

David M. Schleider ♦ DMD, MS, Prosthodontist
Catherine T. Dallow ♦ DMD, DDS, Prosthodontist

REFERRAL FORM

PATIENT INFORMATION

Full Name: _____
First Middle Initial Last

Home Phone: (____) _____ Cell: (____) _____ Email: _____

Address: _____
Street Address Apartment / Unit #

City State Zip Code

REASON FOR REFERRAL

(Mark All That Apply)

- | | |
|---|---|
| <input type="checkbox"/> Implant Restoration | <input type="checkbox"/> Complete or Partial Dentures |
| <input type="checkbox"/> Full Mouth Rehabilitation | <input type="checkbox"/> Implant Placement (indicate preferred implant brand) _____ |
| <input type="checkbox"/> Localized Treatment of _____ | <input type="checkbox"/> CT Only (disc will be mailed to Referring Doctor) |

COMMENTS / SPECIAL CONCERNS:

Current x-rays to accompany patient ☐ Yes ☐ No

Referred by Dr. _____

Phone: (____) _____ Email: _____

For all referred patients, Dr. Schleider will conduct a consultation to review their specific situation.

To schedule an appointment, call our office at **(804) 346-3366**.



8917 FARGO RD., SUITE B
RICHMOND, VA 23229
WWW.DENTALIMPLANTS RVA.COM
(804) 346-3366



WHY OTHER DENTISTS REFER COMPLEX CASES TO DR. SCHLEIDER...

Dr. Schleider is a specialist in prosthodontics with advanced training and experience in all facets of implant and restorative dentistry. Because of Dr. Schleider's extensive knowledge of advanced technology, materials and procedures, he works on unusual cases every day and lectures both locally and nationally. That's why other dental professionals refer complex cases and call him **The Complex Case Specialist™**.

Dr. Schleider has been practicing prosthodontics since 2005, specializing in difficult dental problems and restorations including crowns and bridges; partials and dentures; and implant dentistry with emphasis on full arch fixed (permanent) implant restorations. He will do a complimentary consultation for referred patients before beginning treatment and gives a warranty on all work.

Commonwealth Prosthodontics, Dr. Schleider's office, is equipped to provide the highest level of care for your referred patients, with technology including:

- An Intra-Oral Camera, for the patient to see what's happening inside his/her mouth.
- On-site dental lab technicians who allow us to fabricate the bulk of our prosthetics onsite, as well as facilitate quick turnaround on removable appliance repairs.
- Cone Beam CT imaging to more accurately find disease and plan procedures, while affording a higher-quality visual of internal structures before surgery. This technology decreases the number of procedures needed, saving the patient cost and allows for minimally invasive procedures.

Training & Qualifications

- 3-year residency in prosthodontics from Virginia Commonwealth University.
- Master of Science in Dentistry from Virginia Commonwealth University.
- Doctor of Dental Medicine from the University of Pennsylvania.
- Master of Science in Immunology from State University of New York at Buffalo focusing on cancer research.

Professional Memberships

- American College of Prosthodontists & Academy of Osseointegration
- American Dental Association & International Congress of Oral Implantologists
- Virginia Dental Association & Richmond Dental Society
- American Academy of Dental Sleep Medicine

Key Distinctions

- Dr. Schleider has rigorous prosthodontic training and experience that provides him with special understanding for advanced dental implant and dental restoration options.
- Dr. Schleider also is the recipient of the prestigious Columbia award for excellence in crown and bridge dentistry from University of Pennsylvania.

A SPECIAL MESSAGE TO FELLOW DENTAL PRACTITIONERS:

"As the referring dentist, you know your patient's mouth and have key insight into your patient's needs. I want to work with you to provide your patients with the best possible treatment outcomes. I will treat your patient in a manner that will reflect well on you and strengthen your relationship with your patient. I am here to make you look good! When your patient's care is completed, he/she is referred back to your office for his/her ongoing dental care. I am grateful for your collegiality and trust with your patients!"