

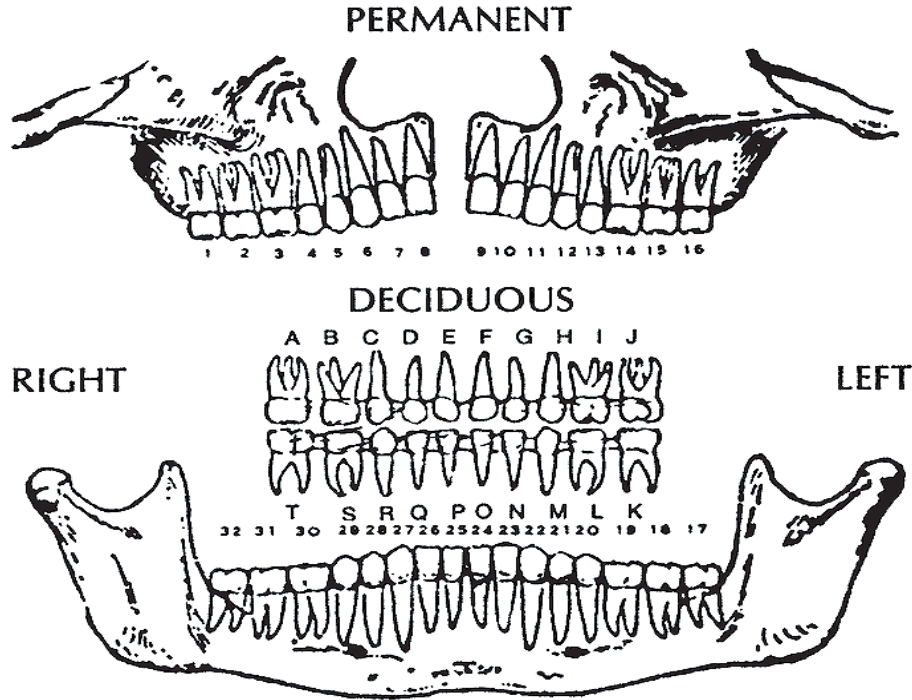


# Drs. Benninger, Schween, & Schmidt

Oral & Maxillofacial Surgery • Dental Implants

## Referral Form

Patient: First Name \_\_\_\_\_ Last Name \_\_\_\_\_ Date \_\_\_\_\_



**IMPORTANT NOTICE TO PATIENTS:** Your first appointment is customarily an exam and consultation visit only. However, if you have clearly been told by Drs. Benninger, Schween and Schmidt's office that you may be given a general anesthetic (put to sleep) on your first appointment:

- You must have absolutely nothing to eat or drink for 8 hours before appointment.
- You must have a responsible adult come with you who can wait in our office and drive you home.

### Consultation:

- ☐ Alveoplasty
- ☐ Biopsy
- ☐ Incision and Drainage
- ☐ Lesion Evaluation
- ☐ Exposure
- ☐ Implants
- ☐ Infection
- ☐ Expose and Bond
- ☐ Pre-Prosthetic
- ☐ Frenectomy
- ☐ Other

### Radiographs or Clinical Photos:

- ☐ Being Mailed
- ☐ Given to patient
- ☐ Please take
- ☐ No x-ray

### Remarks:

Appointment Date \_\_\_\_\_ Time \_\_\_\_\_ Referred by Dr. \_\_\_\_\_

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