OMSA
ORAL SURGERY & DENTAL IMPLANT SPECIALISTS

Michael H. Porter, DDS
Board Certified Oral Surgeon

2344 Cosgrove Ave, N. Charleston, SC 29405
Ph: 843-554-5003 Fax: 843-745-0003
www.omsasc.com

☑ Remember to bring your referral with you to your appointment.

☑ Please take a moment to register ahead of time on our website. This will help to make your appointment run smoothly.

You can scan our QR code using your phone to access our patient paperwork.

Date: _____ Referred By Dr. _____

Patient: _____ Patient Ph: _____

DOB: _____ Appointment Date: _____ Appointment Time: _____

To ensure each patient experiences exceptional and personalized care during their procedure, our patients are always seen for a consultation appointment prior to scheduling surgery. This consultation is used to review your health history and diagnoses. We will also discuss anesthesia options so we can develop a customized treatment plan and deliver the best possible care.

PURPOSE FOR CONSULTING APPOINTMENT:

☐ Extraction	☐ TMJ	☐ Biopsy
☐ Wisdom Teeth	☐ Sleep Apnea	☐ Expose & Ligate
☐ Implant	☐ Orthodontic Surgery	☐ Full Arch Evaluation

☐ Other _____

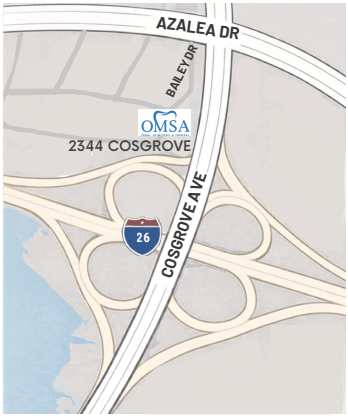
_____

				a	b	c	d	e	f	g	h	i	j			
R	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	L
	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				

Tooth Shade: _____

Additional Comments: _____

You can also send referrals and X-rays through our website or secure email.
www.omsasc.com
frontdesk@omsasc.com



CONSULTATION INSTRUCTIONS

- Please register on our website prior to your appointment: www.omsasc.com
- Or you may fill out the new patient paperwork we send to you by email.
- Please bring the following to your appointment:

- ☐ Your referral slip
- ☐ Your insurance information (Front and Back of Dental and Medical Insurance Cards)
- ☐ An up-to-date list of any medications you are taking
- ☐ A list of allergies
- ☐ The address and phone number of your pharmacy
- ☐ Valid ID

Do you think you may require financing assistance?
Please be sure to bring along your banking information. Our friendly and knowledgeable staff can provide more details about healthcare financing.

ARE YOU BEING REFERRED AS AN EMERGENCY PATIENT?

PLEASE REFER TO INSTRUCTIONS BELOW & CALL WITH ANY QUESTIONS

DAY OF SURGERY INSTRUCTIONS

- Do not eat or drink anything for at least 8 hours before your surgery appointment (unless otherwise instructed).
- Please let our office know what medications you normally take so we can advise you on what you can take before surgery. Take medications with a minimal amount of water. *Do not hesitate to contact our office with any questions.*
- If you are on blood thinners, please let our office know as soon as possible. We will coordinate with your medical doctor if you need to come off them prior to surgery.
- Please do not take any sedatives prior to surgery as they could interact with the medications we give you and be a risk to your health.
- A responsible adult must come with you to your appointment, stay on-site for the entire duration of your procedure and escort you home. Do not plan to drive or return to work until the day following the procedure at the earliest.
- Patients who have a power of attorney MUST be accompanied by that person to their appointment.
- Wear comfortable, loose-fitting clothing. Short sleeves are preferred.
- Minors must be accompanied by a parent or court-appointed guardian to their appointment.
- Please notify our office of any changes in your health.
- Surgical appointments require at least five days' notice for cancellation or rescheduling to avoid a cancellation charge.