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Patient: \_\_\_\_\_

Phone: \_\_\_\_\_ Date: \_\_\_\_\_

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

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

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

## TO BE FILLED IN BY DENTIST

- ☐ Leave room for post
- ☐ Pulp was exposed
- ☐ Patient has a vague toothache, evaluate and treat
- ☐ Patient has pain, swelling, sensitivity, evaluate and treat
- ☐ Tooth is opened for drainage
- ☐ X-Ray revealed pulpal involvement
- ☐ X-ray revealed radiolucency
- ☐ Antibiotic prescribed: \_\_\_\_\_
- ☐ Analgesic prescribed: \_\_\_\_\_
- ☐ Other: \_\_\_\_\_

PRACTICE LIMITED TO ENDODONTICS