LITCHFIELD ENDODONTICS

Dr. Michael P. Thompson, DDS
Dr. Nima Moaven, DDS, MS
Quality At Your Service
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Litchfield Park, AZ 85340
Phone: (623) 536-1100
Web: www.litchfieldendodontics.com
Email: rootcanal@litchfieldendodontics.com

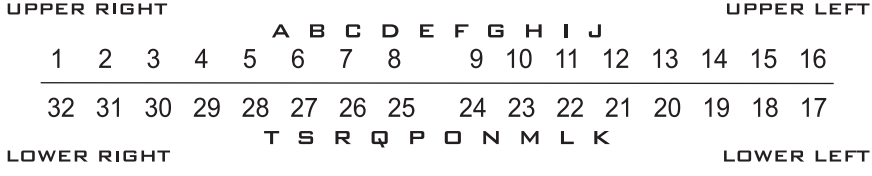
PATIENT'S NAME _____ DATE _____

REFERRED BY: _____ OFFICE PHONE: _____

EMAIL TREATMENT REPORTS TO: _____

REFERRED FOR:
- o Consultation Only
- o Non-Surgical Root Canal Treatment
- o Retreatment
- o Evaluation for Endodontic Microsurgery
- o Deep Caries/Pulp Exposure
- o Nitrous Oxide/Sedation May Be Needed

HOW WOULD YOU LIKE US TO RESTORE?
- o Core Build Up
- o Post Space
- o Post & Core
- o Temporary Restoration



COMMENTS

_____

_____

_____

_____

SCHEDULED APPOINTMENT:

DATE: _____ AT: _____ AM / PM

OFFICE HOURS

Monday	7:00am-4:00pm
Tuesday	7:00am-4:00pm
Wednesday	7:00am-4:00pm
Thursday	7:00am-4:00pm
Friday	7:00am-12:00pm

PATIENTS

Please bring to appointment:
- -ID
- -Insurance Card
- -Referral Slip

*Minors must be accompanied by parent/guardian.

*If pregnant, please bring physician clearance.