

The logo features the letters 'AR' in a large, bold, blue font. The letter 'A' is on the left, and the letter 'R' is on the right. Inside the vertical stroke of the 'R', there is a stylized white graphic of a dental spring or coil. Above the 'AR' is a blue swoosh that arches over the letters. To the right of the 'AR' logo, the text 'Periodontics, PC' is written in a large, dark grey, sans-serif font.

# AR Periodontics, PC

## Appointment Information:

This time is reserved specifically for you. If by necessity, you must cancel your appointment, please notify us at least 48 hours in advance.

Patient's Name: \_\_\_\_\_

Appt. Date \_\_\_\_\_ Day \_\_\_\_\_ Time \_\_\_\_\_

Patient's Phone: \_\_\_\_\_ (h) \_\_\_\_\_ (w)

Referred By: \_\_\_\_\_

Premedication required  Patient is new to the practice

Remarks or Special Instructions \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

## PLEASE EVALUATE PATIENT FOR:

- |  |  |
|--|--|
| <input type="checkbox"/> Periodontal disease/bone loss | <input type="checkbox"/> Dental Implants       |
| <input type="checkbox"/> Crown lengthening # _____     | <input type="checkbox"/> Surgical Extraction & |
| <input type="checkbox"/> Soft tissue grafting # _____  | socket preservation ____                       |
| <input type="checkbox"/> Guided tissue regeneration    | <input type="checkbox"/> Ridge Augmentation    |
| # _____  | # _____  |
| <input type="checkbox"/> Periodontal Cosmetic Surgery  | <input type="checkbox"/> Root coverage # ____  |
| <input type="checkbox"/> Other _____                   |  |
| <input type="checkbox"/> Patient bringing x-rays       | <input type="checkbox"/> Sending x-rays        |

315 E Northfield Rd, Ste 2D, Livingston, NJ 07039 Tel: 973-625-1491 Fax: 973-625-1319

[www.arperiodontics.com](http://www.arperiodontics.com)