

Referring Your Patient

Dear referring office,

Thank you for allowing us to care for your patient. Please include current x-rays, last prophy, and last fluoride with your information when referring your patient to our office. If none of the previous procedures were done, our office will forward this information back to you when treatment is completed at our office. We do our best to see patients in a timely manner, but please make us aware of any problems or pain that may need to be addressed ASAP. Again, thank you for your confidence you have shown in us.

Pediatric and Teenage Dentistry of Morgantown

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