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Diplomate, American Board of Endodontics

**Clarksville Endodontics**  
Specializing in Microscopic Endodontics

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Introducing \_\_\_\_\_  
For Endodontic Consideration of the Following Tooth (Teeth)

Appointment on \_\_\_\_\_ O'Clock

			<b>A</b>	<b>B</b>	<b>C</b>	<b>D</b>	<b>E</b>		<b>F</b>	<b>G</b>	<b>H</b>	<b>I</b>	<b>J</b>			
	<b>1</b>	<b>2</b>	<b>3</b>	<b>4</b>	<b>5</b>	<b>6</b>	<b>7</b>	<b>8</b>	<b>9</b>	<b>10</b>	<b>11</b>	<b>12</b>	<b>13</b>	<b>14</b>	<b>15</b>	<b>16</b>
<b>32</b>	<b>31</b>	<b>30</b>	<b>29</b>	<b>28</b>	<b>27</b>	<b>26</b>	<b>25</b>		<b>24</b>	<b>23</b>	<b>22</b>	<b>21</b>	<b>20</b>	<b>19</b>	<b>18</b>	<b>17</b>
			<b>T</b>	<b>S</b>	<b>R</b>	<b>Q</b>	<b>P</b>		<b>O</b>	<b>N</b>	<b>M</b>	<b>L</b>	<b>K</b>			

- \_\_\_ Evaluation
- \_\_\_ Pulp Exposure
- \_\_\_ Patient Has Discomfort, Please Evaluate
- \_\_\_ Radiographic Findings Present
- \_\_\_ Bridge Cemented
  - \_\_\_ Temporarily    \_\_\_ Permanently
- \_\_\_ Post Space Required
  - \_\_\_ Yes    \_\_\_ No

Remarks: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signed Dr. \_\_\_\_\_