



RANCHO DEL REY

ORAL & FACIAL SURGERY CENTER

JASON B. GILE, D.D.S., M.D. ♦ RICHARD S. MOWRY, D.M.D.

Diplomate, American Board of Oral and Maxillofacial Surgery
Fellow, American Association of Oral and Maxillofacial Surgeons

Dental Implants ♦ Wisdom Teeth ♦ Facial-Jaw Reconstruction ♦ Oral Pathology

Today's Date _____ Patient's Phone # _____

Appointment Information _____ Referred By _____

Date & Time _____ Dentist Phone # _____

Introducing _____

This time has been scheduled for you, to evaluate your specific needs.
If it becomes necessary to cancel, we require 72 hours notice.

PLEASE INDICATE TEETH TO BE TREATED

RIGHT								LEFT							
01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17
DECIDUOUS															
A B C D				E F G H I J											
T S R Q				P O N M L K											

A consultation is required prior to a procedure that requires intravenous medication to assess your needs.

XRAYS: ☐ Mailed ☐ With Patients ☐ Please Take

CONSULTATION/PROCEDURES (PLEASE CHECK THE BOX)

- | | | |
|--|---|---|
| <input type="checkbox"/> Implants | <input type="checkbox"/> Expose & Bond | <input type="checkbox"/> Ridge Augmentation |
| <input type="checkbox"/> Extraction(s) | <input type="checkbox"/> Incise & Drain | <input type="checkbox"/> Sinus Lift R L |
| <input type="checkbox"/> Alveoplasty | <input type="checkbox"/> Frenectomy Max Mand | <input type="checkbox"/> Crown Lengthening |
| <input type="checkbox"/> Bone Graft | <input type="checkbox"/> Biopsy | <input type="checkbox"/> Lesion Evaluation |
| | <input type="checkbox"/> Facial Cosmetics/Botox/Fillers | |

☐ Other _____

Comments _____

1040 Tierra Del Rey, Suite 109 ♦ Chula Vista, CA 91910

619.421.2322 phone ♦ 619.421.3882 fax ♦ www.rdroralsurgery.com

PLEASE LOOK ON REVERSE SIDE FOR MAP AND DIRECTIONS

White copy is for Rancho Del Rey Oral & Facial Surgery Center / Yellow copy is for referring office

Thank you for choosing our office!

To help make your visit smooth and efficient, please review the following guidelines:

- **A preoperative consultation is recommended** for all patients. Please schedule this before any surgery.
- If you're being seen for a **general anesthesia or sedation** procedure:
 - Do not eat or drink anything** (including water) **8 hours prior to surgery.**
 - Arrange for a responsible adult** to drive you home and remain with you after the procedure.
 - Minors must be accompanied** by parent or legal guardian.
- Bring a **valid photo ID** and a list of **current medications** to your appointment.
- If you have any questions, feel free to call us at **(619) 421-2322.**

Directions to Our Office

- Our facility is located at the **end of the cul-de-sac on the right-hand side.**
- Look for the **two-story tan professional building with blue trim.**
- Suite 109 is at the **rear of the building on the southeast corner.**
- The entrance has a **glass door facing the parking lot.**

