



# Implant Dentistry and Periodontics

Michael D. Edwards, DDS, MSD

A comprehensive approach to esthetics, health and function.

8801 N. Meridian Street, Suite 103  
Indianapolis, Indiana 46260  
317.574.0600 voice / 317.574.0606 fax

9865 E. 116th Street, Suite 100  
Fishers, Indiana 46037  
317.842.2273 voice / 317.842.7911 fax

info@indyimplants.com / www.indyimplants.com

Patient Name \_\_\_\_\_

Work Phone: \_\_\_\_\_ Referring Doctor \_\_\_\_\_

Email: \_\_\_\_\_ Patient's Main Phone: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

### Reason for Referral:

- |   |  |
|---|--|
| <input type="checkbox"/> Comprehensive exam and treatment | <input type="checkbox"/> Biopsy        |
| <input type="checkbox"/> Soft Tissue Grafting/Recession   | <input type="checkbox"/> Periodontitis |
| <input type="checkbox"/> Evaluation for implants          | <input type="checkbox"/> Other         |

### Specific Concerns:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

### Diagnostic Films & Models:

- |   |   |
|---|---|
| <input type="checkbox"/> X-rays being sent or emailed         | <input type="checkbox"/> Study models are available to be picked up |
| <input type="checkbox"/> Patient has films                    | <input type="checkbox"/> Mounted models are available               |
| <input type="checkbox"/> There are no current films available |   |
| <input type="checkbox"/> X-rays are available to be picked up |   |

### Dental Implant Restorative Plan:

Single implant-supported crowns/s, sites/s \_\_\_\_\_

Multiple unit restoration from \_\_\_\_\_ to \_\_\_\_\_

Fully edentulous lower jaw:

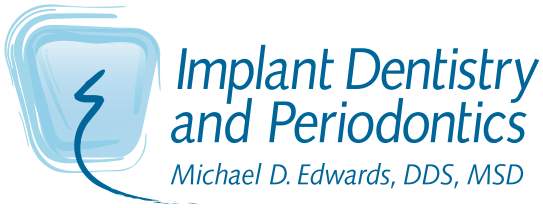
Fixed restoration       Ball overdenture       Bar overdenture

Upper full arch:       Fixed restoration       Bar overdenture

- Please remove teeth
- Place implant and return with healing abutments and fixture level impression copings
- Place implants and return with final abutments and impression copings
- Place implants and return with final abutments and temporary restorations

### Confidentiality Note:

This document contains information which is confidential and/or privileged. The information is intended only for the use of Implant Dentistry and Periodontics. If you are not the intended recipient, you are hereby notified that any disclosure, copying, distribution or the taking of any action in reliance on the contents of this document is strictly prohibited, and that these documents should be forwarded immediately to Implant Dentistry and Periodontics. If you have received this document in error, please call (317) 842-2273.



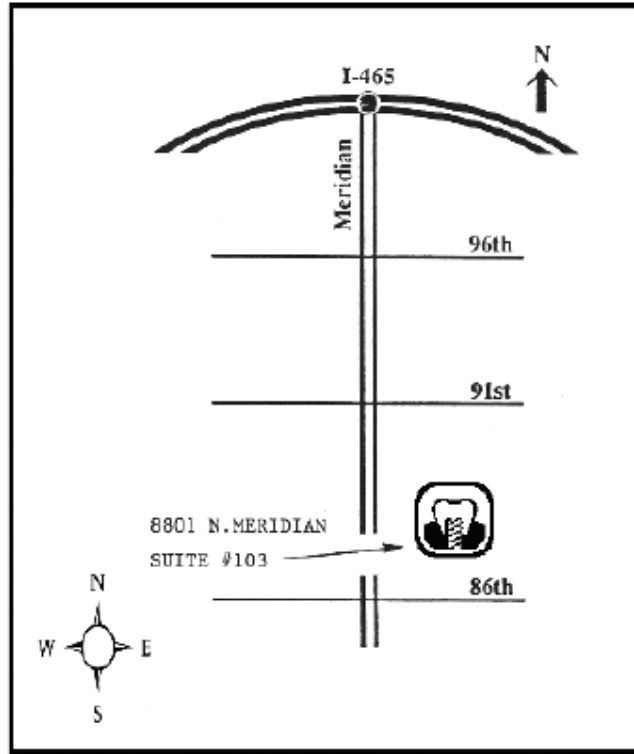
A comprehensive approach to esthetics, health and function.

8801 N. Meridian Street, Suite 103  
Indianapolis, Indiana 46260  
317.574.0600 voice / 317.574.0606 fax

9865 E. 116th Street, Suite 100  
Fishers, Indiana 46037  
317.842.2273 voice / 317.842.7911 fax

info@indyimplants.com / www.indyimplants.com

Indianapolis:



Fishers:

