



David Cundick, DDS •

2990 Piñon Frontage Rd., Suite 102 • Farmington, NM 87401

Office: (505) 333-8635 • Fax: (505) 258-4909

Email: sjofs@mdofficemail.com

Appointment Information

This time is reserved specifically for you. If by necessity, you must cancel your appointment, please notify us at least one day in advance.

Date: _____ Time: _____ Day: _____

DOB: _____ Telephone: # _____

Patient: _____

Insurance: _____

Referred by: _____

Welcome to San Juan Oral & Facial Surgery

Our office is committed to providing you with the highest quality of care possible. To help us in scheduling your appointment, please remember the following:

1. The initial visit, with the exception of certain emergency cases, is for consultation only. This enables us to fully evaluate your problems and tailor the care to your specific needs.
2. Unmarried patients under eighteen (18) years of age, must be accompanied by a parent or legal guardian at the time of the initial consult.
3. Please bring all pertinent medical information and a list of all medications you are currently taking.

Please circle teeth to be treated

| | | | | | | | | | | | | | | | |
|-------------|----|----|----|----|----|----|----|------------|----|----|----|----|----|----|----|
| UPPER RIGHT | | | | | | | | UPPER LEFT | | | | | | | |
| 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 |
| LOWER RIGHT | | | | | | | | LOWER LEFT | | | | | | | |

Deciduous

| | | | | | | | | | |
|---|---|---|---|---|---|---|---|---|---|
| A | B | C | D | E | F | G | H | I | J |
| T | S | R | Q | P | O | N | M | L | K |

Extraction

Other Procedures:

Alveoplasty

Infection

Expose and Bond

Frenectomy

Lesion Evaluation

Consultation:

Implants

Skin Lesions

Orthognathic Evaluation

TMJ

Remarks or special instructions: _____
