

Dental Internal Referral Form								
Patient Name	:	Aesha Mohammad Al Teniji(dubai fans)		Emirates ID	:	999-9999-999999-9		
File No	:	6454	DOB	:	1980-04-08	Nationality	:	Emirati
Gender	:	Female	Doctor's Name	:	Dr Nadir El Tayeb	Date	:	2024-06-03

FULL NAME::Aesha Mohammad Al Teniji(dubai fans)CONTACT NO.:509968680AGE :44

Referring Healthcare professional : Dr Nadir El Tayeb

☒Emergent (send patient to ED)☒Urgent (24-72 hours)☐Routine (next available)

☐X-rays emailed☐X-rays with patient☐Need X-rays (please send X-rays to â€¦.yoland.com)

Reason for Referral: ☐Consultation☒radion

- ☒Comprehensivecare☐ Endo: RCT only☐ Extractions☒ Crowns☐Endo:RCT,Permanent Restoration/Crown☐ Sedation☐ Bridges☒Periodontal Care☐ Special needs (specify type):☐Denture:Complete☒ Implants:Surgical only☐ Denture: Partial☒Implants:Surgical Restorative☐ Denture:Overdenture☐ Orthodontic care☐ Complex medical needs☐ no written report needed☐ Please provide written report

Patients:  
☐ Verbal☐ Non-verbal

Evaluated by :Dr Nadir El Tayeb

Sign here, only if all of your questions have been answered to your satisfaction	
PATIENT	DOCTOR
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Patient Name Aesha Mohammad Al Teniji(dubai fans)  Date 2024-06-03 (08:30 - 11:15 )	Doctor Name Dr Nadir El Tayeb - Dental (DHA-T-00171042)  Date 2024-06-03 (08:30 - 11:15 )

