

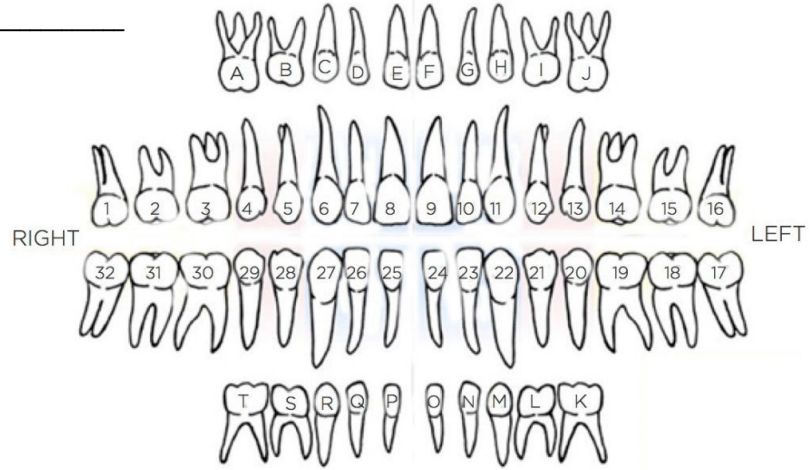


**Your Care Team:** Dr. Adam Weaver & \_\_\_\_\_

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Today's Treatment:** \_\_\_\_\_

**Additional Notes:** \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_



**Your next scheduled appointment will be a :**

- Exam
- Cleaning
- Flouride
- Filling
- Extraction
- Other \_\_\_\_\_

**Your next appointment is scheduled on:** \_\_\_\_\_ at \_\_\_\_\_ am / pm

**You are due for the following preventive medical screenings:**  
\_\_\_\_\_

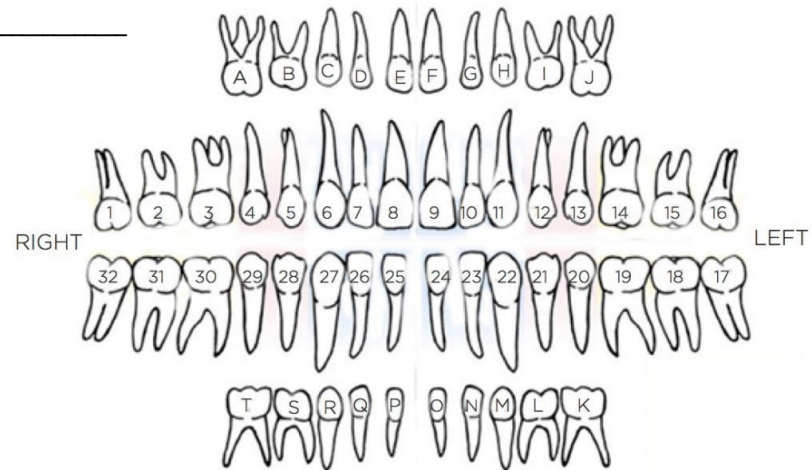


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Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Today's Treatment:** \_\_\_\_\_

**Additional Notes:** \_\_\_\_\_  
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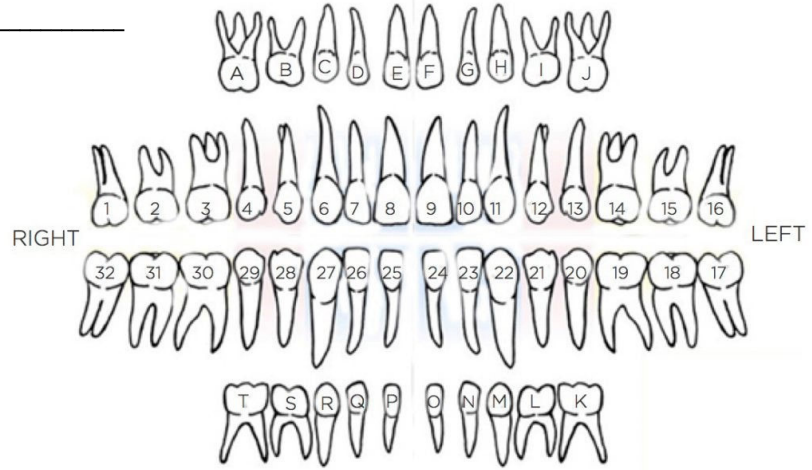


**Your Care Team:** Dr. Daniel Jefferies & \_\_\_\_\_

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

**Today's Treatment:** \_\_\_\_\_

**Additional Notes:** \_\_\_\_\_  
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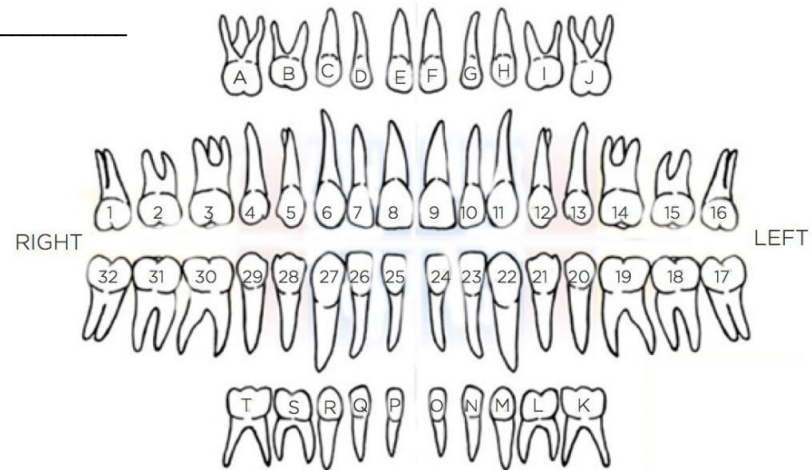


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