

**OLYMPIA PROSTHODONTICS**  
& COSMETIC DENTISTRY  
— EXCELLENCE BY CHOICE —

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BOARD CERTIFIED PROSTHODONTIST

**REFERRAL INTRODUCTION**

Introducing \_\_\_\_\_ Date \_\_\_\_\_

Daytime Telephone \_\_\_\_\_

Referred By \_\_\_\_\_ Phone \_\_\_\_\_

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

**Referred For:**

- Implant Prosthodontics
- Fixed Prosthodontics
- Removable Prosthodontics
- Comprehensive Examination and Treatment

**Patient Has:**

- Periodontal Commitment with Dr. \_\_\_\_\_
- Panoramic Radiograph
- Complete Periapical Survey
- No Current Applicable Radiographs
- CT Scan

**Comments:** \_\_\_\_\_

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**When is the best time to follow-up with you on the patient's treatment?**

\_\_\_\_\_

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