

Referral for periodontal care

Subject: Referral for Periodontal Treatment

Dear Dr. [Last Name],

I am referring my patient, [Patient's Name], who presents with advanced periodontal disease requiring specialized evaluation and treatment. Despite routine maintenance, the patient continues to exhibit deep periodontal pockets and mobility in several teeth.

Enclosed are periodontal charting records and radiographs for your review. The patient has been informed of the seriousness of their condition and is prepared for further management.

I appreciate your attention and collaboration in this matter.

Best regards,

[Your Full Name]

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