



**Dr. Allan G. Cogan\* D.M.D.**

PERIODONTIST

Tel: (204) 786-5896

Fax: (204) 783-9998

\* Denotes a professional corporation

**Winnipeg**  
PERIODONTAL GROUP  
PERIODONTICS & IMPLANT DENTISTRY

Email: [coganclic@winnipegperiodontalgroupp.com](mailto:coganclic@winnipegperiodontalgroupp.com)

**110 - 1605 Regent Avenue West, Winnipeg, MB R2C 3B3**

## PERIODONTICS AND IMPLANT DENTISTRY

Date:			
We are referring _____			
Patient:		DOB (m/d/y)	
First	Last		
Address			
Ph Home:		Postal Code:	
Ph Work		Cel:	
Primary Insurance		Secondary Policy Holder	
Name	DOB(m/d/y)	Name	DOB(m/d/y)
Ins Co		Ins Co	
Group #		Group #	
ID#		ID #	

Reason for Referral:

- ☐ Complete examination and treatment
- ☐ Examination or treatment of specific area: \_\_\_\_\_
- ☐ Of the following periodontal condition - Area of the teeth in question:
- ☐ Localized periodontal problem \_\_\_\_\_
- ☐ Mucogingival problem \_\_\_\_\_ ☐ Emergency \_\_\_\_\_
- ☐ Crown Lengthening \_\_\_\_\_
- ☐ Implants \_\_\_\_\_ ☐ Oral pathology \_\_\_\_\_

Specific restorative plan:

Recent periapical radiograph(s):

- ☐ Sending by mail ☐ Please take
- ☐ Sending with patient ☐ Email

Additional comments / medical history: \_\_\_\_\_

Referred by Dr. \_\_\_\_\_

Date of Appointment made: \_\_\_\_\_



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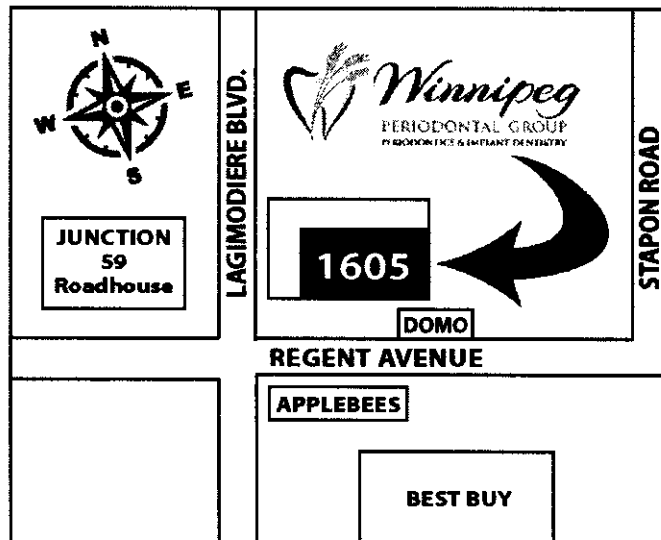
**A consultation appointment with our office is recommended prior to treatment.**

## PATIENT INSTRUCTIONS

- Please visit our website at [www.winnipegperiodontalgroupp.com](http://www.winnipegperiodontalgroupp.com) prior to your appointment to fill out your medical history questionnaire if possible.
- Your medical history will be reviewed with you.
- An examination will be performed.
- The treatment plan will be discussed with you.

Please bring with you:

- A list of medication being taken or past medical history information
- Any Dental insurance forms or information
- Your Provincial Health Card



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*Your Appointment:*

Date:

This time has been reserved for you.  
Rescheduling/Cancelling appointments requires 48 hours notice.  
Insufficient notice may result in a cancellation fee.