



# PROSPER

Oral & Facial Surgery  
Dental Implant Surgical Specialist

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*Diplomate, American Board of the American Board  
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### 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: \_\_\_\_\_

Introducing: \_\_\_\_\_

Referred by: \_\_\_\_\_

### Welcome to the office of Prosper 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. 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:

- Alveoloplasty       Infection       Expose and Bond  
 Frenectomy       Lesion Evaluation / Biopsy  
 Anesthesia  
 Local    Sedation

### Consultation:

- Implants / Site \_\_\_\_\_       Facial Cosmetic  
 Orthognathic Evaluation       TMJ

### Radiographs:

- Being mailed       No X-Ray  
 Given to Patient       Please return  
 Obtain Panoramic film for our office  
 E-mailed

Remarks or special instructions: \_\_\_\_\_

\_\_\_\_\_