BIG ISLAND
Periodontics & Implants

Jeremy J Oakley DDS, MSD
Specializing in Periodontal and Dental Implant Surgery

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Introducing:_____

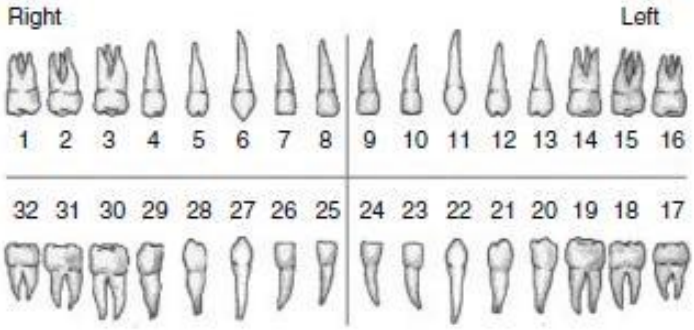
Patient's Phone Number:_____Date:_____

Referring Doctor: _____

REFERRAL REQUEST

___ Comprehensive Periodontal Exam
___ Dental Implants
___ Sinus Augmentation
___ Recession Defects
___ Crown Lengthening
___ Biopsy
___ Limited Periodontal Exam
___ Extraction and Site Development
___ Bone Grafting/Ridge Augmentation
___ Soft Tissue Grafting
___ Esthetic Crown Lengthening
___ Frenectomy
___ Other _____

Tooth/Area: _____



Comments:

Please send any available x-rays: ___ Mailed/Emailed ___ Please take radiographs
Note: A full-mouth radiographic series (within 2 years) is required for comprehensive periodontal exams. If diagnostic radiographs are not available, we will complete additional diagnostic imaging as needed.