



### Oral Surgical Treatment Request

Date: \_\_\_\_\_

Patient Name: \_\_\_\_\_ Patient Phone: \_\_\_\_\_

Patient Email: \_\_\_\_\_

Parent's Name if Patient is a Minor: \_\_\_\_\_

Patient's Date of Birth: \_\_\_\_\_

#### Referral Reason:

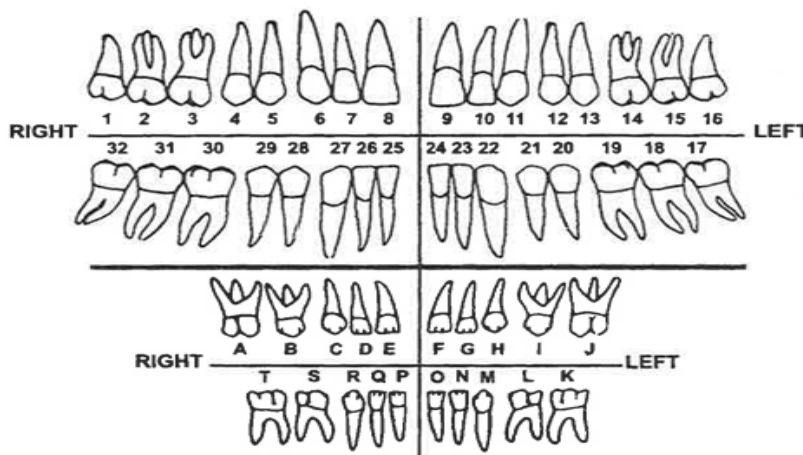
**DENTAL DIAGNOSIS** \_\_\_\_\_

- Extract Wisdom Teeth     Extract Teeth as Marked     Expose and Bond     TMJ
- Take Imaging Cone Beam CT Scan/Panoramic X-ray     Biopsy/Pathology     Other Procedure \_\_\_\_\_
- Implant

**Implant Type Preferred:** Straumann \_\_\_\_\_ Nobel \_\_\_\_\_ Neoss \_\_\_\_\_ Other \_\_\_\_\_

Bone Level \_\_\_\_\_ Tissue Level \_\_\_\_\_

#### **Please Extract Teeth As Marked**

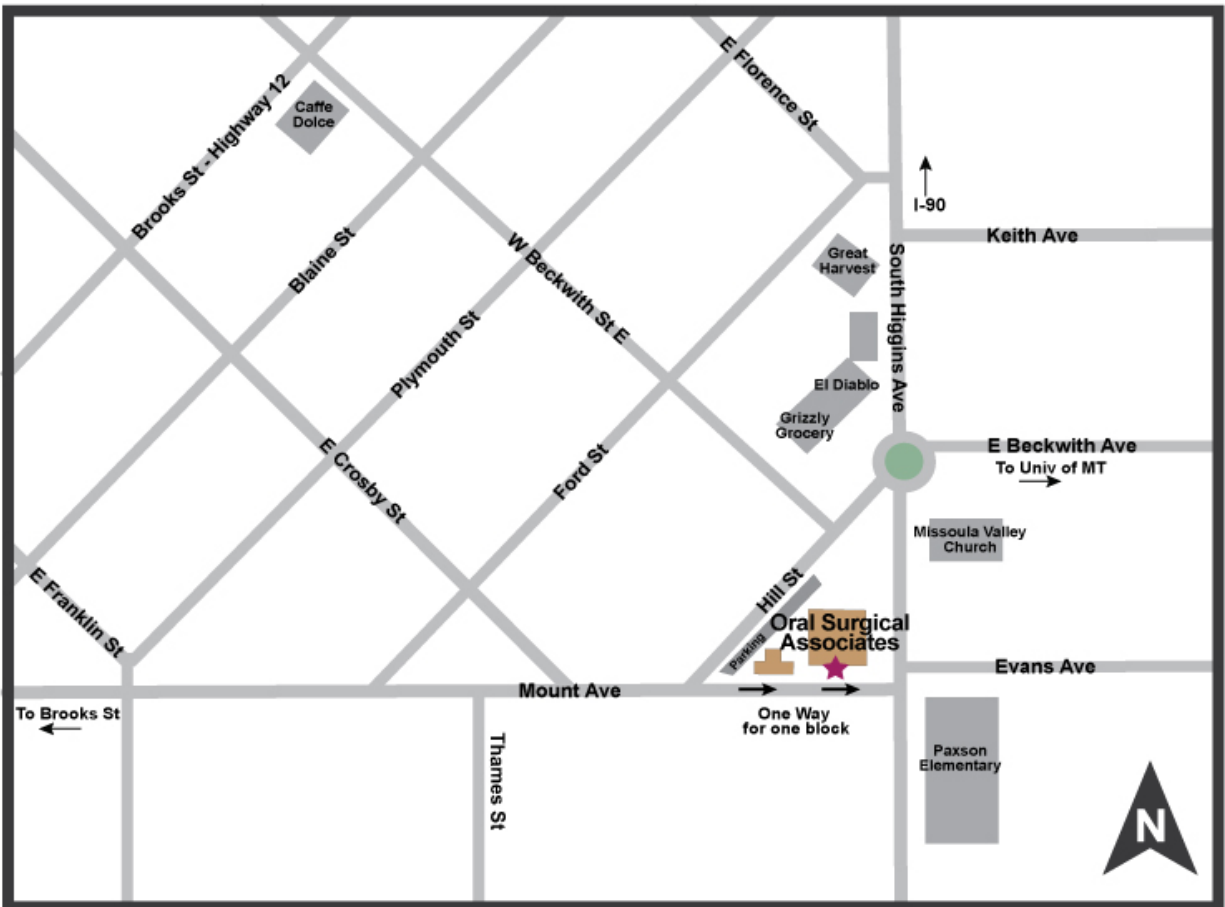


Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

X-ray will be:  Emailed     Mailed     Sent with Patient     Take Necessary Films

**Email referral and x-ray to: [xray@osamontana.com](mailto:xray@osamontana.com)**

Referred by: \_\_\_\_\_ Signature: \_\_\_\_\_



1. Please call to make initial appointment with our office, (406) 728-6840
2. Patients under the age of 18 must be accompanied by a parent or guardian at the time of surgery.
3. An examination or consultation may be necessary to determine the extent of surgery.
4. Estimates of surgical expenses are given only after a consultation exam with our doctors.
5. Patients having general anesthesia or I.V. sedation must:
  - a. Have a responsible individual available to stay in the office during the procedure, and to drive you home after the procedure.
  - b. Have no food or liquids of any type for at least 6 to 8 hours prior to appointment time, except necessary medications with a small sip of water to swallow them.
  - c. Wear a short sleeve shirt to facilitate I.V. placement.
6. If you have recent x-rays of the areas of concern please bring them with you.
7. Bring a listing of all current medications, as well as reasonable documentation or knowledge of medical conditions.
8. Please give 48 hours notice of cancellation.
9. All fees are payable at time of service unless other arrangements have been made before surgery.
10. Please consider pre-registering online at: [www.oralurgicalassociates.com](http://www.oralurgicalassociates.com)