

Central Dental

TMJ & DENTAL SLEEP THERAPY

E. Kyle Dalton, DDS, DABCP, DABCDSM, DABDSM, FAACP, LVIF

PATIENT REFERRAL CARD

This is to introduce: _____

for the following procedures: (please check all that apply)

Headaches

TMJ

Ear Ringing

Jaw Popping/Clicking

Facial or Jaw Muscle Pain

Pressure Behind Eyes

Stiffness or Pain in Neck, Shoulders or Back

Sleep Apnea

Sleep Study Completed

CPAP Intolerance

Other:

Previous Treatment: _____

Special Instructions: _____

Referred By: _____



E. Kyle Dalton, DDS

Board Certified in Craniofacial Pain and
Dental Sleep Medicine, TMJ, Headaches
and Facial Pain Management,
Sleep Apnea Treatment

Thank you for your referral!

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