



**Farah Abbassi, DMD, MSD • Practice Limited to Endodontics**

**Unique Care Endo**

2010 E. First St. Ste 260 • Santa Ana, CA 92705 • P. 714.543.1800 • F. 714.543.1811

**Huntington Beach Microscopic Endodontics & Microsurgery**

18377 Beach Blvd. #106 • Huntington Beach, CA 92648

P. 714.847.8600 • F. 714.847.8664



**AE** American Association of Endodontists | *Specialists Member*

**PLEASE EVALUATE/TREAT THE FOLLOWING TOOTH OR 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

Introducing \_\_\_\_\_ Patient Phone \_\_\_\_\_

Referred by Dr. \_\_\_\_\_ Dr. Phone \_\_\_\_\_

Appointment Date \_\_\_\_\_ Appointment Time \_\_\_\_\_

**COMMENTS:** \_\_\_\_\_

**SERVICES REQUIRED**

- Consultation
- Evaluate and treat as necessary:
  - Patient has pain, sensitivity, or swelling
  - Periapical radiolucency present
  - Endodontic treatment necessary for restoration
  - Pulp was exposed (vital/non-vital)
  - Tooth has been accessed
  - Consideration for re-treatment
  - Consideration for surgical endodontics
  - Consideration for root canal therapy
- Prepare post space/build-up
- Planned restorative treatment
- Premedication required
- Antibiotic/Analgesic prescribed

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