

Venetia Laganis, DDS, MS

7767 Elm Creek Blvd, Suite 110

Maple Grove, MN 55369

www.laganispediatricdentistry.com

info@drlaganis.com

Phone: 763-420-2610

Fax: 763-494-4390



Date: _____

Patient Name: _____ Date of Birth: _____

Parent Name: _____ Parent Phone: _____

Referred by Dr: _____ Dr. Phone: _____

Comments: _____

- New Patient
- Dental Hygiene Visit on: _____
- Diagnosis and treatment
- Consultation

PLEASE CONSIDER THE FOLLOWING

- Behavior management
- Compromised medical history
- Pulpal therapy
- Space maintainer (s)
- Extraction of abscessed teeth
- Emergency treatment/facial injuries
- Comprehensive restorative treatment/sealants
- Hypoplastic molars
- Hospitalization
- Other _____

MOST RECENT SERVICES PERFORMED

Dental Exam: _____

Prophy: _____

Topical FLTX: _____

Radiographs: _____

Radiographs available upon request:

Yes _____ No _____

ATTEMPTED TREATMENT ON:
