

# SCHNEIDER ORAL SURGERY

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*Diplomate, American Board of Oral and Maxillofacial Surgery*

**PARADISE VALLEY OFFICE SUITES**

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PLEASE CIRCLE TEETH TO BE TREATED

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

Appt Date \_\_\_\_\_ Appt Time \_\_\_\_\_ Appt Day \_\_\_\_\_

Introducing \_\_\_\_\_

Referred by \_\_\_\_\_

Telephone # \_\_\_\_\_ Date Referred \_\_\_\_\_

**INSTRUCTIONS TO PATIENTS:**

You have been referred for specialized care to an Oral and Maxillofacial Surgeon. Our office will make every effort to make your visit with us a comfortable experience. Please assist us by providing the following information at the time of your consultation.

- Your surgical referral slip and any X-rays if applicable
- A list of medications you are presently taking
- If you have dental insurance, bring the insurance card

This will save time and allow us to help you process any claims

**IMPORTANT:** All patients under the age of 18 years of age must be accompanied by a parent or guardian at the consultation visit.

- Extraction \_\_\_\_\_
- Alveoloplasty \_\_\_\_\_
- Lesion Evaluation/Biopsy \_\_\_\_\_
- Apicoectomy \_\_\_\_\_
- Frenectomy \_\_\_\_\_
- Expose & Bond \_\_\_\_\_

- CONSULTATION:**
- Orthognathic Eval.
  - Pre-Prosthetic
  - Implants
  - Trauma/Fracture

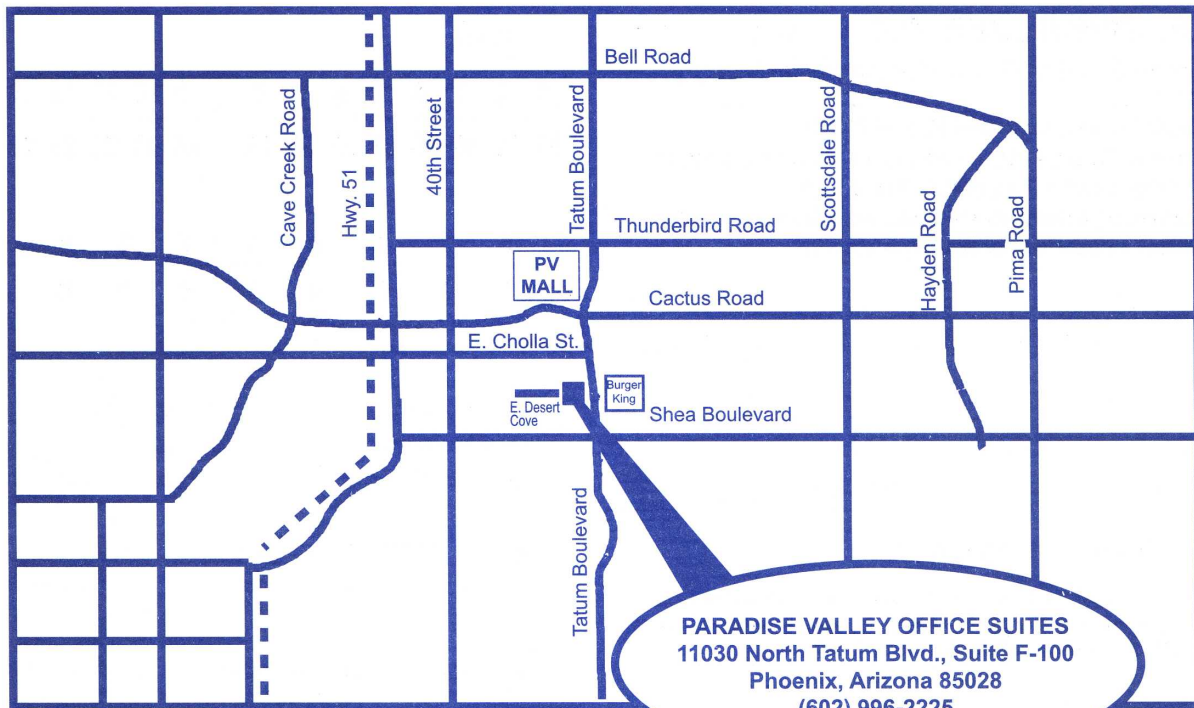
- RADIOGRAPHS:**
- Being Mailed
  - Please Take
  - Given to Patient
  - Digital Copy Sent

**COMMENTS:** \_\_\_\_\_

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**Driving North on Tatum**  
 At the first light north of Shea  
 Turn left (West) on E. Desert Cove Ave.  
 You will then turn right to go behind the  
 office buildings to find building F

**Driving South on Tatum**  
 Go past Cactus Rd. Continue past E. Cholla St.  
 Our office building will be located on the right hand  
 side. The entrance is directly across from  
 the Burger King.