



Center for Oral Facial Reconstruction & Implantology

Charles D. Hasse, D.D.S., Director



Irvine Medical Center Physicians' Office Building • 16300 Sand Canyon, Suite 711, Irvine, CA 92618
 Tel: (949) 727-7000 • Fax: (949) 727-3924 • E-mail: osurgn@cox.net • Web site: www.jawdoc.net

Date _____ Time _____ Day _____

Introducing _____

Patient's phone number _____

Referred by _____

Welcome to the Center for Oral Facial Reconstruction & Implantology

The center is committed to providing you with the highest quality of care possible.

To help us in scheduling your appointment, please remember the following:

- Your surgical referral slip and X-rays if applicable.
- A list of medications you are presently taking.

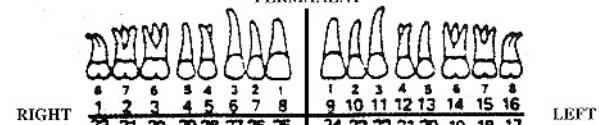
Special instructions for General Anesthesia/Sedation Patients

- Patients who will receive I.V. Sedation or general anesthesia must have NO FOOD OR DRINK, including water, at least 6 hours prior to surgery unless otherwise instructed by the surgeon.
- You must arrange for someone to drive you home after surgery and you SHOULD NOT DRIVE for the remainder of the day.
- Wear comfortable clothing with sleeves that are easy to push up.
- Minors (18 years) must have parent or guardian present or written consent from them at time of surgery.

Please indicate teeth to be removed or treatment to be performed:

EXTRactions
 DENTAL IMPLANTS
 ORTHOGNATHIC SURGERY EVALUATION
 BONE GRAFTS/RECONSTRUCTIVE EVALUATION
 BIOPSY/ORAL PATHOLOGY EVALUATION
 TMJ/OROFACIAL PAIN EVALUATION
 SLEEP/SNORING DISORDERS
 SURGICAL, ENDODONTICS
 COSMETIC SURGERY
 WILCKODONTICS

PERMANENT



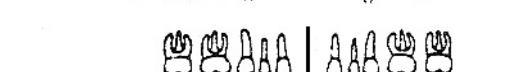
RIGHT

LEFT



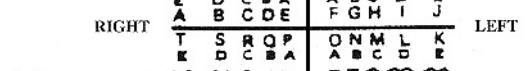
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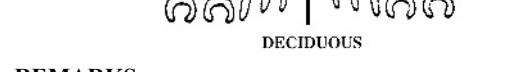
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RIGHT

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RIGHT

LEFT

DECIDUOUS

REMARKS
