



San Diego Dental Specialty Center

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4 is enough (All-on-4) • IV sedation • TMJ • Sleep Apnea

- Must bring Referral
- Minor must be accompanied by parent or legal guardian

Patient Name: _____ Home _____

Phone: _____ Work _____ Phone: _____

Email: _____

Date of Birth _____ Teeth _____

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

IV Sedation for:

- Dental fears
- Unable to anesthetize Gag reflex Limited opening
- All on 4's Implants
- Full mouth treatment

Consultation for:

- Sleep Apnea
- Implants
- All on 4's
- TMJ Other

Other

Note: _____
