



Dylan McKnight, DMD

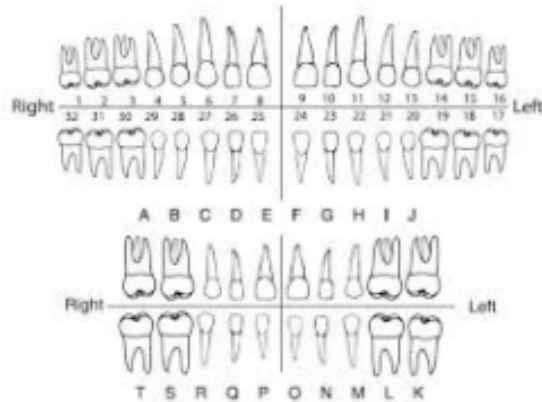
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Introducing: _____



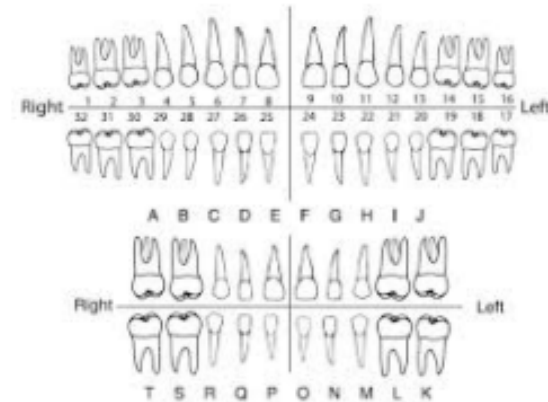
Comments: _____

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Referring Doctor: _____

Phone: _____

Introducing: _____



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