



# BOONE ENDODONTICS

HOMA AZARGOON, D.D.S.

Board Certified Root Canal Specialist

895 State Farm Rd., Suite #204, Boone, NC 28607

Phone: (828) 386-1144 Fax: (828) 386-1145

Email: [office@booneendo.com](mailto:office@booneendo.com) Website: [www.booneendo.com](http://www.booneendo.com)

Introducing \_\_\_\_\_ Phone \_\_\_\_\_

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

Scheduled Appointment \_\_\_\_\_

**Please fax all referral slips and provide x-ray prior to appointment.**

Tooth or Area:

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

**This patient has a history of:**

- Acute pain
- Vague pain
- No pain
- Pulp exposure
- Pulpotomy / Pulpectomy
- X-ray radiolucency
- Previous root canal treatment \_\_\_\_\_ (mos/yrs ago)
- Cracked tooth / teeth or vertical root fracture

**Requested treatment:**

- Consultation only
- Call Dr. after examination
- Evaluate and treat
- Endodontics necessary for restoration

**Requested restoration:**

- Place a temporary restoration
- Prepare post space
- Place core build up
- Place a post and core build up
- Restore access with  amalgam  composite

Restorative treatment plan includes: \_\_\_\_\_

Other comments:
-----------------

# BOONE

