

William B. Bohannon, D.D.S., M.D.

ORAL & MAXILLOFACIAL SURGERY

2025 Forest Avenue, Suite 6, San Jose, CA 95128

(408) 286-1553 • Fax (408) 286-8511

Patient: _____ Date: _____

Patient's Ph: (Home) _____ (Work) _____

Appointment Day: _____ Date: _____ Time: _____

Referred by Dr. _____ Dr.'s Signature: _____

Office Phone: _____ Fax: _____

Please circle teeth to be removed

UPPER

1	2	3	4	5	6	7	8		9	10	11	12	13	14	15	16	
R																	L
			A	B	C	D	E		F	G	H	I	J				
			T	S	R	Q	P		O	N	M	L	K				
32	31	30	29	28	27	26	25		24	23	22	21	20	19	18	17	

LOWER

Please check desired procedure:

- Alveoloplasty _____
- Apicoectomy (Tooth #___)
- Biopsy / Lesion Evaluation
- Expose (Tooth #___)
- Bond (Tooth #___)
- Frenectomy
- Incision & Drainage
- Crown Lengthening (Tooth # _____)
- Soft Tissue / Hard Tissue Regeneration
- Orthognathic Evaluation
- Cosmetic Surgery

Consultation

DENTAL IMPLANTS (INDICATE AREA & #) _____

Radiographs

- GIVEN TO PATIENT
- PLEASE TAKE
- BEING MAILED

Remarks _____

We Look Forward To Serving You
William B. Bohannon, D.D.S., M.D.

INSTRUCTIONS TO PATIENT

You have been referred for special care to an Oral and Maxillofacial Surgeon, Dr. Bohannon, and staff will make every effort to make your visit a comfortable experience. Please assist our office by providing the following information at the time of your consultation.

- This surgical referral slip and any x-rays if applicable.
- A list of medications you are presently taking.
- If you have medical or dental insurance, please bring your insurance card or the phone number and mailing address information.
- Minors (under 18 years) must be accompanied by a parent or legal guardian.

**FOR IV SEDATION
OR
GENERAL ANESTHESIA**

1. Do Not Eat Or Drink Anything For 6 Hours Prior To Your Appointment; No Food, No Liquid, Not Even Water.
2. A responsible adult/driver must accompany you to our office and wait for you at our office to drive you home.
3. Brush your teeth well prior to surgery, wear loose, comfortable clothing, avoid make-up and contact lenses.
4. If you have any questions please feel free to contact our office anytime (408) 286-1553.



DIRECTIONS

FROM HIGHWAY 880:

- Exit South Bascom Avenue
- Go South on Bascom Avenue
- Turn right onto Naglee
- We are 1/2 a block on the right 2025 is on sign post and street sign will say "Begin Forest Avenue" in front of building.

FROM HIGHWAY 280:

- Exit 880 No. (toward Oakland)
- Exit South Bascom Avenue
- Go South on Bascom Avenue
- Turn right onto Naglee Avenue
- We are 1/2 a block down on right 2025 is on sign post and street sign says "Begin Forest Avenue" in front of our building