



# ShirePeriodontics

Implant and Periodontics Specialists

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**Specialist Periodontist**

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**Specialist Periodontist**

**Dr Max Lloyd Fertman**  
BDS, D.Clin.Dent (Perio) (Syd)  
**Specialist Periodontist**

Patient's Name: .....

Reason for referral:

- |                                                      |                                                                    |
|------------------------------------------------------|--------------------------------------------------------------------|
| <input type="checkbox"/> Consult                     | <input type="checkbox"/> Implant surgery -preferred system/s:..... |
| <input type="checkbox"/> Periodontitis               | <input type="checkbox"/> Peri-implantitis.....                     |
| <input type="checkbox"/> Canine/tooth exposure       | <input type="checkbox"/> Hard/soft tissue graft for implant bed    |
| <input type="checkbox"/> Recession coverage          | <input type="checkbox"/> Extraction and ridge augmentation         |
| <input type="checkbox"/> Frenectomy                  | <input type="checkbox"/> Sinus lift                                |
| <input type="checkbox"/> Root resection/Hemi-section |                                                                    |
| <input type="checkbox"/> Crown Lengthening           | <input type="checkbox"/> Other                                     |

Notes/details: .....

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Referred by: ..... Signature: .....

Date: ..... Attached:  OPG  CT  PA/BW