



BART C. TIRRELL, DDS, MSD

# REFERRAL

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Please visit our  
website to download  
new patient  
paperwork.

**INTRODUCING:** \_\_\_\_\_ Patient Phone # \_\_\_\_\_

Referred by Dr: \_\_\_\_\_ Office Phone: \_\_\_\_\_ Referral Date: \_\_\_\_\_

Patient consultation appointment: **M T W T H** Date: \_\_\_\_\_ Time: \_\_\_\_\_

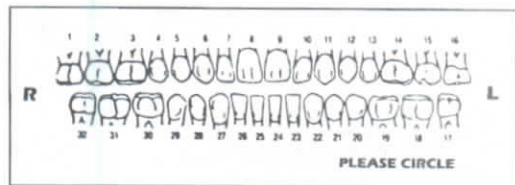
Tooth or area to be treated: \_\_\_\_\_

**HISTORY:** (please check)

- Spontaneous pain
- Chewing Sensitivity
- Trauma
- Hot/cold sensitivity

**FINAL RESTORATION:** (please check)

- Permanent Filling
- Temporary Filling



**NOTES:** \_\_\_\_\_

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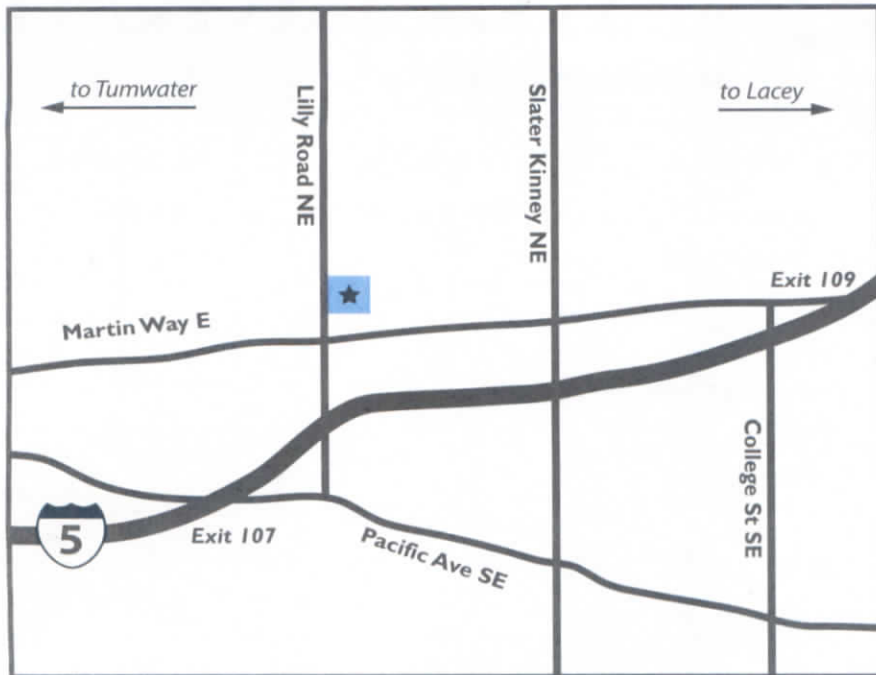
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## DIRECTIONS

### IF YOU ARE TRAVELING NORTHBOUND I-5 (TOWARDS SEATTLE):

- Take the Pacific Ave exit (exit #107)
- Turn right onto Pacific Ave SE  
Continue about .2 mile.
- Turn left onto Lilly Road SE  
Continue about .5 mile (past Martin Way)
- Lilly Road Professional Center  
is on the right

### IF YOU ARE TRAVELING SOUTHBOUND I-5 (TOWARDS PORTLAND):

- Take the Pacific Ave exit (exit #107)
- Turn left onto Pacific Ave SE  
Continue about .2 mile.
- Turn left onto Lilly Road SE  
Continue about .5 mile (past Martin Way)
- Lilly Road Professional Center  
is on the right