The Carmel Valley Center for Oral and Maxillofacial Surgery

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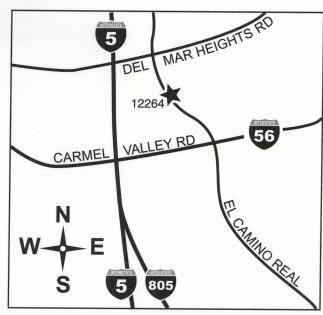


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		,															
REFERRING DOCTOR'S PHONE NUMBER:										FAX: (OPTIONAL):							
X-RAYS:											TYPE OF ANESTHETIC:						
☐ WITH PATIENT ☐ PLEASE TAKE X-RAYS											☐ LOCAL ☐ SEDATION (ASLEEP)						
	ASE:													-			
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R				Е	D	С	В	Α	Α	В	С	D	E				
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	
	LOWER																
REMA	ARKS	5:													-		



INSTRUCTIONS FOR PATIENTS HAVING SEDATION (ASLEEP)

- Do not eat or drink anything 8 hours before your appointment.
- Bring someone with you to drive you home.