## **Referral Form**



Specialist in Periodontology, with Services in Implants, Oral Medicine and Cosmetic Surgery

Please fax to: 231-946-9114

John C. Hall, DDS, MS 400 West Main Street, Suite 113 Gaylord, MI 49734 hallperiodo@gmail.com www.hallperiodontics.com Gaylord Office Phone: 989-731-2700 Traverse City Office Phone: 231-946-2910

Our office is located in the Alpine Executive Plaza, behind the Subway in downtown Gaylord.

Patient has been instructed to call Patient desires a call					
Introducing:					
Home Phone:	Work Phone:				
Referred by:				Date:	
Initial Visit for:					
Complete Evaluation	Localized A	rea	Other:		
Emergency	Gingival Gra	aft			
Crown Lengthening	Implants				
X-Rays:					
Sending	Emailing		Patient bringing	ı	
Comments:					