



**Knoxville  
Implant Dentistry**

**Joe F. Griffin, II, D.D.S.**

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**INITIAL CONSULT DATE:**            /        /

**Patient Name:** \_\_\_\_\_

**RESTORATIVE DOCTOR COMMENTS:**

**DESIRED OUTCOME:**

- IMMEDIATE PLACEMENT AFTER EXTRACTION
- IMMEDIATE TEMPORARY
- ONE PIECE IMPLANT-TEMPORARY OR HEALING COLLAR
- PLACE HEALING COLLAR AT UNCOVERING
- PLACE FINAL ABUTMENT AT UNCOVERING WITH TEMPORARY
- OVERDENTURE
  - LOCATORS
  - BAR

**RESTORATIVE DOCTOR WILL SUPPLY:**

**SURGICAL GUIDE**

or

**DIAGNOSTIC WAX UP**

**BONE GRAFT (IF NECESSARY)**

**Dr. Griffin Comments:**

**IMPLANT PLACED (TOOTH NUMBER AND STICKER)**

**HEALING COLLAR PLACED (TOOTH NUMBER AND STICKER)**