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NO FOOD or LIQUID for 6 hours before your appointment DO NOT plan to drive home.
If you are having surgery:
Please wear short sleeves and loose-legged pants.
If you are a MINOR (under 18 years) you must be accompanied by a parent or legal guardian.

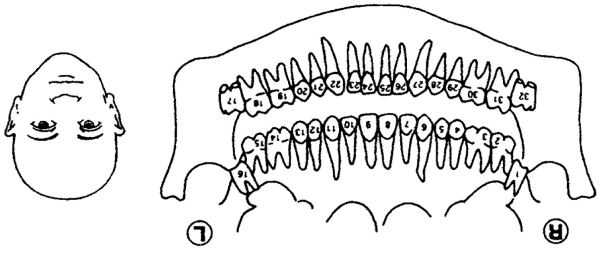
Dear Patient,

Sent with patient Take as needed

Radiographs: Mailed (date) _____

Biopsy of _____ Other _____

- Extraction Dental Implants Exposure
- TMJ Disorder and Facial Pain Jaw Deformity
- Facial Trauma Facial Cosmetics



Introducing _____
Referred by Dr. _____
Drs. Phone _____ Date _____
Please evaluate my patient for: _____