Driftwood Dental

REFERRAL SLIP

#10-2401 Cliffe Avenue, Courtenay, B.C. V9N 2L5 Tel 250-338-5381 Fax 250-338-2587



Email: driftwoodreception1@shaw.ca

□ Deep Sedation / Gewith Dr. Blake Richar					
☐ IV Moderate Sedation with Dr. John McGaw		DDS			
☐ Pediatric Dentistry with Dr. Alex Chen, B	Sc, DMD, FCD)S(BC), FRCD(C)		
Patient's Name	Date of Birth				
Address		City			
Postal CodeTe	·I	Work			
Referred by Dr		_ X-rays enclos	sed:	Yes 🖵	No 🗆
⁻ el:		_ X-rays emailed		Yes 🖵	No 🗆
	Ex	xo if RCT unre	storable	? Yes 🖵	No 🗆
_	RCT Final F	illing by Dr. C	ampbell?	Yes 🗖	No 🗆
Dental Insurance: Plan #1 Employer:			Dlane		
Name:	DOB:	Gr:	ID:		
Plan #2 Employer:			Plan:_		
Name:	DOB:	Gr:	ID:		
Services Required	Consult	Specific Ex	kam 🗖	Treatme	ent 🖵