

# ClearCare Periodontal & Implant Centre

2nd Floor - 191 River Avenue

Winnipeg, MB, R3L 0B1

Phone: 204.421.9236

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www.clearcareperio.com

☐ Dr. Hoda Hosseini  
DMD, MDent (Perio), FRCD(C)

☐ Dr. Katie Chung  
BDS, MDent (Perio)

☐ First Available Doctor

Referring Doctor: \_\_\_\_\_

☐ Please call patient to schedule a consultation

☐ Scheduled for: Date: \_\_\_\_\_ Time: \_\_\_\_\_

Recent Radiograph: ☐ Sent w/Patient ☐ Sent by Mail ☐ Emailed ☐ Please Take

☐ CBCT Available

## Patient Information

Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(dd/mm/yyyy)

Med Alerts: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_

Email Address: \_\_\_\_\_

## Primary Insurance Information:

Subscriber: \_\_\_\_\_ D.O.B. \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(dd/mm/yyyy)

Carrier: \_\_\_\_\_ Grp# \_\_\_\_\_

ID# \_\_\_\_\_

## Secondary Insurance Information:

Subscriber: \_\_\_\_\_ D.O.B. \_\_\_\_\_ / \_\_\_\_ / \_\_\_\_  
(dd/mm/yyyy)

Carrier: \_\_\_\_\_ Grp# \_\_\_\_\_

ID# \_\_\_\_\_

## Reason for Referral

### Consult & Examination:

☐ Full Exam & Treatment

☐ Specific: \_\_\_\_\_ ☐ Emergency: \_\_\_\_\_

### Dental Implant:

☐ Single/Multiple #(s): \_\_\_\_\_ ☐ Extraction & Immediate Implant: \_\_\_\_\_

☐ Full Arch Solutions (All-on-4®/ProArch): \_\_\_\_\_ ☐ Treatment of Peri-Implantitis: \_\_\_\_\_

### Soft & Hard Tissue Regeneration:

☐ Root Coverage Tooth/Teeth #(s): \_\_\_\_\_ ☐ Pontic Site Development: \_\_\_\_\_

☐ Vertical Bone Loss: Site \_\_\_\_\_ ☐ Bone Graft: Site \_\_\_\_\_ ☐ Sinus Lift: (R/L) \_\_\_\_\_

### Perio-Restorative and Pre-Prosthetic Treatment:

☐ Crown Lengthening Tooth/Teeth #(s): \_\_\_\_\_ ☐ Gummy Smile & Gingivectomy Tooth/Teeth #(s): \_\_\_\_\_

### Denture:

☐ Tori Removal: Site \_\_\_\_\_ ☐ Vestibular Plasty: Site \_\_\_\_\_ ☐ Soft Tissue Recontouring: Site \_\_\_\_\_

### Adjunctive Orthodontic Procedures:

☐ Pre-orthodontic Assessment: \_\_\_\_\_ ☐ Frenectomy: \_\_\_\_\_ ☐ Exposure Tooth/Teeth # (s): \_\_\_\_\_

### Oral Pathology:

☐ Dx and Management of Oral Lesions: \_\_\_\_\_ ☐ Biopsy: \_\_\_\_\_

Notes: \_\_\_\_\_

*We appreciate the opportunity to work with you and aim to return your patient back to your care at their best periodontal health.*

*Thank You for your Referral*

# Welcome New Patients..... We look forward to meeting you!

## First Visit

- Your initial visit at our office will be for a consultation appointment.
- Our specialist will review your medical history and will perform a clinical examination.
- Your treatment plan and its timeline will be discussed. You will be provided with an estimated cost for your treatment.
- If you have dental insurance, we can assist you by submitting your treatment cost estimate for a pre-approval. Your insurance company will then inform you of your coverage for the treatment.
- **Please bring in a current list of your medications and your insurance information.**

## Payment

- The professional fees are collected at the end of your appointment and the responsibility for payment lies with you.
- For your convenience, we accept cash, Visa, MasterCard, American Express, debit, cheque or E-Transfer.
- If you have dental insurance, we would be happy to help you submit a claim so that you can get reimbursed.

## Hours of Operation

Monday to Friday 8:00 am to 5:00 pm  
Closed: Weekends and Holidays

**If you have any questions or concerns, please call us at 204.421.9236**

## Free Patient Parking Available in Front of the Building



Scan the QR Code on your smart phone to find us!



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