

Dr. John K. McGaw EMT-P, B.Sc., DDS
#10-2401 Cliffe Avenue, Courtenay, B.C. V9N 2L5
Telephone 250-338-5558 Fax 250-338-2587
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General Dental Practice Using IV Sedation

Referral Slip

Patient's Name _____ **Date of Birth** _____

Address _____ **City** _____

Postal Code _____ **Telephone** _____ **Work** _____

Referred by Dr. _____ **X-rays enclosed:** Yes ___ No ___

Return Requested : Yes ___ No ___

Dental Insurance:

Plan #1

Name _____ **DOB:** _____ **Plan:** _____ **Gr:** _____ **ID:** _____ **Dep** ___ % ___

Plan #2

Name _____ **DOB:** _____ **Plan:** _____ **Gr:** _____ **ID:** _____ **Dep** ___ % ___

Services Required Consult Specific Exam Treatment

Please give to Patient:

Dr. John K. McGaw EMT-P, B.Sc., DDS
#10-2401 Cliffe Avenue, Courtenay, B.C. V9N 2L5
Telephone (250) 338-5558

Appointment Date: _____

IV Sedation Instructions:

- A) Have no solid foods from midnight the night before.
 Nothing for 6 hours prior to appointment.
- B) Wear a short sleeved top.
- C) Have someone accompany you home.
 Driving is not permitted for 24 hours following sedation.
- D) Cancellations must be made 48 hours in advance.
- E) All fees are to be paid at the appointment.

