



DONNA K. THOMAS DDS MS*
NICOLE R. HAWKINSON DDS
CLAUDIA Z. LOPEZ DDS*
ALEXANDRIA M. THOMAS DDS
 *Diplomate, American Board of Pediatric Dentistry

Patient's Name: _____ Date: _____

Patient's Phone Number: _____ Date of last Prophylaxis: _____

☐ Consultation ☐ Emergency Care ☐ Sedation ☐ Hospital Dentistry

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

Our Office:

- ☐ Will send recent BWs
- ☐ Will send a recent Pano
- ☐ Would like your office to take the necessary x-rays

Comments: _____

Referring Doctor's name: _____ D.D.S. / M.D. Phone: _____

Your first appointment will consist of an initial examination, cleaning and radiographic evaluation unless otherwise specified.

Please Bring to Your First Appointment

1. X-rays from the referring dentist, if given to you.
2. X-rays must be of diagnostic quality or new x-rays will be taken.
3. A list of your medications and other health information.
4. Any dental/medical insurance, including your insurance card.

If you need premedication, due to health problems such as a heart murmur, artificial joints, mitral valve prolapse, shunt or any other medical reasons, please call our office or your pediatrician.

Pediatric Dental Specialists, PA has offices at:

11401 Nall Avenue
 Leawood, KS 66211
 Phone: 913-649-5437
 Fax: 913-649-7337

411 Nichols Road, Ste 236
 Kansas City, MO 64112
 Phone: 816-753-0202 Fax:
 816-753-0253

3351 NE Ralph Powell Road
 Lee's Summit, MO 64064
 Phone: 816-524-5447
 Fax: 816-524-2338

9321 N. Oak Trafficway
 Kansas City, MO 64155
 Phone: 816-468-5437
 Fax: 816-463-6766

www.dinokidsdds.com
 (after hours emergency line available)

