

# Dr. Austin C. Starr DDS

## Certified Oral & Maxillofacial Surgeon

White River Dental  
 2380 Merchants Mile  
 Columbus, Indiana 47201

Tel: 812-558-2505  
 Fax: 812-378-5501  
 WRDental.com  
 WRD.Starr@gmail.com

### We are Referring:

Patient Name \_\_\_\_\_ Date \_\_\_\_\_

Date of Birth(M/D/Y) \_\_\_\_\_ Parent/Guardian \_\_\_\_\_

Telephone \_\_\_\_\_ Referred by \_\_\_\_\_

### For:

- Treatment of \_\_\_\_\_
- Diagnosis  The case history is sent separately.
- 3-D Cone Beam X-Ray \_\_\_\_\_

Appointment Date \_\_\_\_\_ Time \_\_\_\_\_

### Remarks and Relevant History:

Surgical Plan \_\_\_\_\_

Prosthetic Plan \_\_\_\_\_ Maxillary \_\_\_\_\_ Mandibular \_\_\_\_\_

### Teeth for Consideration:

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

