

**Oral and Implant Surgery  
of Northern Westchester, P.C.**

*Practice Limited to Oral and Maxillofacial Surgery*

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At Oral and Implant Surgery of Northern Westchester, P.C., we are dedicated to caring for each individual as though they are our only patient. We will do everything possible to educate and assist you in making informed decisions, and provide you with skilled, compassionate care.

**Please circle tooth or teeth to be treated**

	A	B	C	D	E	F	G	H	I	J					
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
Right						Left									
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17
	T	S	R	Q	P	O	N	M	L	K					

**Please check treatment requested**

- extraction
- apicoectomy
- bone graft/sinus lift
- evaluate and biopsy lesion
- TMJ evaluation
- expose & bond
- frenectomy
- implant evaluation
- incision & drainage

**Patient Name** \_\_\_\_\_

**Referring Dr.** \_\_\_\_\_