



# LAKEWOOD RANCH

ORAL & FACIAL SURGERY

*Hablamos español*

**Austin L. Lyman, DMD, MS**

ORAL & MAXILLOFACIAL SURGEON

7170 University Pkwy

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P: 941.212.2328 | F: 941.258.9546

info@lakewoodranchofs.com

www.LakewoodRanchOFS.com

## REASON FOR REFERRAL

- ☐ CBCT
- ☐ Extraction
- ☐ Wisdom Teeth Management
- ☐ Bone Grafting
- ☐ Sinus Augmentation
- ☐ Dental Implant Placement
- ☐ Exposure & Bonding
- ☐ Pre-prosthetic Surgery  
Removal of Tori / Exostoses / Alveoloplasty
- ☐ Frenectomy
- ☐ Soft Tissue Grafting
- ☐ Pathology
- ☐ TMJ Disorder
- ☐ Facial Cosmetics  
Botox / Fillers / Microneedling
- ☐ Other

Today's Date: \_\_\_\_\_

Patient's Name: \_\_\_\_\_

Patient's Date of Birth: \_\_\_\_\_

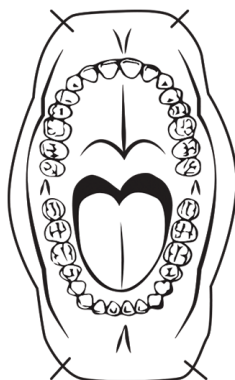
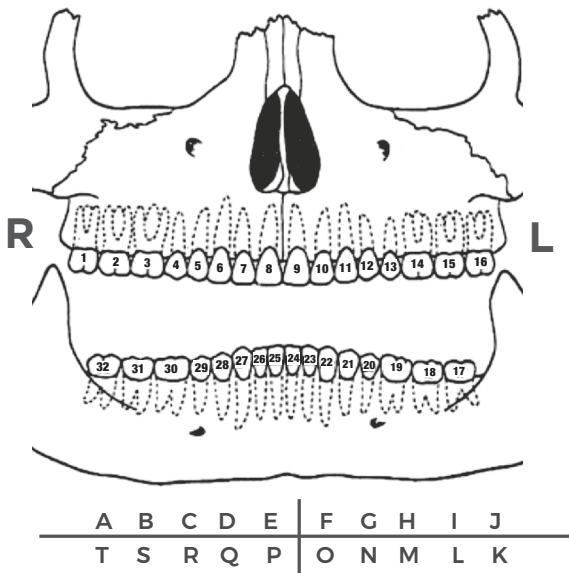
Patient's Phone: \_\_\_\_\_

Referred By Dr: \_\_\_\_\_ Phone: \_\_\_\_\_

Radiographs provided: \_\_\_PA \_\_\_PAN \_\_\_BW \_\_\_CBCT

Sent by: \_\_\_Email \_\_\_Post Mail \_\_\_Patient

## INDICATE AREAS OF CONCERN

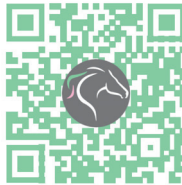
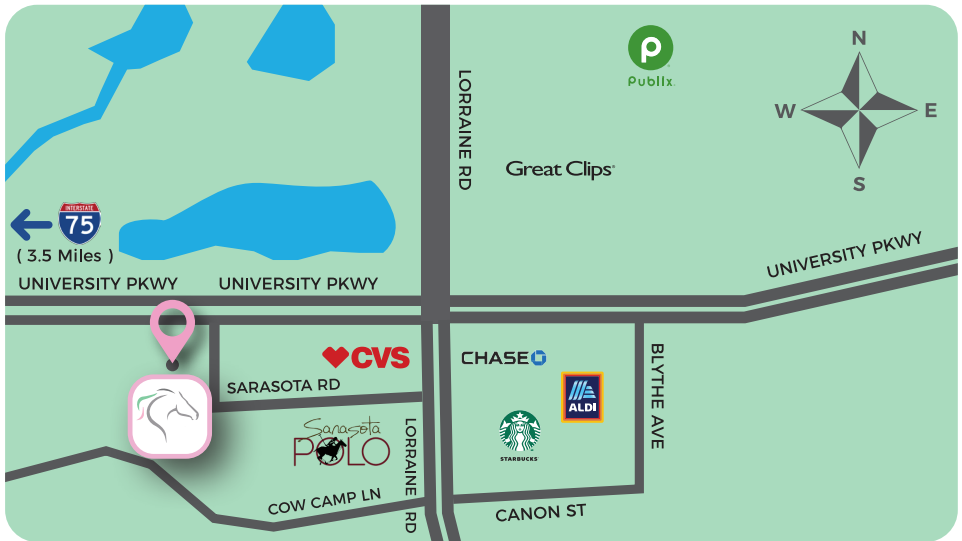


## COMMENTS / DESCRIPTION:

Please email x-rays and referral to [info@lakewoodranchOFS.com](mailto:info@lakewoodranchOFS.com).  
Bring copies of each to your appointment.

## PLEASE READ | IMPORTANT INFORMATION

- Your first appointment is a consultation to determine your specific treatment needs.
- Bring a list of ALL your medications and dosages with information about specialized medical conditions, previous surgeries, allergies, and specialist physicians.
- Minors (<18 years old) **MUST** be accompanied by a parent or legal guardian for both consultation and procedure.
- Nothing to eat or drink for 8 hours prior to sedation or general anesthesia.
- Take your usual prescribed medications if directed.
- Patients with asthma, please bring your inhaler to the appointment.
- A ride must be present, remain on the premises, and able to take care of the patient for 12 hours following sedation.
- Wear loose fitting clothes, short sleeves, and flat shoes; do NOT wear jewelry, artificial nails, or nail polish.



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