

DIRECTIONS: 2992 GINNALA DR.

FROM I-25:

Take 34 West to 287, turn right (north), go to 29th Street, turn right (east), go to the next light (Lincoln), turn left, immediately turn right on Ginnala Dr.

FROM FORT COLLINS:

Take 287 south to 29th Street, turn left (east), go to next light (Lincoln), turn left, immediately turn right on Ginnala Dr.

FROM BERTHOUD AND LONGMONT:

Take 287 north to 29th Street, turn right (east), go to next light (Lincoln), turn left, immediately turn right on Ginnala Dr.

FROM ESTES PARK:

Take 34 to 287 turn left (north), go to 29th Street, turn right (east), go to the next light (Lincoln), turn left, immediately turn right on Ginnala Dr.

OUR OFFICE IS THE 2ND BUILDING ON THE LEFT
(WEST SIDE, OF COURSE)

Appointment Information: This time is reserved specifically for you. If by necessity, you must reschedule your appointment for surgery, please notify us at least 48 hours in advance.

Special Instructions for Patients Receiving I.V. Sedation the Day of your Consultation.
The following only applies if surgery is done at the first appointment, often your first appointment is a consultation.

1. Do not eat or drink (not even a sip of water) for 6 hours prior to your surgery.
2. Someone must come with you to drive you home and be available to observe you the rest of the day.

Please call our office for further instructions 970-663-6878



RALPH R. REYNOLDS, DMD, MD
ORAL AND FACIAL SURGERY OF LOVELAND L.L.C.

2992 GINNALA DRIVE LOVELAND CO 80538
PHONE: 970-663-6878 FAX: 970-663-2669

Today's Date _____

Introducing _____ Appointment Date _____

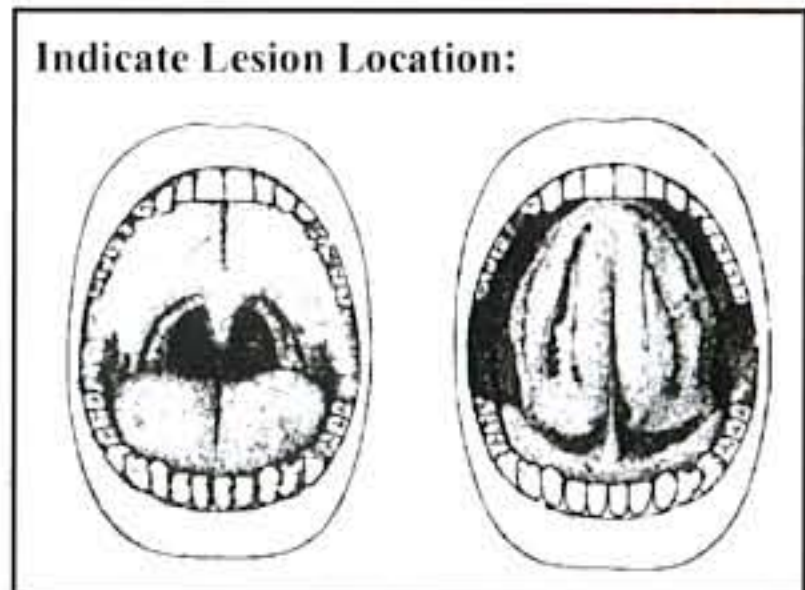
Referred by Dr. _____ Time _____

Please indicate type of visit:

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
				A	B	C	D	E	F	G	H	I	J			
R				T	S	R	Q	P	O	N	M	L	K			L
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

If sending referral separately by mail, cut here to give patient map and directions.

- Implant for:
 - Implant Supported Denture
 - Implant supported Crown & Bridge
- Extractions
- Bone Grafting
- Preprosthetic Surgery
- Orthognathic Surgery
- Facial Fracture
- Facial Cosmetic or Reconstructive Surgery
- Sleep Apnea
- TMJ Consultation
- Pathology Evaluation & Possible Biopsy:



Comments: _____

- Please call me concerning this patient
- X-rays sent with patient
- X-rays mailed
- X-rays sent via E-Mail
- Please take an X-ray