

# Tooth Rock Periodontics & Implants



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First Available Appointment

## Advanced Implant & Dentoalveolar Surgery Periodontal Plastic Surgery | Comprehensive Periodontics

Patient's Name \_\_\_\_\_ Date Referred \_\_\_\_\_

Home# \_\_\_\_\_ Cell# \_\_\_\_\_

### Radiographs

Work# \_\_\_\_\_ Email \_\_\_\_\_

FMX  Emailed

PANO  Mailed

Please contact patient to set up a consultation  Pt. to contact us

X-Ray  With Patient

None  Take New

Patient is being referred for:

Dental Implants # (s) \_\_\_\_\_

Periodontal Evaluation: tooth or area \_\_\_\_\_

Periodontal Plastic Surgery # (s) \_\_\_\_\_

Crown Lengthening # (s) \_\_\_\_\_

Gingival Graft # (s) \_\_\_\_\_

Emergency Exam \_\_\_\_\_

Root Coverage # (s) \_\_\_\_\_

Other \_\_\_\_\_

How long has the patient been in your practice? \_\_\_\_\_

Initial examination. Date of service: \_\_\_\_\_

Periodontal maintenance therapy every \_\_\_\_ months for \_\_\_\_ years \_\_\_\_ months

Root planing. Date(s) of service: \_\_\_\_\_

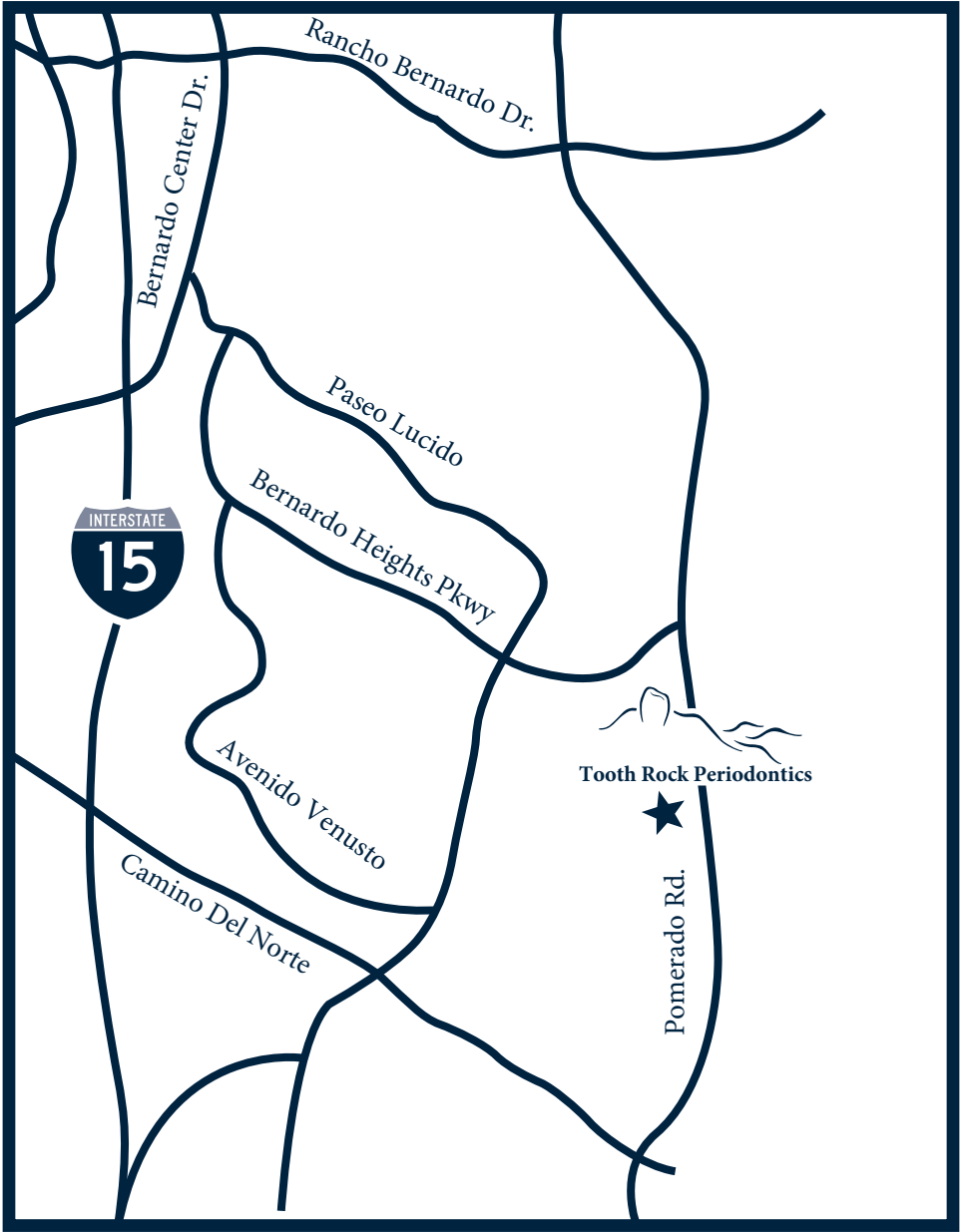
Special instructions or comments section. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Referring Dr. \_\_\_\_\_



Rancho Bernardo Dr.

Bernardo Center Dr.



Paseo Lucido

Bernardo Heights Pkwy

Avenida Venusto

Camino Del Norte



Tooth Rock Periodontics



Pomerado Rd.