Carolina Pediatric Dentistry



North Raleigh / Wakefield

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Downtown Raleigh

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Diplomate, American Board of Pediatric Dentistry

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Diplomate, American Board of Pediatric Dentistry

Anne D. Baker, DDS, MPH

Pediatric Dentist

Patient Name:	Date of Birth:/
Referring Doctor / Practice:	Date:/
Referring Doctor's phone:	email:
X-rays will be sent to xray@Carolin	aPedo.com? Yes No Last Cleaning Date?//
Reason for Referral: Toothache	☐ Caries ☐ Extractions ☐ Space Maintenance
☐ Trauma	☐ Cooperation ☐ Special Health Care Needs
☐ Sedation/G	eneral Anesthesia Evaluation Other:
Parent/Guardian Name:	Contact number:
Address:	Insurance information:

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Specialists in Dentistry for Infants, Children, Teens & Children with Special Health Care Needs