Adara SURGICAL INSTITUTE

Hardeep Dhaliwal, DMD, MD
Jennifer Dolan, DDS, MD, MPH
Adara Surgical Institute
6505 226th Pl SE #100
Issaquah, WA 98027
OFFICE 425-428-5888
TEXT 425-428-5888
FAX 425-332-5332
info@adarasurgical.com
www.**AdaraSurgical**.com

Referral Form

To support our commitment to exceptional care, please fax or email this form to our office, provide a copy to the patient for their appointment, and complete the insurance information if available. Thank you!

PATIENT INFORMATION: Today's Date: _____

First Name: _____ Last Name: _____

Date of Birth: _____ Parent/Guardian Name: _____

Contact Phone: _____ Contact Email: _____

Dental Insurance Name: _____ Subscriber Name: _____
(or attach cards)
ID: _____ Group: _____

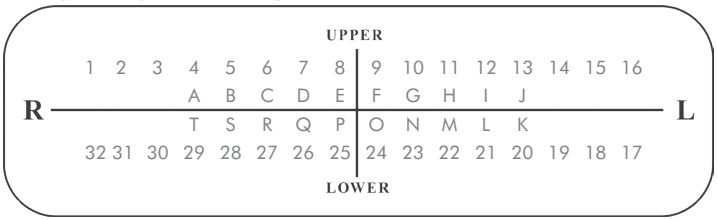
REFERRING DOCTOR: Referred By: _____

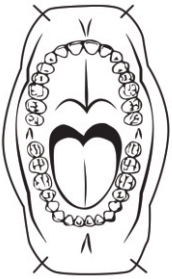
Phone: _____ Email: _____

Address: _____

PREFERRED METHOD OF CONTACT: ☐ Email ☐ Text ☐ Phone ☐ Fax

PLEASE INDICATE AREA TO BE TREATED





☐ Extraction: _____ ☐ Bone Graft: _____

☐ Implant: _____ Preferred Implant System: _____

☐ Essex/Flippers: _____ ☐ Pre-Prosthetic Surgery: _____

☐ Exposure/Expose & Bond: _____ ☐ Biopsy: _____

☐ Orthognathic Surgery: _____ ☐ Cosmetic Surgery: _____

☐ Other: _____

_____

_____

_____

RADIOGRAPHS/CLINICAL PHOTOS:

☐ Email ☐ Mailed ☐ Sent with Patient ☐ Please Take ☐ No Xray ☐ Attached (Date: _____)

Please see the reverse side for directions and additional information.

Don't forget to complete your registration online before your visit — we look forward to seeing you!

DIRECTIONS

From E Lake Sammamish Parkway, Take SE 64th Place,
across from Home Depot.
We are located through the Meadow Creek medical parking lot,
please enter the entrance of the Meadow Creek medical plaza
and take your first left at the fork in the road.

SEE ADARA PATIENT JOURNEYS

Full Mouth Implant
Reconstruction

Single Tooth
Implants

Adara Surgical Institute
6505 226th Pl SE #100
Issaquah, WA 98027
OFFICE 425-428-5888
FAX 425-332-5332
info@adarasurgical.com • www.**AdaraSurgical**.com