



**UCSF PEDIATRIC DENTISTRY**, Box 4072  
**Ron Conway Family Gateway Medical Building**  
1825 4<sup>th</sup> Street, Floor 5  
San Francisco, CA 94143

Dear Parent/Guardian(s):

Thank you for calling our office for a new patient examination. Please see the attached appointment slip with your appointment date and time.

You will need to complete the enclosed registration forms prior to arriving to your appointment. Please arrive **15 minutes** prior to your appointment with the **completed** registration forms in hand. If you are unable to keep the appointment, we request that you contact us at least 24 hours prior to your appointment at (415) 476-3276.

We are located on floor 5 of the Ron Conway Family Gateway Medical Building. If you are driving to UCSF Mission Bay, you can obtain driving directions at [www.ucsf.edu/maps](http://www.ucsf.edu/maps).

Patients must be accompanied by a parent or guardian and must present an insurance card to be seen.

**Thank you and we look forward to meeting you!**