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REFERRAL

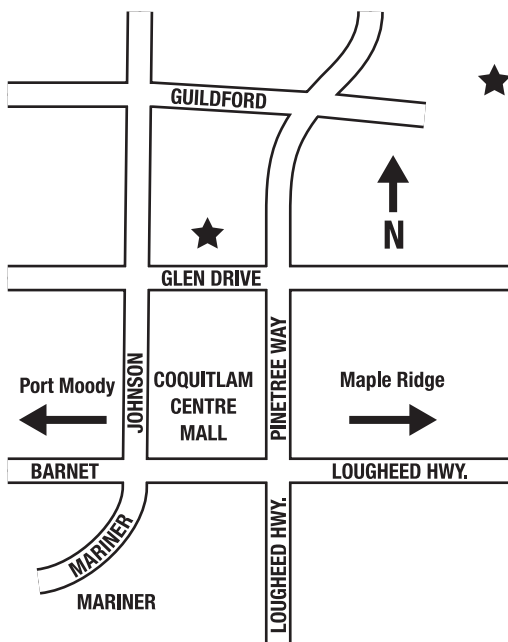
Patient: _____

Please have the patient call us to book an appointment.
Please send or email the most recent panoramic radiograph.
taylorshamloo@gmail.com

Referred by Dr. _____

Date: _____

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