



Richard Lee, D.D.S.

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☐ Menlo Park

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☐ Sunnyvale

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Tel: 408-830-0123 Fax: 408-830-0178

Patient Name: _____

Patient Phone: _____ Date Referred: _____

Referred by Dr: _____ Dr's Phone: _____

Referral Details

☐ Complete Prosthodontic Care

☐ Dental Implants

☐ Crown & Bridge

☐ Removable Dentures

☐ Other or limited prosthodontic care (please explain):

Radiographs Included:

☐ Bitewings

☐ Periapicals

☐ Panoramic

☐ Other: