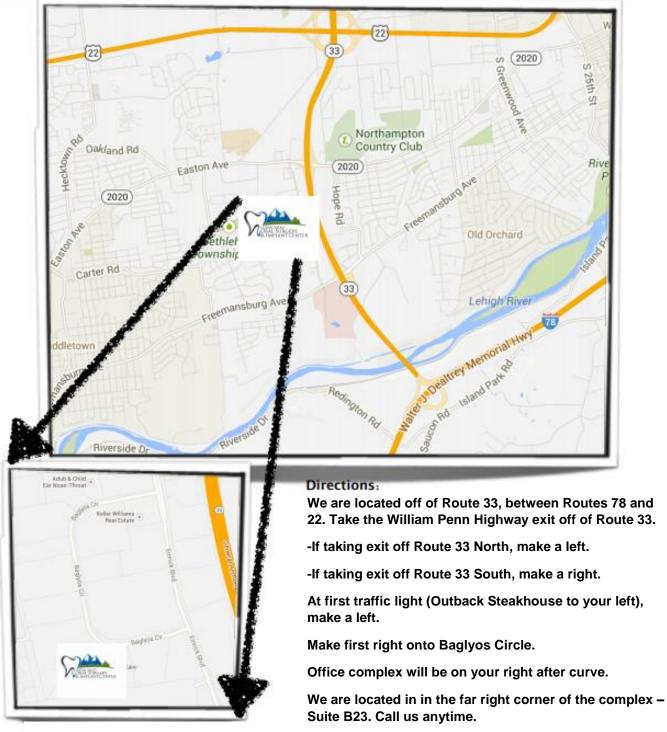


Ahmad Chaudhry, DMD, MD		2571 Bagly	2571 Baglyos Circle, Suite B23	
www.LVOralSurgery.com		Bethlehem	Bethlehem, PA 18020	
		Phone 484	-821-1357	
		Fax 717-99	03-4509	
Date		Minutes off Rt 22 and Rt 33		
Patient's Name		Age		
Referring Doctor's Name				
Referring Doctor's Phone				
Referring Doctor's Email (optio	nal)			
Referred for: Extraction(s)	Impla	nt(s)Bone G	rafting	
Lesion	Other	r		
Remarks:				
		1 2 3 4 5 6 7 8	9 10 11 12 13 14 15 16	
	(FE)		AAAAAMMA	
		Right QQQQQ	Decidous Left	
			A A A A A	
		<i>MBB66666</i>	77777777777777777777777777777777777777	
		32 31 30 29 28 27 26 25	24 23 22 21 20 19 18 17	
)			



Instructions:

Please call the office to make an appointment. The doctor may choose to speak to you regarding your appointment over the phone prior to your date of appointment. This will ensure that a review of your medical history is performed and preliminary instructions given.

If you plan to be sedated:

- 1. Do not eat or drink for 6 hours prior to your appointment
- Ensure that you are accompanied by an adult who can stay in the office during your appointment and drive you home
- 3. Call the office regarding any medications you might be taking

