

ORAL & MAXILLOFACIAL SURGERY OF OCEAN PARKWAY

1777 OCEAN PARKWAY
(ENTRANCE ON KINGS HIGHWAY)
BROOKLYN, NEW YORK 11223
(718) 998-9114
Fax: (718) 998-3727

Mon., Wed., Fri.:
8:30 AM - 5 PM
Tues., Thurs.:
8:30 AM - 8 PM
Saturday: 8 AM - 4 PM

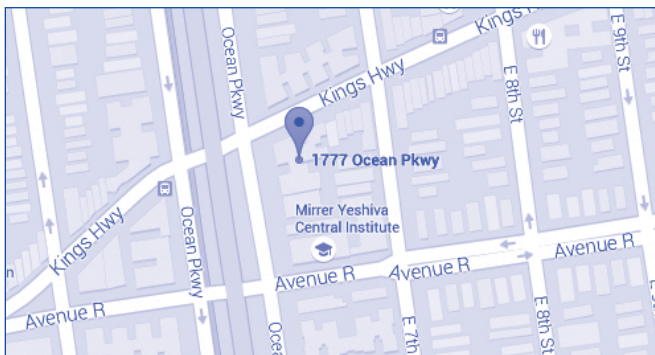
**DIRECTIONS TO: 1777 OCEAN PARKWAY
(ENTRANCE ON KINGS HIGHWAY)**

BY TRAIN:

"F" train to Kings Highway, walk east to Ocean Parkway
"B" or "Q" train to Kings Highway, walk west to Ocean Parkway
"N" train to Kings Highway, walk east to Ocean Parkway

BY BUS:

B82 bus (Kings Highway bus), to Ocean Parkway



NOTE: Since it is the office policy to accept as payment ALL insurance plans that cover the treatment and which are assignable to the Doctor, subject to co-payment, policy maximums and deductables, please have the insurance forms properly filled out and signed by the insured member at the first office visit. Current Medicaid cards are required for treatment



ORAL & MAXILLOFACIAL SURGERY

OF OCEAN PARKWAY

www.oceanparkwayoms.com

MARK B. BIRNBAUM, D.D.S.
NORMAN E. JOHNSON, D.D.S.
STEVE MANZON, D.M.D.
AVI FEYGIN, D.M.D.

Patient's Name: _____

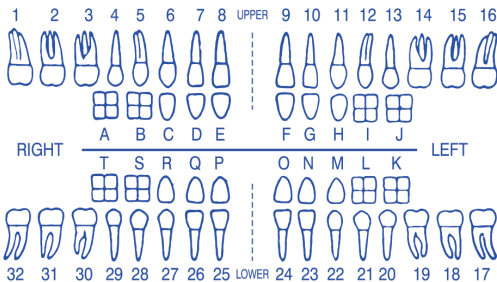
Doctor's Name: _____

Date: _____

NOTE: BRING THE NAMES AND DOSAGES
OF ALL MEDICATIONS THAT YOU TAKE.

if GENERAL ANESTHESIA is requested, please follow these instructions:

1. Please do not eat or drink anything for six (6) hours prior to your surgery.
2. You are not allowed to drive after general anesthesia. Please have someone escort you home after the procedure.
3. Unless told to do otherwise by your doctor, please take all of your normal medications as scheduled. If you have a question about your medications, please call our office.



CONSULTATION: ☐ Extraction: _____

☐ Wisdom Teeth ☐ Apicoectomy ☐ Exposure

☐ Orthognathic Surgery ☐ Pathology _____

☐ Other: _____

DENTAL IMPLANTS: # _____

☐ Sinus Lift ☐ Bone Grafting ☐ Socket Grafting

REMARKS: _____
