



College of Dentistry and Dental Clinics

Department of
Pediatric Dentistry

Pediatric Dentistry Clinic

202 Dental Science Building South
Iowa City, IA 52242-1001
319-353-6711 (FACULTY)
319-335-7485
Fax: 319-353-5508

FACULTY PRACTICE

Matthew K. Geneser, DDS
Michael J. Kanellis, DDS, MS

Kecia S. Leary, DDS, MS
Tad R. Mabry, DDS, MS

Arwa I. Owais, BDS, MS
Karin Weber-Gasparoni, DDS, MS, PhD

Date: _____

Patient legal name: _____ Date of birth: _____ Gender: _____

Patient address: _____

Patient phone: _____ Cell phone: _____

Name of dental insurance: _____ E-mail: _____

Requested consultation/treatment:

- Consultation only
- Consultation and limited treatment
 - Return to referring dentist
- Comprehensive care

Special Instructions:

- Behavior/age
- Special health care needs/medically compromised (call 319-353-6711)
- Rampant caries
- Treatment under general anesthesia
- Treatment under conscious sedation

Comments: _____

Please contact the Pediatric Dentistry Clinic to set up an appointment.

Level of care requested:

- Pre-doctoral students.
- Pediatric dental residents
- Faculty (*see list below*).
 - Dr. Geneser
 - Dr. Leary
 - Dr. Owais
 - Faculty with first available appointment
 - Dr. Kanellis
 - Dr. Mabry
 - Dr. Weber-Gasparoni

Radiographs preferred on film or compact disc:

- Enclosed
- None provided

To transfer patient records and radiographs electronically, please use our HIPAA compliant and secure website. Call Central Records at 319-335-7429 for instructions. Include your office name/phone number, patient name/date of birth, and date radiographs made.

Referring dentist: _____

Address: _____

Telephone: _____ E-mail: _____