

Referring Doctor Form

Fill out the form below to refer a patient to our practice.

Patient Information

Introducing: _____ Date: _____
 Phone: _____ Email: _____

Reason for Referral

- | | |
|---|---|
| <input type="checkbox"/> Periodontal Laser Therapy (LANAP/LAIP) | <input type="checkbox"/> Periodontal Disease |
| <input type="checkbox"/> Bone Loss | <input type="checkbox"/> Pinhole Gum Grafting / Tunneling |
| <input type="checkbox"/> Connective Tissue Grafting | <input type="checkbox"/> Alloderm |
| <input type="checkbox"/> Cosmetic Gum Surgery Gummy Smile | <input type="checkbox"/> Crown Lengthening |
| <input type="checkbox"/> Full Arch/Full Mouth Implants | <input type="checkbox"/> Dental Implants |
| <input type="checkbox"/> Bone Graft/Gore Tex | <input type="checkbox"/> Extraction/Socket Preservation |
| <input type="checkbox"/> Frenectomy/Fiberotomy | <input type="checkbox"/> Tooth Mobility/Drifting |
| <input type="checkbox"/> Sinus Lift | <input type="checkbox"/> Ridge Augmentation |
| <input type="checkbox"/> CT Scan | <input type="checkbox"/> Other |

X-Rays

X-Rays Enclosed: Pano Full Series Bite Wings Single P.A. CT Scan
 X-Rays Delivery Method: Emailed Sent with Patient

Clinical Information

Last Scaling: Prophylaxis Root Planing/Curettage

Patient Needs to be Premedicated:

Yes

No

Last Scaling Date: _____

Area of Concern (Teeth)

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

Doctor Information & Remarks

Referred By Doctor: _____ Doctor Phone: _____
Doctor Email: _____ Appointment Date: _____

Is it ok to contact the patient?

Yes

No

Remarks/Instructions:

- I consent to receive marketing text messages, about special offers, discounts, and service updates, from Crawford Implant & Laser Periodontics, LLC [Crawford Implant Dentistry & Laser Periodontics] at the phone number provided. Message frequency may vary. Message & data rates may apply. Text HELP for assistance, reply STOP to opt out.
- I consent to receive non-marketing text messages about account notifications, alerts, order confirmations, from Crawford Implant & Laser Periodontics, LLC [Crawford Implant Dentistry & Laser Periodontics] about appointment reminders and account notifications related to my dental care Message frequency may vary, message & data rates may apply. Text HELP for assistance, reply STOP to opt out.

Crawford Implant Dentistry & Laser Periodontics

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