

MONICA LARA-CORDOBA, DMD, DMSc

Practice limited to Periodontics and Implant Dentistry

Patient name

Phone

Date

Reason for referral

- Full periodontal evaluation
- Limited periodontal evaluation
- Clinical crown lengthening tooth #(s)
- Mucogingival area of concern
- Cosmetic improvement tooth/area(s)
- Pre-orthodontic evaluation
- Implant evaluation
- Ridge Augmentation or sinus elevation
- Extraction and socket preservation tooth #(s)
- Other

Remarks

Radiographs

- Referring Dentist will send
- New radiographs to be taken

Referred by Dr.

e-mail

Submit Form

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