

PATIENT REFERRAL

Amanda M. Sheehan, DDS, DICOI, MAGD, D. ABDSM, DABOI

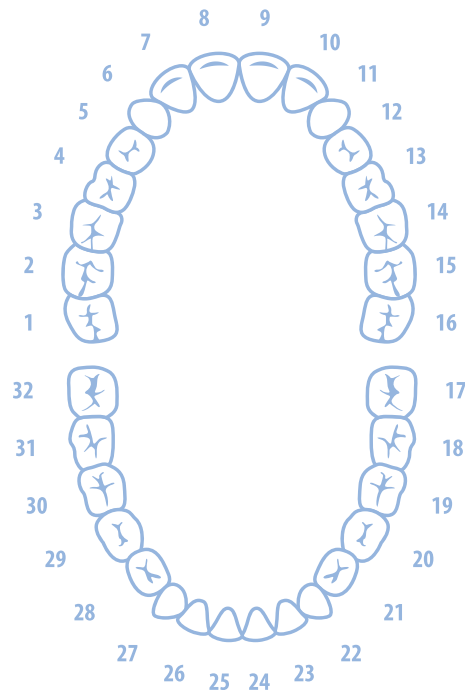
4626 W. Walton Blvd, Waterford, MI 48329
T: 248.674.0384 | F: 248.674.1483
oaklandfamilydental@gmail.com

Patient's Name: _____

Patient's Phone: _____

I have referred the above patient to you for:

- Dental Implants
- Bone Grafting
- Sleep Appliance
- LANAP
- Snore Laser
- Gingivectomy
- Sinus Augmentation
- Extraction
- Frenectomy
- Tissue Grafting
- Invisalign
- IV Sedation
- TMJ (BOTOX) Therapy
- CBCT



Remarks _____

Referring Doctor: _____



Dr. Amanda M. Sheehan

Board Certified Dental Implants
Certificate in Dental Oncology
Certificate in Aesthetic Dentistry
Master in Academy of General Dentistry
Faculty Director for the Resnik Implant Institute
Diplomate from the American Board of Dental Sleep Medicine

