



GERMANTOWN
DENTAL VILLAGE

Tuan M. Nhu, DDS

19330 Liberty Mill Road, Germantown, MD 20874
Email: drnhu@germantowndentalvillage.com
301-428-3211

Medical Consult and Risk Assessment Request

Date: _____

Patient Name: _____ DOB: _____

The above-named person is a patient at Germantown Dental Village. We need your assessment about the patient's medical condition.

Thank you so much for your time and attention.

- ☐ Does this patient need to take antibiotic prophylaxis for dental visits?
- ☐ Patient was unable to give an accurate and thorough medical history. Please provide a full health history plus a current medication list.
- ☐ Do you feel that patient's health condition is stable, so that the patient can tolerate dental treatment without serious or undue complications? Yes _____ No _____
- ☐ Other:

Dentist Signature: _____

Physician's Response Area:

Physician Name: _____ Physician Signature: _____

Physician Email or phone number: _____