



Neilesh Patel DDS

365 Pearson Drive, Ste. 2
Porterville, CA 93257

559-788-CLEAN (2532)



Oral conscious sedation
and N2O: Ages 1 - 20

PATIENTS NAME: _____

PHONE: _____

REASON FOR REFERRAL OR SPECIAL CONCERNS: _____

SEDATION TYPE REQUESTED:

- Oral Premed
- Nitrous Oxide
- General Anesthesia
- Other

IF YOUR OFFICE CALLED AND MADE AN APPOINTMENT - PLEASE INDICATE:

Date of Appointment _____

Time of Appointment _____

- We want Sweet Smiles to continue to recall this patient.
- We want Sweet Smiles to complete this treatment sequence only - No recalls

REFERRING DR: _____

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