

ESOMS

Eastern Suburbs Oral and Maxillofacial Surgery

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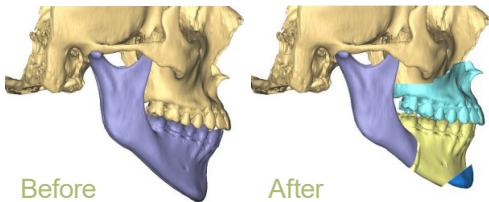
ABN 88 143 982 779

☐ **Dr David Leinkram**
BDSc MBBS FRACDS(OMS)
Oral and Maxillofacial Surgeon
Provider Number: 266548BA

☐ **Dr Krishnan Parthasarathi**
BDSc(Hons) BMed(Distinct) FDS
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☐ **Dr Tim Manzie**
BOH (DSc.) Grad. Dip. Dent. MBBS
FRACDS (OMFS)
Oral and Maxillofacial Surgeon
Provider Number: 6317594W

Virtual Surgical Planning



Referring Doctor:

Telephone Number/Email:

Patient Name:

Telephone Number/Email:

Diagnosis:

- | | | |
|---|---|--|
| ☐ Class II | ☐ Class III | ☐ Sleep apnoea |
| ☐ Aysmmetry | ☐ AOB | ☐ POB |
| ☐ Impacted teeth | ☐ Possible pathology | ☐ Missing teeth |

Suggested Treatment:

- | | | |
|--|---------------------------------------|--|
| ☐ BSSO | ☐ MMA | ☐ BIMAX +/- genioplasty |
| ☐ CCW | ☐ SAMSE | ☐ Anchorage plates |
| ☐ Dental implants | ☐ Wisdom teeth | ☐ Exposure & bond |
| ☐ Suitable for surgery first protocol | | |

Other/Notes:

Signature:

Date:

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