



NEWNAN  
PERIODONTICS  
AND  
DENTAL IMPLANTS

MINDY S. GIL, DMD, DMSc  
DIPLOMATE OF AMERICAN BOARD OF PERIODONTOLOGY

p. 770.252.0029 f.770.252.0091

info@newnanperio.com

Date: \_\_\_\_\_

From Dr: \_\_\_\_\_ Dr's Phone Number: \_\_\_\_\_

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

### Reason for referral:

Area/Tooth #

Periodontal /Peri-implant Disease \_\_\_\_\_

Extractions and/or Dental Implants \_\_\_\_\_

Mucogingival Deformity:  
*Recession or Hyperplastic Tissue* \_\_\_\_\_

Crown Lengthening:  
*Aesthetic or Pre-prosthetic* \_\_\_\_\_

Frenectomy/ Functional Frenuloplasty:  
*Buccal or Lingual* \_\_\_\_\_

Oral Pathology:  
*Dry Mouth, Burning Mouth Syndrome,  
Suspicious Lesions* \_\_\_\_\_

Others:  
*Airway concerns* \_\_\_\_\_

Comments/Notes:

1635 GA-34 SUITE A, Newnan, GA 30265

www.newnanperio.com