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ORAL & MAXILLOFACIAL SURGEONS  
OF ST. LOUIS PC

\*Diplomates American Board of Oral  
and Maxillofacial Surgery

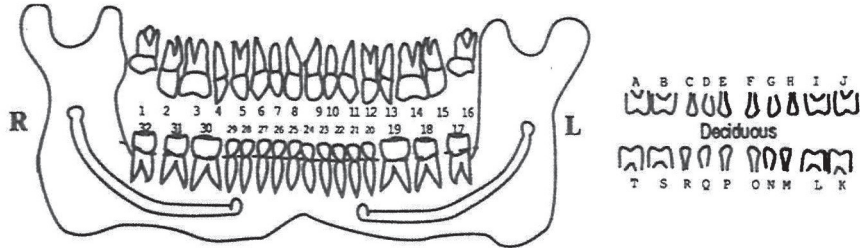
165 N. MERAMEC, SUITE 300 | CLAYTON, MO 63105  
(314) 726-2755 FAX 726-9538  
xrays@gatewayoralstl.com

Introducing: \_\_\_\_\_ To Dr.: \_\_\_\_\_

Referred by : \_\_\_\_\_ Date : \_\_\_\_\_

REFERRED FOR:

- |   |   |
|---|---|
| <input type="checkbox"/> Oral Surgery               | <input type="checkbox"/> Orthognathic Surgery |
| <input type="checkbox"/> General Anesthesia         | <input type="checkbox"/> Facial Pain          |
| <input type="checkbox"/> Dental Implants            | <input type="checkbox"/> TMJ Disorder         |
| <input type="checkbox"/> Reconstructive Jaw Surgery | <input type="checkbox"/> Other _____          |



ADDITIONAL INSTRUCTIONS: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IMPORTANT**  
See other side



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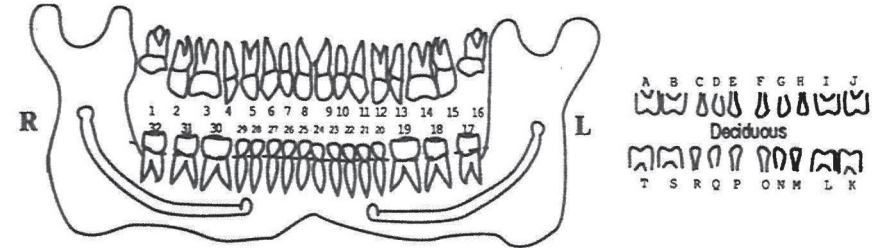
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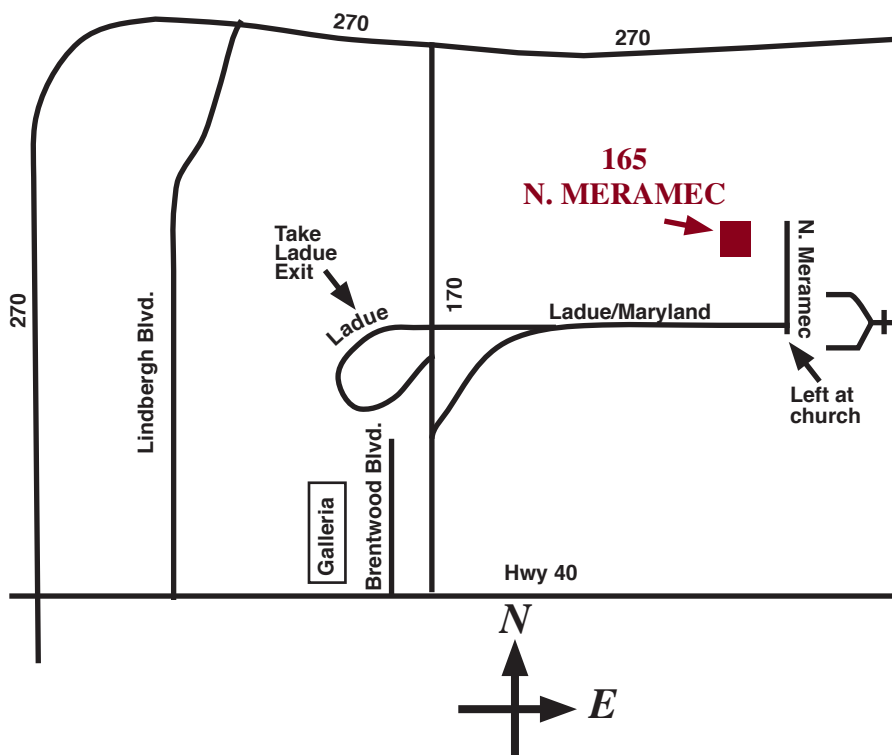
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\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**IMPORTANT**  
See other side

## INSTRUCTIONS TO PATIENTS

1. Your appointment is on \_\_\_\_\_ at \_\_\_\_\_ AM / PM.
2. Your appointment is with Dr. \_\_\_\_\_.
3. If you have **x-rays**, please arrange to have them sent or bring them with you.
4. If you are taking **medicine** of any kind, bring a list of the medications and the dosage.
5. If you wish to have general anesthesia or sedation you **must**:
  - A. Have nothing to eat or drink after midnight.  
(Medications may be taken with a sip of water.)
  - B. Bring a responsible adult to drive you home.



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