



## PATIENT REFERRAL FORM

**Bruce A. Smoler, D.D.S., F.A.G.D.**

Fellow International Congress of Oral Implantology

**[www.855NeedTeeth.com](http://www.855NeedTeeth.com)**

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

Referred By: \_\_\_\_\_

Date: \_\_\_\_\_

Referral Location:

- 820 N. Wayne Road  
Westland, MI 48185  
734.728.5600
- 332 W Tienken Road, Suite A  
Rochester Hills, MI 48306  
248.601.4460

- |  |  |
|--|--|
| <input type="checkbox"/> I.V. Sedation       | <input type="checkbox"/> Referring DDS to<br>Treat Prosthetics   |
| <input type="checkbox"/> TMJ Treatment       | <input type="checkbox"/> Surgical Exposures  |
| <input type="checkbox"/> Sinus Graft         | <input type="checkbox"/> Pinhole Gum<br>Rejuvenation   |
| <input type="checkbox"/> Special Needs       | <input type="checkbox"/> Stem Cell Therapy/<br>PRGF  |
| <input type="checkbox"/> Sleep Apnea Options | <input type="checkbox"/> FREE CT Scan*   |
| <input type="checkbox"/> Dental Phobics      | <input type="checkbox"/> <br>SMOLER INSTITUTE<br>EXPRESS TEETH IN A DAY |
| <input type="checkbox"/> Dental Implants     |  |
| <input type="checkbox"/> Chin/Bone Graft     |  |

Remarks: \_\_\_\_\_

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Dental Professionals interested in learning and advancing their Dental Implant Procedures through Smoler Institute Hands on Mentorship Program, please visit:

**[www.SmolerCEServices.com](http://www.SmolerCEServices.com)**

\*When surgery started at Smoler Institute. Up to a \$395.00 Value