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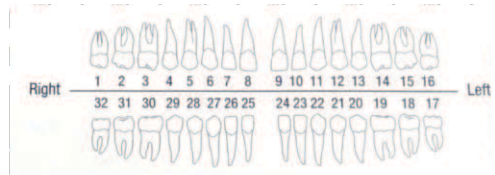
RVA PERIODONTICS AND DENTAL IMPLANT CENTER
Board Certified in Periodontics & Dental Implants
PATIENT REFERRAL

Please call 804.272.9079 to schedule your patient's appointment

Introducing: _____ Date: _____

This patient is being referred for evaluation of the following symptoms:

- Comprehensive Periodontal Evaluation
- Advanced Periodontal Disease
- Crown Lengthening - Esthetic Crown Lengthening
- Lip Repositioning
- Frenectomy
- Esthetic Gingival Contouring - Gingivectomy
- Guided Tissue Regeneration
- Dental Implant/Surgical Full Mouth Rehabilitation
 - Extraction and Socket Grafting
 - Ridge Augmentation
 - Sinus Augmentation
 - Peri-implantitis Therapy
- Recession/Soft Tissue Grafting
- Isolated Periodontal Evaluation
- Orthodontic Co-Therapy
 - Impacted Tooth Exposure (eg: Canine Exposure)
 - Periodontally Accelerated Osteogenic Orthodontic Treatment
- Other/Comments _____



Referred by Doctor: _____ Please fax to 804.272.9107
Please email FMX/Panorex to info@rvaperiodontics.com

- We Are In Network With Most Major Dental Insurance Companies