

Dental Implant & Periodontal Surgeons, P.C.

Periodontics, Reconstructive Dental Implant Surgery & Sedation



Sam B. Khoury, D.D.S, M.S.

Diplomate-American Board of Periodontology

Juan C. Cabrera, D.M.D, M.S.

Diplomate-International Congress of Oral Implantology

Ishita Bhavsar D.D.S, D.M.D, M.S.

Diplomate-American Board of Periodontology

PATIENT

NAME: _____ DATE: _____

PATIENT'S PHONE #: _____

REFERRING DOCTOR: _____ PHONE #: _____

REASON FOR REFERRAL: GUM DISEASE/BONE LOSS GUM RECESSION
 IMPLANTS-SEE BACK OF CARD ANXIOUS PATIENT-CONSIDER IV SEDATION

COMMENTS: _____

RADIOGRAPHS: LAST FULL SERIES TAKEN ON::

ENCLOSED ARE ACCOMPANYING PATIENT ARE BEING FORWARDED FMX _____ PA _____ #

TREATMENT DISCUSSION: BEFORE examination AFTER examination

Newtown office 215 968 9601 Chadds Ford Office 610 500 0610

DENTAL IMPLANTS

Tooth / Teeth _____

Implant Preferred:

Straumann Biohorizons

Other _____

Number of Implants desired _____

Esthetic Concern _____

Immediate Provisional in Your Our Office

Transitional Partial Denture (Flipper) to be delivered

Implant Supported Overdenture _____

Fixed Implant Restoration-Hybrid _____

Other _____

COMMENTS



Dental Implant Smiles

Newtown office :

638 Newtown Yardley Rd #1C
Newtown, PA 18940
215 968 9601

info@TreatMyGums.com

Chadds Ford office:

107 Commons CT
Chadds Ford, PA 19317
610 500 0610

TreatMyGums@gmail.com