

REFER TO:

Patient Phone Essential Endodontics
1200 W. Hwy 6, Ste. 1, Waco, TX 76712
O: 254.400.2637 • F: 254.400.2847
waco@essentialendotx.com

Date

erred narks																	
	☐ Please send more Referral Pads																
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
ì .	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	
		•	то	В	ΕI	FIL	.LE	D	IN	B	YC	Œ	NT	'IS	т		
Pulp was exposed										Trauma (add detail below)							
X-ray revealed radiolucency										Cracked tooth							
Toothache										PI	Place buildup						
Retreatment										Le	Leave post space						
Evaluate only and call										PI	Place post and core						
Evaluate and provide necessary treatment										E۱	Evaluate for implant/grafting						
Antibiotic prescribed																	
Analg	esic	oreso	cribed	<u> </u>													
Other														_			

Information For Patients

Please bring to your appointment:

- 1. Information to complete a health history including physician information
- 2. Name and doses of all medications
- 3. Dental Insurance Information and state issued identification, and form of payment

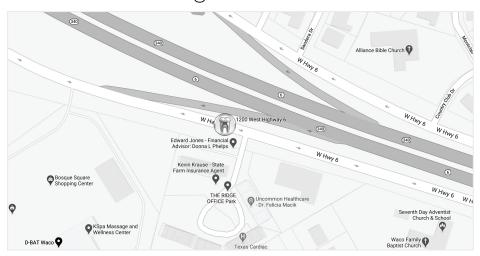
Please visit our website or call to:

- 1. Learn more about endodontic treatment
- 2. Discuss your visit or appointment length
- 3. Review Dental Insurance information and financial policies

If you require antibiotic premedication:

Due to artificial joints or heart defects, please obtain the necessary prescription from your dentist and take as prescribed before your appointment.

1200 W. Hwy 6, Ste. 1 Waco, TX 76712 O: 254.400.2637 F: 254.400.2847 waco@essentialendotx.com



PLEASE DON'T HESITATE TO CALL 254.400.2637

or visit our website www.essentialendotx.com SHOULD YOU NEED FURTHER DIRECTIONS

We look forward to your visit. Se Habla espanol.