

Dentures-In-A-Day, PLC

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Instructions for Patients: Please call for an appointment.
If you are taking any medications, please bring a list with you.
Fees are due at the time of service.
Please arrive 15 min before appointment to fill out paper work.

Patient Name: _____ Date: _____

Phone #'s H () _____ W () _____

Referring Dr _____

Patient Will Call

Please Call Patient

My Appointment

Date: _____

Time: _____

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

Circle Teeth/ Area

Recent Full Mouth Radiographs: Patient Has Copy Emailed Patient Does not have Current X-rays

Referred For:

- Complete Prosthodontic Evaluation
- Limited Prosthodontic Consultation
- Complete Dentures

- Removable Partial
- Extractions

*Note: we will not extract wisdom teeth if they are impacted.
Also, we do not have nitrous or sedation.*

Comments:
