



SCOTTSDALE IMPLANTS & PERIODONTICS

BIOLOGICAL • LASER • WELLNESS CENTER



REFERRING PROVIDER

Referring Provider _____
Office Name _____
Phone _____
Email _____

PATIENT INFORMATION

Patient Name _____
DOB _____
Phone _____
Email _____

REASON FOR REFERRAL

(please check all that apply)

- | | | |
|--|--|---|
|  PERIODONTAL |  IMPLANT |  WELLNESS / LASER |
| ☐ Comprehensive Evaluation | ☐ Single Implant | ☐ Sleep & Snoring Consultation |
| ☐ Limited Evaluation | ☐ Multiple Implants | ☐ Laser Therapy |
| ☐ LANAP® Consultation | ☐ Full Arch Consultation | ☐ Regenerative Consultation |
| ☐ Mucogingival / Grafting | ☐ Ridge Augmentation | ☐ Other _____ |
| ☐ Crown Lengthening | ☐ Sinus Augmentation | |

AREAS OF CONCERN

RIGHT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	LEFT
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	

CLINICAL NOTES / SPECIAL INSTRUCTIONS

WHY REFER TO US?



LANAP® CERTIFIED LASER THERAPY

Minimally invasive treatment for periodontal disease with less discomfort and faster recovery.



WATCH: GUM DISEASE
& LANAP EXPLAINED



DENTAL IMPLANTS

Single to full-arch solutions with advanced planning and predictable results.



WATCH: KARL'S
IMPLANT STORY



REGENERATIVE & BIOLOGIC APPROACHES

Focused on rebuilding and preserving natural bone and soft tissue.



SLEEP & SNORE SOLUTIONS

Screening and treatment for sleep-disordered breathing and snoring.



WATCH: SLEEP &
SNORING THERAPY



ADVANCED LASER TECHNOLOGY

State-of-the-art laser therapies for improved outcomes and patient comfort.



COLLABORATIVE CARE

We partner with you to provide exceptional care for your patients.

*Your partner in
health, function & confidence.*



GET DIRECTIONS



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