ENDODONTICS OF COLORADO, L.L.C.

Shane R. Christensen, D.D.S., M.S.D.
David J. Holtzmann, D.M.D. ,M.S.
Hassanain Zaheer, D.D.S., M.S.
INFO@ENDOOFCO.COM
ENDOOFCO.COM

American Association of Endodontics Specialist Member

11200 East Mississippi Ave. • Aurora, CO 80012 • 303-696-1919, FAX: 303-805-2998
19700 East Parker Square Dr., Suite 8 • Parker, CO 80134 • 303-805-4141, FAX: 303-805-2998

INTRODUCING _____Tooth #_____

Appointment Date _____Time_____

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

☐ Asymptomatic
☐ Percussion
☐ Mastication
☐ Temperatures
☐ Short
☐ Prolonged

☐ Radiolucency
☐ Resorption
☐ Swelling
☐ Sinus Tract
☐ Fracture

☐ Pulp Exposure
☐ Previous RCT
☐ RCT Initiated
☐ Trauma
☐ Hx of crack

Requesting: ☐ Eval & Tx ☐ Consult Only ☐ CBCT ☐ Call Before Tx
☐ Post Space ☐ No Cotton Pellet ☐ Final Restoration

Pertinent Info:

Referring Dr: _____ Phone_____

Please send more: ☐ Referral Pads ☐ Business Cards