

H. Chi & Associates Oral and Maxillofacial Surgery

吉祥口腔牙外科

Howard C. Chi, DDS

吉正皓牙外科專科醫生

Marc Pan, MD DDS

潘萌牙外科專科醫生

Tel. (212)674-8351

Fax. (212)674-8264

Please call for an appointment 請致電預約

Patient Name _____

Referring Doctor _____

Doctor's Tel. _____

Consultation/Treatment Requested:

Extraction

Implant

Apicoectomy

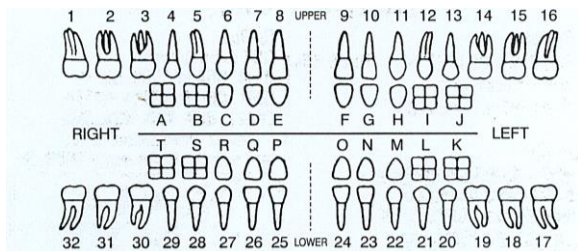
Alveoplasty, Torus, Tuberosity Reduction

Incision & Drainage

Lesion Evaluation/ Biopsy

Orthodontic Exposure & Bracket or Anchorage

Others _____



Golden Wheel Medical Building 金輪中心
139 Centre Street, Suite #209 (139 中央街, 209 室),
New York, N.Y 10013
Tel. (212)674-8351 Fax. (212)674-8264
chiomfs@hotmail.com www.chiomfs.com
Subway (地鐵): N, Q, R, 6, J, Z train to Canal Street
stop(堅尼街站).

On the day of visit

- Please bring both medical/ dental insurance cards, a photo ID card and dentist's referral letter.
- Please bring a list of all your medications.
- **Most procedures require prior approval from your insurance company, so first visit will be consultation and x-ray.**

來會診時

- 請攜帶醫療/牙科保險卡, 照片身份證, 牙醫的介紹信。
- 請攜帶所有的藥物清單。
- 大多手術需要保險公司事先獲得批准, 所以第一次來是檢查和 X 光片。

