
Dr. Keren Sperling & Dr. Erin Yu, Board Certified Periodontists

Date: _____

Patient Name: _____

Age: _____ Phone: _____

Insurance: _____

Referring Dentist: _____

Reasons for referral

Periodontal exam and evaluation—generalized or localized

- ☐ Crown Lengthening
- ☐ Mucogingival (gingival recession, Gum graft)
- ☐ Dental Implants
- ☐ Restorative concerns
- ☐ Extractions
- ☐ Orthodontic tooth exposure
- ☐ Other: _____

Comments:
