Harborview
Kids Dental and Orthodontics

Referral Guide for Providers

Harborview Kids Dental and Orthodontics	Location: 27116 167th PL SE, Ste 108, Covington WA 98042 Phone: 206-350-1818 Fax: 206-487-1818 Emergency/on-call: 682-558-0678 (cell) Website: www.harborviewdentalclinic.com
Provider	Ye Lin, DMD (Orthodontics)
Services/interventions	Dental treatment for all children and young adults under 21 years old, and orthodontic treatment for all ages: Tongue tie, lip tie, crowding, and gaps between the teeth. Early intervention for oral habits (thumb sucking, fingernail biting, open mouth) and bite correction. Comprehensive orthodontic treatment, including surgical cases.
Advanced work-up	Dental problems, relevant medical history, radiographs if appropriate.
Patient age	Under 21 years: dental treatment for all children and young adults. All ages: orthodontic treatment.
Insurance	All major PPO, Medicaid

Last updated 6/19/2026

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Referral Form

Thank you for referring! ***Our provider will return patients to the referring provider for ongoing care unless advanced care is recommended.***

Submit this form to (1) front@harborviewdentalclinic.com or (2) 206-487-1818 (fax) or (3) 206-350-1818 (text/call)

Patient Information	
Patient name (First, MI, Last)	Address:
DOB:	Phone:
Today's date:	
Parent/Guardian: (First, MI, Last)	Contact:
Reason for referral: ☐ Consult ☐ Treatment ☐ Emergency	
Reason for referral (relevant history if applicable):	
☐ An appointment is made	☐ Call referring clinic before treatment
Radiographs: ☐ Sent with patient ☐ Mailed/transmitted ☐ Attached ☐ None available, please provide written report:	
Referral From	
Referring doctor: (First, MI, Last)	Contact:
Referral To	
Ye Lin, DMD, MS (Orthodontics)	

Permanent teeth

1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16
32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17

Deciduous teeth

A	B	C	D	E	F	G	H	I	J
T	S	R	Q	P	O	N	M	L	K

Provider signature: _____ **Date:** _____

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