



**ATLANTA WEST**  
 PERIODONTICS & IMPLANTS  
 — PHUONG THAO NGUYEN, DDS, MSD —

2168 Skyview Dr,  
 Lithia Springs, GA 30122

P: 770.739.5097

F: 770.739.0517

AtlantaWest-Periodontics.com

INTRODUCING \_\_\_\_\_

REFERRED BY DR. \_\_\_\_\_

YOUR APPOINTMENT IS ON \_\_\_\_\_, 20\_\_\_\_ AT: \_\_\_\_\_

**REFERRAL FOR:**

- |   |  |
|---|--|
| <input type="checkbox"/> Periodontal Evaluation           | <input type="checkbox"/> Soft Tissue Graft       |
| <input type="checkbox"/> Guided Tissue Regeneration       | <input type="checkbox"/> Crown Lengthening       |
| <input type="checkbox"/> Extraction                       | <input type="checkbox"/> Biopsy - Soft Tissue    |
| <input type="checkbox"/> Implants                         | <input type="checkbox"/> Frenectomy              |
| <input type="checkbox"/> Block Graft - Ridge Augmentation | <input type="checkbox"/> Gingivectomy            |
| <input type="checkbox"/> Sinus Lift                       | <input type="checkbox"/> Ortho Exposure of Teeth |

								A	B	C	D	E									F	G	H	I	J					
1	2	3	4	5	6	7	8									9	10	11	12	13	14	15	16							
32								31	30	29	28	27	26	25									24	23	22	21	20	19	18	17
								T	S	R	Q	P									O	N	M	L	K					

Comments: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

**RADIOGRAPHS:**

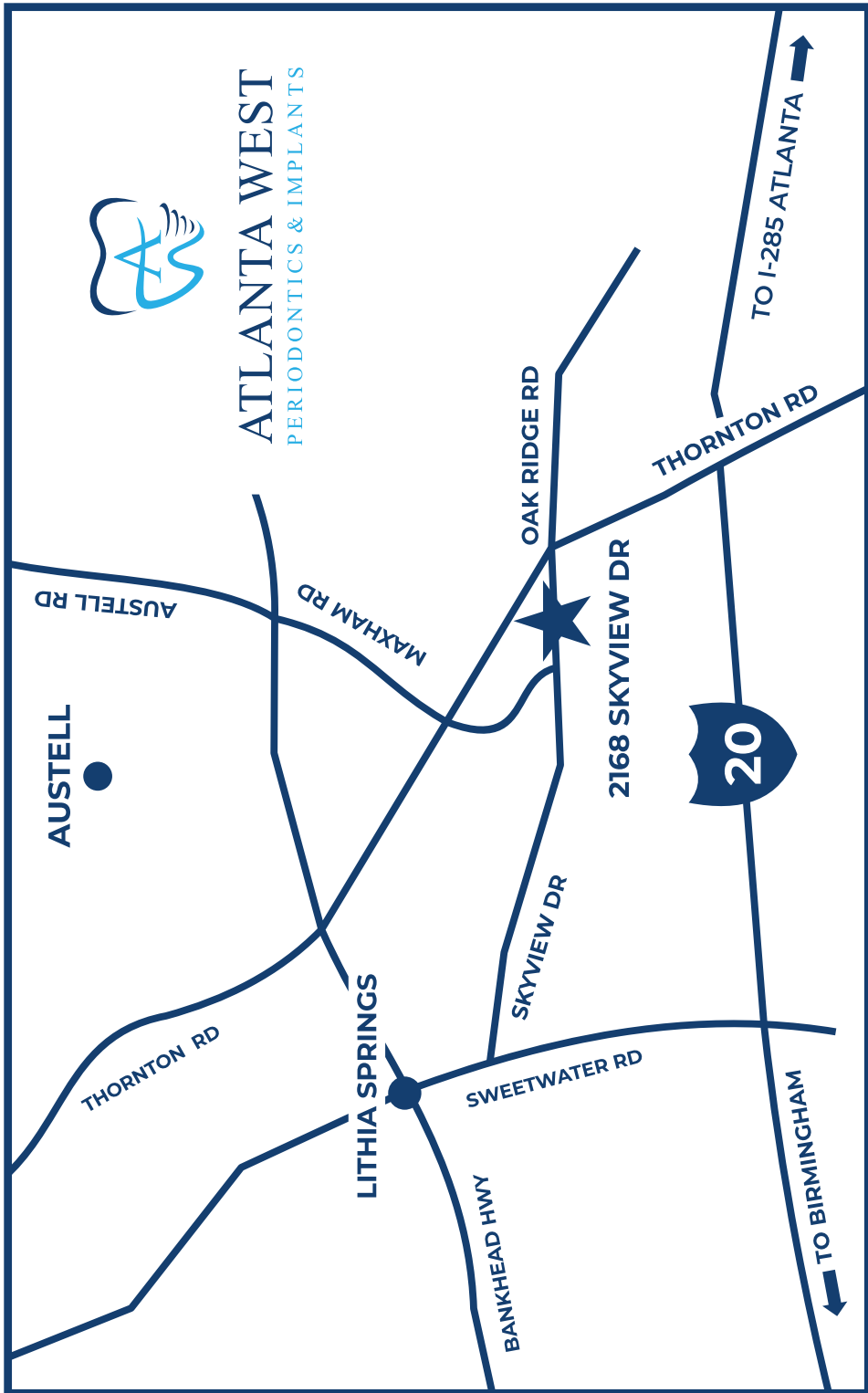
- Will send
- Are With The Patient
- Need To Be Taken

**PATIENT REMINDERS:**

- 1) Please call for an appointment
- 2) Please bring this referral and dental/medical insurance card



**ATLANTA WEST**  
PERIODONTICS & IMPLANTS



AUSTELL

AUSTELL RD

MAXHAM RD

OAK RIDGE RD

2168 SKYVIEW DR

THORNTON RD

TO I-285 ATLANTA →



SKYVIEW DR

LITHIA SPRINGS

SWEETWATER RD

BANKHEAD HWY

← TO BIRMINGHAM

THORNTON RD