

DEPARTMENT OF
PREVENTIVE & COMMUNITY DENTISTRY
COLLEGE OF DENTISTRY
Special Care Clinic

 THE UNIVERSITY OF IOWA
261 Dental Science Bldg. South
Iowa City, Iowa 52242-1001
Tel: 319-335-7373
Fax: 319-335-7187

FACULTY PRACTICE

Dan Caplan, DDS, PhD
Marsha Cunningham, BS, MS, RDH

Peter Damiano, DDS, MPH
Erin Lacey-Spector, DDS

Michelle McQuistan, DDS, MS
Marco Rouman, DDS, MFDS RCS(Ed)

Date: _____

Patient name: _____

Patient address: _____

Home phone: _____ Cell phone: _____ Date of birth: _____

Requested consultation/treatment:

Comprehensive care _____

Limited care only (specify) _____

Consultation only (specify) _____

Comments (including special instructions): _____

Please return patient for general care to referring dentist.

Level of care requested:

Pre-doctoral students

Residents

Faculty (*list below*)

Dr. Caplan

Dr. Damiano

Dr. McQuistan

Ms. Cunningham

Dr. Lacey-Spector

Dr. Rouman

Faculty with first available appointment

Radiographs preferred on film or compact disc:

Enclosed

Will be sent

Patient will bring

None provided

Referring dentist: _____

Address: _____

Telephone: _____ E-mail: _____

Please contact the Special Care Clinic by telephone, Fax, or mail to set up an appointment.

For additional forms call: 319-335-7373

Or visit website - http://www.dentistry.uiowa.edu/referralforms/referral_preventive.pdf