

# Florida Dental Implants & Oral Surgery Referral Form

TODAY'S DATE \_\_\_\_\_ APPT. DATE \_\_\_\_\_

PATIENT NAME \_\_\_\_\_

DATE OF BIRTH \_\_\_\_\_ PATIENT TEL # \_\_\_\_\_

REFERRING DOCTOR \_\_\_\_\_

DOCTOR SIGNATURE \_\_\_\_\_

- PROVIDER**  Dr. Kirkpatrick (Lakeland)  Dr. Richards (Lakeland)  
 Dr. Levine (N. Tampa)  Dr. Rintel (Lakeland)

	<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>		<b>F</b>	<b>G</b>	<b>H</b>	<b>I</b>	<b>J</b>				
<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
<b>32</b>	<b>31</b>	<b>30</b>	<b>29</b>	<b>28</b>	<b>27</b>	<b>26</b>	<b>25</b>	<b>24</b>	<b>23</b>	<b>22</b>	<b>21</b>	<b>20</b>	<b>19</b>	<b>18</b>	<b>17</b>
	<b>T</b>	<b>S</b>	<b>R</b>	<b>Q</b>	<b>P</b>		<b>O</b>	<b>N</b>	<b>M</b>	<b>L</b>	<b>K</b>				

- Dental Implants - Single
- Full Arch Implants
  - \_\_\_ Maxillary
  - \_\_\_ Mandibular
  - \_\_\_ Full Mouth
- Grafting
- Intravenous Anesthesia
- CT Scan
- Expose and Bond
- Wisdom Tooth Removal
- Extractions
- TMJ Disorders
- Jaw Surgery
- Impacted Canines
- Oral Pathology
- Facial/Oral Trauma
- Sleep Apnea
- Other

SPECIAL INSTRUCTIONS \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## Before Your First Appointment

- 1 Please have your new patient paperwork filled out prior to arrival. To print the new patient paperwork visit **FDIOS.com**. If you do not have your paperwork filled out, please arrive 20 minutes early.
- 2 Bring your dental insurance information with you.
- 3 Bring any legal documents including: Healthcare, Proxy, list of medications, DNR, POA and/or guardianship to your initial appointment.

## If you will be under anesthesia, please read below.

- 1 **DO NOT EAT OR DRINK ANYTHING INCLUDING WATER, FOR AT LEAST 6 HOURS PRIOR TO YOUR PROCEDURE.**
- 2 Minors must be accompanied by parent or legal guardian at time of surgery.
- 3 Wear comfortable, loose-fitting, short-sleeved clothing. Remove contact lenses.
- 4 If you have had any illness or are under the care of a physician, please be sure to inform us.
- 5 Continue to take all prescription medications (with the exception of the ones we instruct you to discontinue) with a small sip of water.
- 6 A responsible person over 18 must accompany you, remain in our office during your treatment & be able to drive you home.

## Locations

### Lakeland

2150 Harden Blvd.  
Lakeland, FL 33803

P 833-929-2658  
F 863-665-1096

### North Tampa

5212 E Fowler Ave.  
Temple Terrace, FL  
33617

P 813-985-1066  
F 813-985-0821



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— & Oral Surgery —**