Guildford Orthodontic Centre
#200-10203 152A Street, Surrey, B.C. V3R 4H6
Phone: **604-589-2212** • Fax: 604-589-2269

Dr. Aly Kanani & Associates

Certified Specialists in Orthodontics

www.guildfordorthodontics.com

INTRODUCING

Patient Name _____

Birthdate _____ Phone _____

FOR A COMPLIMENTARY ORTHODONTIC EVALUATION

Referred By: _____

Office Name: _____

Office Phone Number: _____

☐ X-Rays Have Been Emailed: office@guildfordorthodontics.com

DENTAL INSURANCE INFORMATION

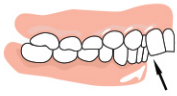
Name of Insurance company: _____

Policy holder name: _____

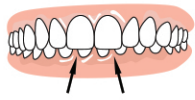
Policy holder DOB: _____

Group Policy #: _____ Certificate/ID#: _____

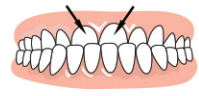
CHIEF CONCERNS



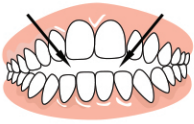
☐ Protrusive Teeth



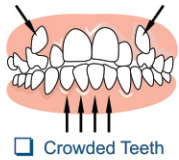
☐ Deep Over Bite



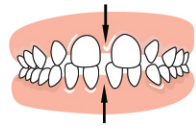
☐ Underbite/
Anterior Crossbite



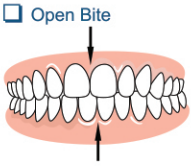
☐ Open Bite



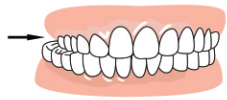
☐ Crowded Teeth



☐ Spaced Teeth



☐ Midline Discrepancy



☐ Posterior Crossbite

☐ invisalign®

☐ Breathing & Airway

☐ TMJ

Please fax or email a copy to our office and give a copy to the patient