



STARR

ORAL SURGERY

Austin C. Starr, DDS

Oral & Maxillofacial Surgeon

473 S. Landmark Ave. • Bloomington, IN 47403

812.318.1023 office • 812.318.1643 fax

starroralsurgery.com

Patient: _____ DOB: _____

Telephone: _____ Please call patient Patient will call

Referred By: _____

			A	B	C	D	E		F	G	H	I	J				
1	2	3	4	5	6	7	8		9	10	11	12	13	14	15	16	
32	31	30	29	28	27	26	25		24	23	22	21	20	19	18	17	
			T	S	R	Q	P		O	N	M	L	K				

___ Extraction

___ Expose & Bond

___ Bone Grafting

___ Pathology / Biopsy

___ Dental Implants

___ Pre-Prosthetic Surgery

___ IV Sedation / Anesthesia

___ Other: _____

Radiographs

- Sent by Mail
- Given to Patient
- Sent by Email to:
contact@starroralsurgery.com
- CBCT / 3D Image Requested

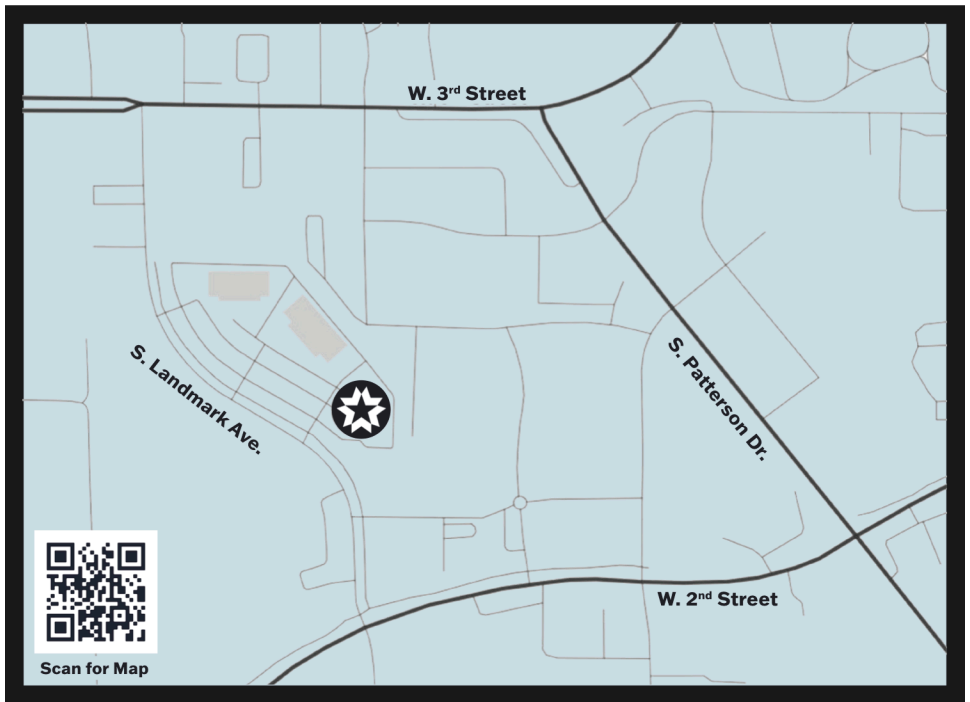
Prosthetic Plan

Maxilla: _____

Mandible: _____

Remarks: _____

Doctor Signature: _____ Date: _____



Sedation / Anesthesia Instructions:

- Nothing to eat/drink 6 hours prior to surgery
- If you take routine oral medicines, please check with our office prior to your surgical date for instructions
- Coordinate with a responsible adult to remain at the office and provide transportation after the appointment
- All patients under 18 (minors) must be accompanied by a parent or legal guardian
- Have a responsible adult at home to care for you on the day of surgery
- Please arrive 15 minutes prior to scheduled surgery time
- Wear comfortable clothing
- **Relax! We look forward to taking exceptional care of you!**



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