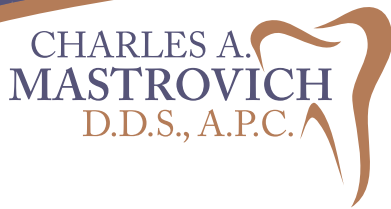


Charles Mastrovich, D.D.S.



911 East Grand Avenue  
Escondido, CA 92025  
760-741-6650  
www.mastrovichdental.com  
info@mastrovichdental.com

Referring Doctor's Name: \_\_\_\_\_ Date: \_\_\_\_\_

Office Phone: \_\_\_\_\_

Office Email: \_\_\_\_\_

Patient's Name: \_\_\_\_\_

Phone: (h) (c) \_\_\_\_\_

**Radiographs**

- WITH PATIENT
- EMAILED
- NONE

- Please call patient for appointment
- Patient will call for appointment

Already appointed

Date/Time: \_\_\_\_\_

Urgency: First Available Appointment

**REFERRED FOR:**

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	

- Unidentified Implant or Broken Component
- Complex Prosthodontics Evaluation
- Dentures (Traditional or Overdenture)
- Implant Prosthodontics/Reconstruction
- Pre-radiation or Joint Replacement evaluation
- Aesthetic Evaluation or Consultation
- Limited Prosthodontic Consultation
- Removable Partial Dentures (RPD)
- TMJ/TMD Evaluation
- Sleep Apnea evaluation/treatment

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

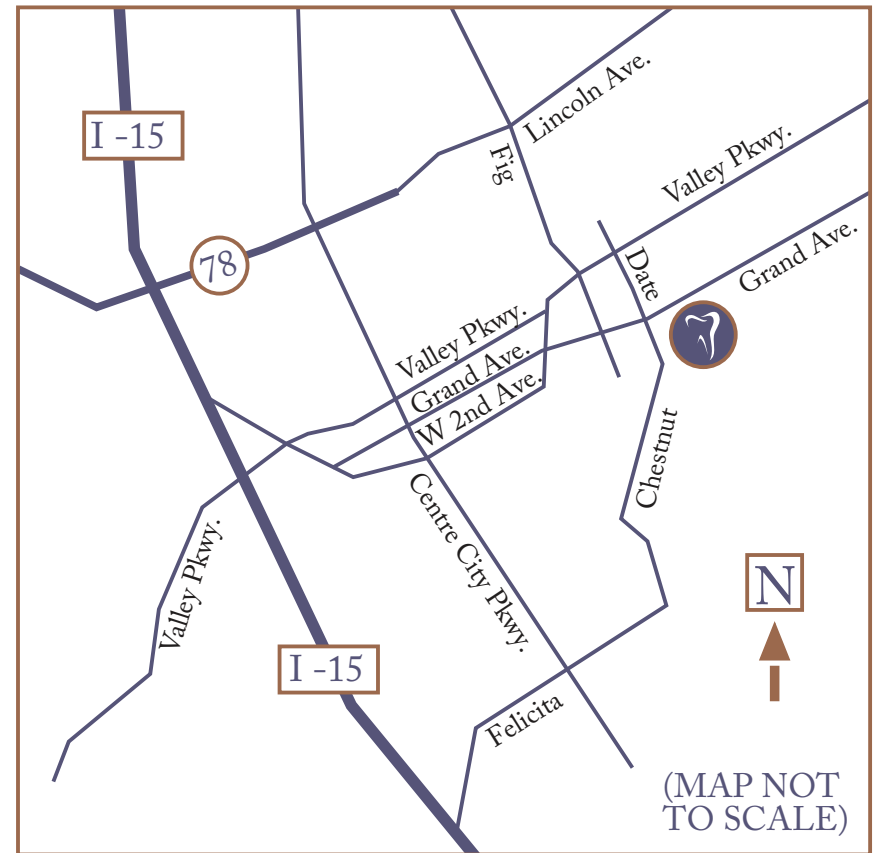
Please fax a copy to our office 760-746-2008

# Restorative & IMR Dentistry



## Rescue and Recovery of Broken Implant Screws & Abutments

911 East Grand Avenue  
Escondido, CA 92025  
760-741-6650



### Instructions to Patients

Please bring an up-to-date list of all current medications and any pertinent dental records, x-rays, models or CT-scans.