

Trenton Smith, DDS, MSD - Endodontist

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Intr	odu	cing	Introducing:															
for endodontic evaluation of the following tooth/teeth																		
_1	2	3	4	5	6	7 26	8		9	10 23	11		13		15	16		
32	31	30	29	28	27	26	25		24	23	22	21	20	19	18	17		
Treatment Desired: Check all that apply to this patient																		
Evaluate and Treatment Root Resection (apico)																		
	Evalua	ate Or	nly				(eachi									
	Endoc	dontic	Retre	atme														
	Endodontic Retreatment Other:																	
Desired Restoration: Check all that apply to this patient																		
	Temp	orize		space	Э													
Definitive build up, instructions:																		
_																		
Let'	Let's schedule your next appointment:																	
			-							7	Γime:							
Appointment Date:												Time:						
Patie	Patient Phone #:												Patient's D.O.B:					
Referring Dr:												Date:						
Dom	arks:																	
kein	ai KS:																	