



# prime orthodontics

for children and adults

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Carrollton, TX 75010  
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Patient name \_\_\_\_\_ DOB \_\_\_\_\_

Referred by Dr. \_\_\_\_\_ Today's date \_\_\_\_\_

Responsible party \_\_\_\_\_

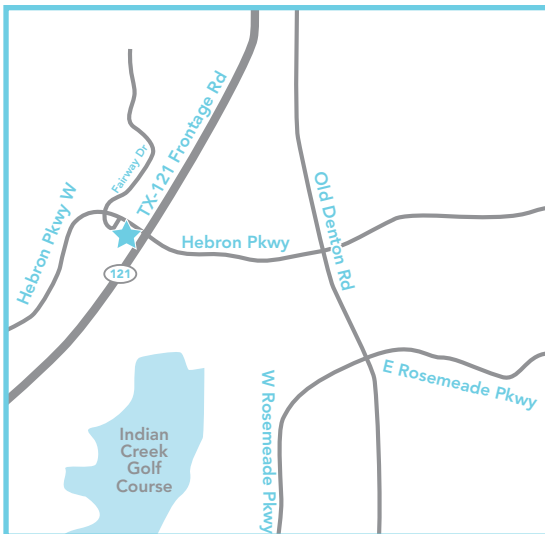
Responsible party phone \_\_\_\_\_

Please evaluate for:  Interceptive/Mixed dentition treatment  
 Adolescent treatment  Adult treatment

Special concerns \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

Thank you for your interest in our office. We are pleased that your dentist has referred you for an orthodontic evaluation. Our goal is to provide you with the finest orthodontic care in an environment that is comfortable and friendly.



Please call us at (972) 372-0700 to schedule an appointment for your complimentary consultation that includes digital x-rays and photos.

We look forward to meeting with you!

**Sooyoun Chung, DDS, MS**

