



MIDWEST DENTAL

SPECIALISTS

Mariana Mambrini Soldatelli, D.D.S. - Prosthodontics

Justin J. Villanueva, D.M.D, M.S.D., D.H.L. - Periodontics

Monica Prasad Gibson, BDS, PhD, MS, FRCDC - Periodontics

Massimiliano Di Giosia, D.D.S., M.S. - Orofacial Pain

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Introducing: _____

Date: _____ **Patient Phone #:** _____

Referred by Dr.: _____

☐ Prosthodontic Examination: Area _____

☐ Comprehensive Periodontal Examination

☐ Limited Examination: Area _____

☐ Crown Lengthening

☐ Frenum

☐ Bone Loss

☐ Gingival Graft

☐ Implant Examination: Area _____

Orofacial :

☐ TMJ Disorders

☐ Sleep Apnea/Snoring

☐ Facial Pain

☐ Other _____

Radiographs:

☐ Please take full mouth survey

☐ Please take x-ray of area

☐ We are sending x-rays

Comments: _____

Appointment Date & Time: _____