

OAKLAND - ALAMEDA ENDODONTICS

www.oaklandalamedaendo.com



Unes Nabipour, D.D.S., INC.
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Practice Limited to Endodontics

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|---|--|
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Introducing _____ Phone _____

Referred by Dr. _____ Date _____

Tooth # _____ Appt. Scheduled Date _____ Time _____

Pertinent History

- Previous root canal
- Previous access
- Patient has pain and/or swelling
- Pa lesion

Treatment Performed:

- Antibiotics prescribed
- Pain medication prescribed
- Tooth recently restored

Please evaluate for:

- Consultation only
- Endodontic Therapy
- Endodontic Surgery
- Retreatment

Restoration needs:

- Post space
- Core build up
- Post and core build up
- Place temporary

We would appreciate emailed xrays prior to patient appointment.

Comments: _____

Dental Insurance Carrier: _____

Group No: _____

Please give 48 hour notice if unable to keep appointment.

See Reverse For Maps and Parking

White - Patient

Yellow - Doctors