



**Elizabeth Picard, DMD**

916 Washington Ave., Ste. 202

Bay City, MI 48708

989-892-9888

**REFERRAL FORM**

Introducing: \_\_\_\_\_ Age: \_\_\_\_\_

Referred From: \_\_\_\_\_

Date of Last Exam: \_\_\_\_\_ Date of Last Prophy: \_\_\_\_\_

Date of Last Fluoride Treatment: \_\_\_\_\_ Date of Last X-rays: \_\_\_\_\_

We are referring the patient above to Tri City Kids Pediatric Dentistry for the following reasons:



First Visit



Parental Request for Pediatric Dentist



Multiple Cavities / Extractions / Space Maintenance / Habit Therapy

Please Specify: \_\_\_\_\_

\_\_\_\_\_



Behavior Maintenance / Nitrous Oxide Sedation / Oral Sedation / Hospital Dentistry



Significant Medical History (Please Specify): \_\_\_\_\_

\_\_\_\_\_



Other: \_\_\_\_\_

\_\_\_\_\_

**Thank you for your referral!**

**We appreciate your trust in allowing us to be a part of your child's dental care.**

**T: 989-892-9888**

**F: 989-892-8837**

**TriCityKidsDentistry.com**