



## Coastal Oral & Maxillofacial Surgery

# Mark W. Johnson, DDS

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**Appointment Information:** This time is reserved specifically for you. If by necessity, you must cancel your appointment for surgery, please notify us at least 48 hours in advance.

Date \_\_\_\_\_ Time \_\_\_\_\_ Day \_\_\_\_\_

Introducing \_\_\_\_\_

Referred by \_\_\_\_\_

Telephone Number \_\_\_\_\_

Special Instructions \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Restorative Treatment Planned \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Doctor's Signature \_\_\_\_\_

Please Circle Teeth to be Treated

Right Left

01	02	03	04	05	06	07	08	09	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

A	B	C	D	E	F	G	H	I	J
T	S	R	Q	P	O	N	M	L	K

Extraction (Circle Teeth Number)

Implants

### Other Procedures

Alveoloplasty

Frenectomy

Exposure

Lesion Evaluation

Infection

Tori

### Radiographs

Being Mailed

Given To Patient

Please Take

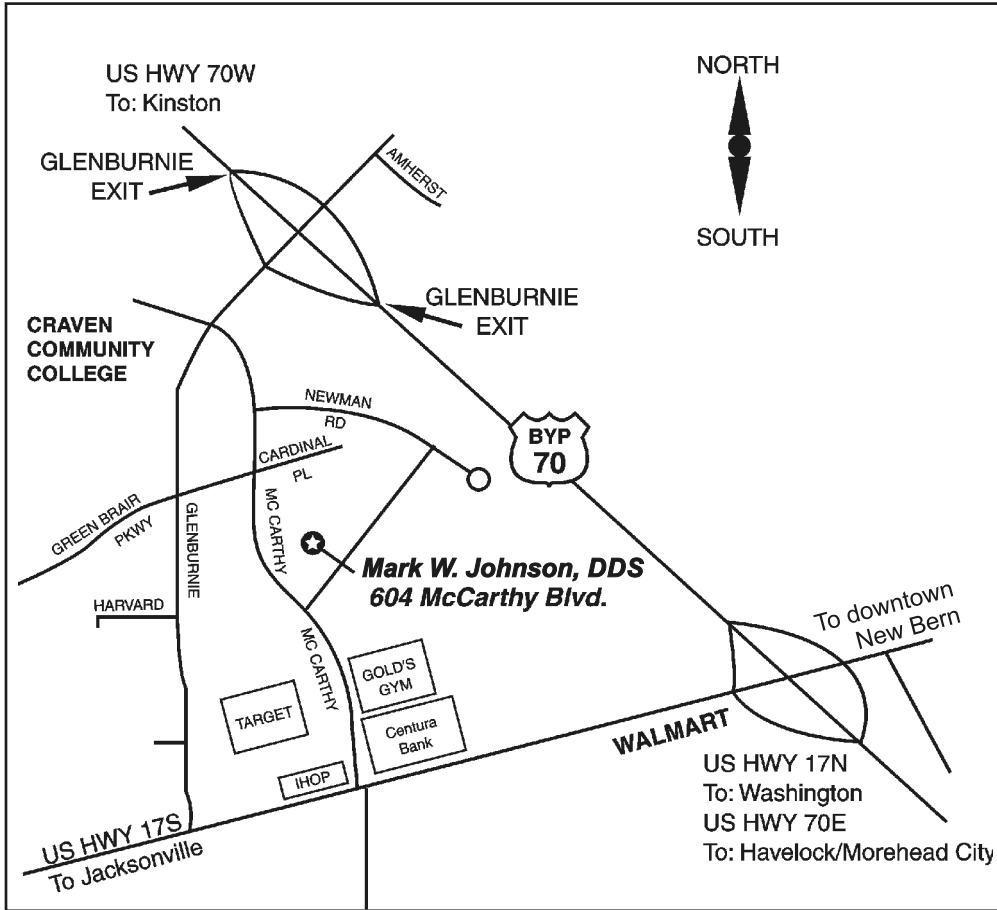
Please Return

### Consultation

Orthognathic Evaluation

Implants

Patients: Please see reverse side for a map of our location.



New Bern Office  
604 McCarthy Blvd.  
New Bern, NC 28562

Our office is located west  
of downtown New Bern.

From Bus. 17 at the Target  
store intersection, turn  
north onto McCarthy Blvd.