



831 Landa st Unit B
New Braunfels, TX 78130
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Date: _____

Patient Name: _____

Referring Doctor: _____

Pejman Khosravian D.M.D

Pedram Khosravian D.M.D

TREATMENT TO BE PERFORMED:

- Consultation only
- Periapical radiolucency present
- Pulp exposure
- RCT required for proper restoration
- Evaluation for endodontic surgery
- Root canal therapy

RESTORATIVE INSTRUCTIONS:

- Place post and build-up
- Leave post space
- Place temp in access cavity
- Place final restoration in access cavity

TOOTH TO BE EVALUATED

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

Miscellaneous

- Call me about this case
- Crown and bridge is cemented
 - Temporarily
 - Permanently

SPECIAL INSTRUCTIONS:
