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**Dr. J. Heath Balch, D.D.S., M.D.S.**

*Specializing in Implant, Esthetic and Restorative Dentistry*

Introducing \_\_\_\_\_ for prosthodontic consideration.  
Patient Contact Information \_\_\_\_\_

**Referred for**

- Second Opinion/Consultation
- Comprehensive Care
- Limited Care

**Removable Prosthodontics**

- Complete Denture
- Partial Denture

**Implants**

- Single Tooth       Removable Restoration
- Multiple Teeth     Fixed Restoration

**Special considerations** \_\_\_\_\_

\_\_\_\_\_

**Referring Doctor** \_\_\_\_\_ **Preferred method of contact** \_\_\_\_\_

**Radiographs**

- Take all necessary       Emailed/Mailed
- Patient will bring       No radiographs taken

**Fixed Prosthodontics**

- Functional Reconstruction
- Failing Dentition

**TMJ Therapy**

- Evaluation/Treatment