

INTRODUCING: _____ DATE: _____

REFERRED BY: _____

TOOTH NUMBER: _____

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

SERVICES ALREADY PERFORMED

- Tooth already opened, medicated and sealed.
- Patient has been placed on an antibiotic and/or analgesic.
- Other _____

SERVICES REQUESTED

- Consultation only.
- Evaluate and treat as indicated.
- Evaluate for surgery or retreatment.
- Leave post space.
- Place post and core build-up.
- Fill access opening with _____
- Other _____

APPOINTMENT

DAY	DATE	TIME	DOCTOR
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