



CYNTHIA A. LAYPORT, D.M.D.
 SPECIALIST IN PERIODONTICS
 9900 SW Greenburg Road, Suite 230
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 Date:

This Will Introduce My Patient: _____

Referred By Dr.: _____ Doctor's Phone: _____

Patient's Phone: _____

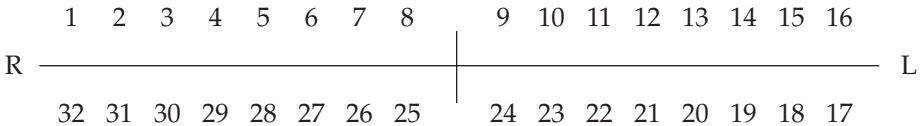
Appointment Scheduled Patient Will Call Please Contact Patient

Day _____ Date _____ Time _____

Reason For Referral:

- 1. Comprehensive Periodontal Exam And Consult
- 2. Isolated Periodontal Problem
- 3. Crown Lengthening
- 4. Gum Graft / Mucogingival Involvement
- 5. Restorative Consultation
- 6. Implant Evaluation
- 7. Other _____

Please Circle Area(s) of Concern:



FMX Available: _____ Dr. Send via: Mail E-mail
 Patient Bringing Please Take

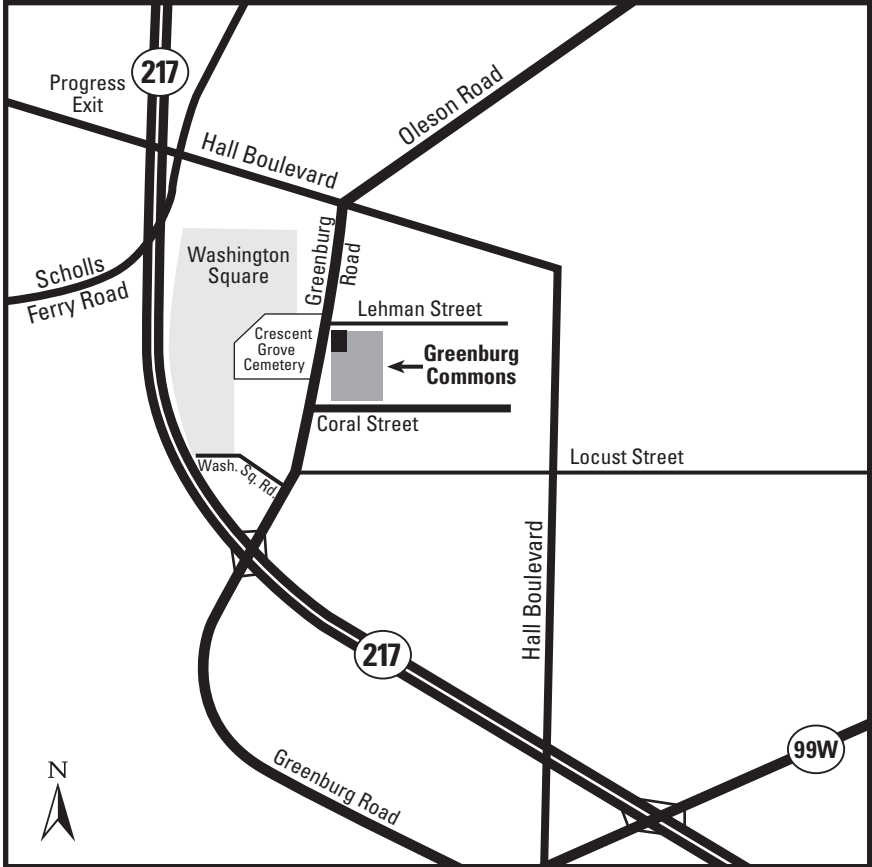
Root Planing Done: _____

Projected Restorative Treatment: _____

Comments: _____

Directions from Highway 217:

- Take the Greenburg Road Exit
 - From 217 Southbound: turn left onto Greenburg Road
 - From 217 Northbound: turn right onto Greenburg Road
- Travel 0.3 miles and turn right on Coral Street
- Turn left into the parking lot of the Greenburg Commons
- Dr. Layport's office is located in the northwest corner of the Greenburg Commons on the second floor, suite 230.



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