



All About Kids Pediatric Dentistry
3285 Hacks Cross Rd, Ste 101, Memphis, TN 38125
Phone 901-759-0970 Fax 901-759-0904
Allaboutkidsteeth.org

Physician Report and Medical Clearance for Dental Procedures

Date of Request:

Dear _____ M.D.,

Our mutual patient, _____, requires dental treatment. Please evaluate his/her medical record and complete the information below:

Name of reporting physician: _____

Address: _____

Phone number: _____

Patient's current medications: _____

Patient's medical conditions:

Patient's allergies: _____

Pre med required: YES / NO

Can this patient be treated in a dental office setting?

Any additional information: _____

For your convenience, you may fax your response to 901-759-0904.

Sincerely,

Courtney L. Wilson, DDS

