

Parvaz Farnad Mizrahi, DDS, MPH
Beverly Hills Oral Surgery Center

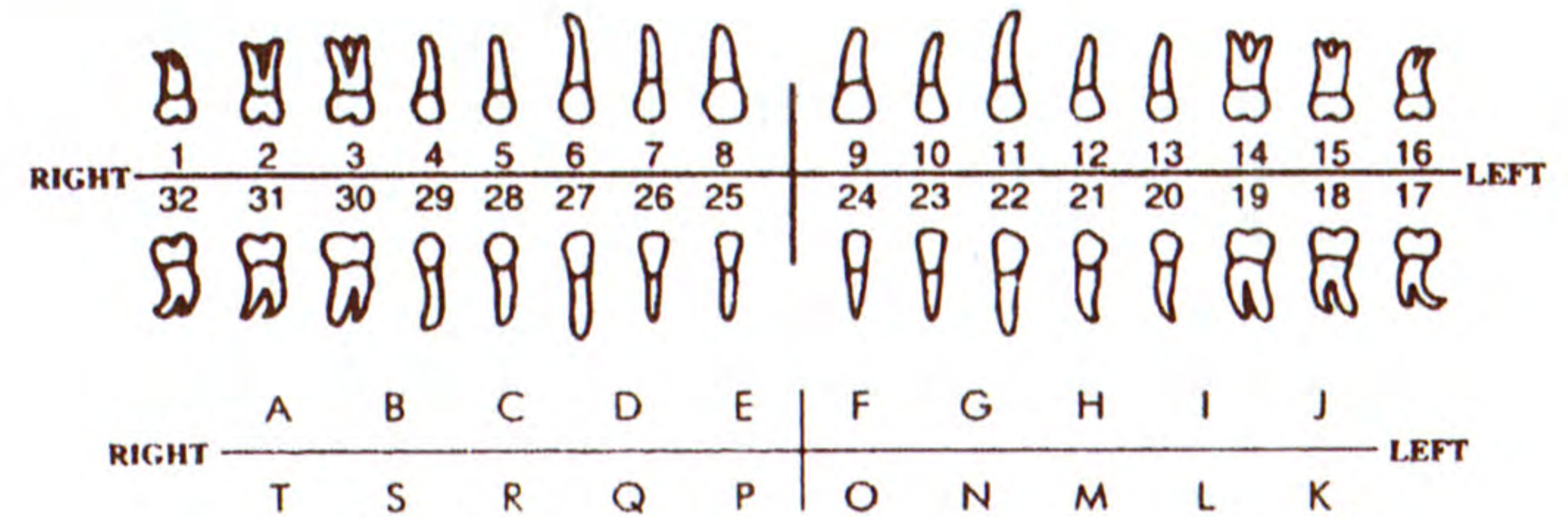
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Patient: _____

APPOINTMENT DATE _____ TIME: _____

- EXTRACTIONS
 - BONE GRAFT
- SURGICAL UNCOVERING
- IMPLANTS
 - FINAL ABUTMENT
- BIOPSY/ ORAL PATHOLOGY EVALUATION
- SINUS LIFT/ BONE GRAFT
- TMJ EVALUATION
- DENTAL/ FACIAL TRAUMA
- ORTHOGNATHIC/ RECONSTRUCTIVE SURGERY EVALUATION
- ADDITIONAL INSTRUCTIONS

DATE ___/___/___ REFERRING DR. _____



Patient Instructions

- 1) If you are scheduled or anticipating IV sedation or general anesthesia, **do not eat or drink, not even water, 8 hours** before your appointment. Bring a responsible adult companion to drive you back home.
- 2) **On the day before your surgery** your appointment:
 - (a) eat light
 - (b) **do not smoke**
 - (c) do not consume alcoholic beverages.
- 3) **All minors** must be accompanied by a parent or legal guardian.
- 4) **Payment** is due on the day of the surgery.
- 5) **Please** bring this card with you.

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