



Introducing: _____ Phone # _____

Appointment date: _____ Time: _____

Request for Consultation and Treatment:

- Extraction consultation
- Endodontic surgery
- Implant/Preprosthetic surgery
- Orthognathic surgery
- Biopsy/Oral pathology consultation
- TMJ/Oral facial pain

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

Comments: _____

Date: _____ Doctor: _____ D.D.S./M.D.

Top half - Referring Doctor's copy, bottom half - Patient's copy

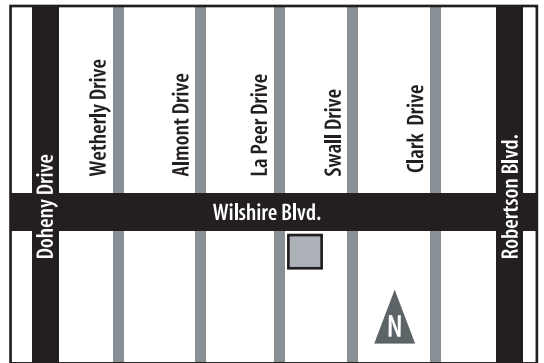
PLEASE BRING THIS CARD WITH YOU

Patient Instructions

Consultations and surgeries are scheduled by appointment. **You are requested to give 24 hours notice if you are unable to keep this appointment.**

Patients under 18 years of age must have a parent or guardian present at the time of consultation and surgery.

Patients who wish to have general anesthesia or sedation must have **nothing** to eat or drink six hours prior to surgery except regular or prescribed medication which can be taken with a few sips of water, and **must** make arrangements to have someone drive them home following surgery.



Our office is located on the corner of Wilshire and La Peer Drive in Beverly Hills. Entrance to parking is on La Peer just south of Wilshire Boulevard.

Douglas Galen, D.D.S.
 8920 Wilshire Blvd. Suite 442
 Beverly Hills, CA 90211
 T: 310.855.1000
 F: 310.289.0768