

JF Lopez DDS, MD, RPh, PA
Oral and Maxillofacial Surgery

1770 St. James Pl, Suite 512
 Houston, Texas 77056
 Phone: (713) 622-8607 Fax: (713) 622-9207
 Email: info@jflopezoms.com

Date: _____

Patient: _____ Phone: _____ DOB: _____

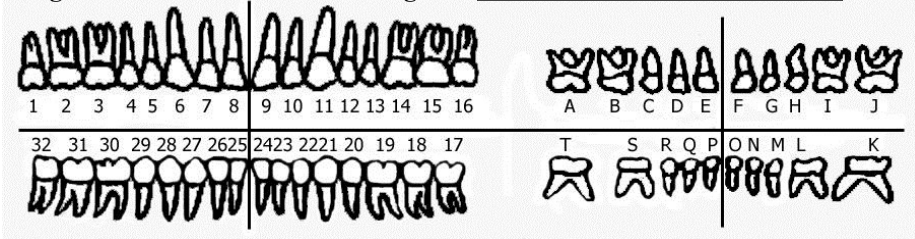
Referring Doctor: _____ Phone _____

Chief Complaint:

Past Medical History:

- Non-Contributory Patient on Coumadin® or other blood thinners
- Cardiac problems or uncontrollable hypertension
- Other _____
- Premedication Needed

Diagnosis and Examination Findings: *Please circle teeth to be extracted*



Evaluate for:

- Alveoloplasty
- Biopsy
- Frenectomy
- Apicoectomy
- Incision & Drainage
- Soft Tissue
- Hard Tissue
- Crown Lengthening
- Other _____
- Other _____

Consultation:

- TMJ
- Implant
- Cancer Screen / Eval

Remarks or Special Instructions:

Dr. _____



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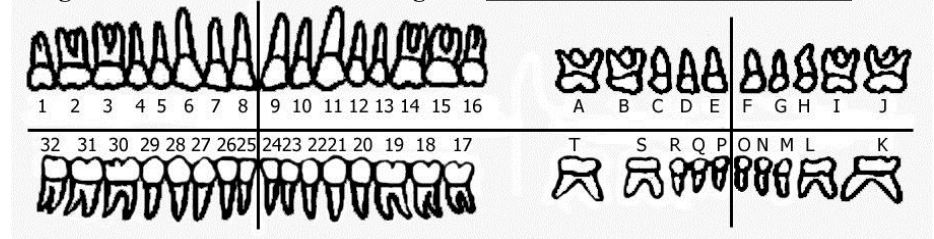
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