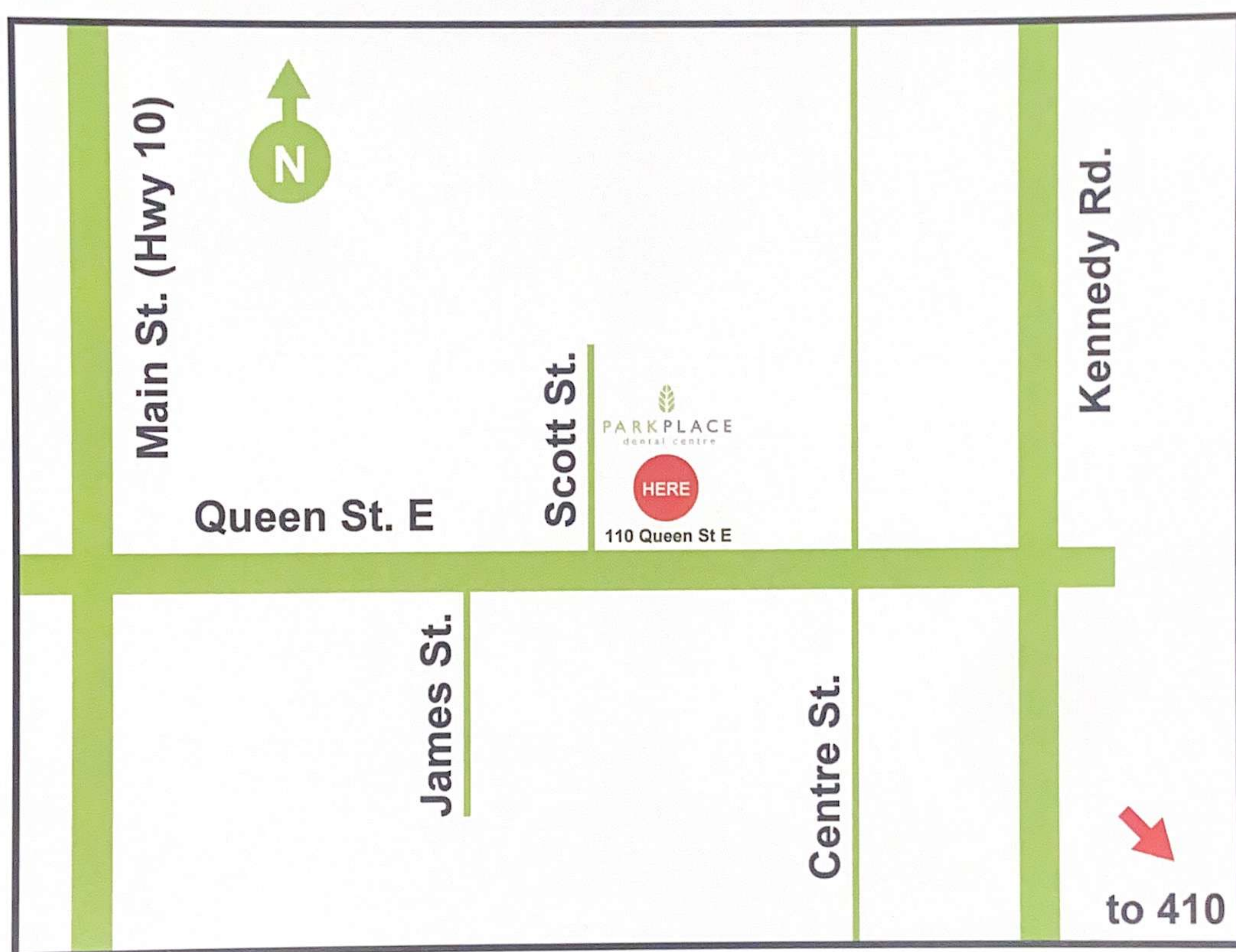


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