Xu Han, DDS, MS

Fax _____

Diplomate. American Board of Pediatric Dentistry Phone: 952,926,1065 Fax: 651,212,2942 www.kidsteethtds.com ☐ 675 E Nicollet Blvd, Suite 120, Burnsville, MN 55337 ☐ 15031 Crestone Ave, Rosemount, MN 55068 Date _____ Patient Name ______ Parent/Guardian _____ I am referring my patient to you for the following reason(s): Appointment Date ______ Time _____ Referring Doctor _____ Referring Practice _____ THE DENTAL

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