



**HARKRIDER
ENDODONTICS**



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DIPLOMATE, AMERICAN BOARD OF ENDODONTICS

INTRODUCING

PHONE NUMBER

REFERRED BY

PATIENT IS REFERRED FOR THE FOLLOWING:

ROOT CANAL THERAPY

RETREATMENT

DIAGNOSIS

ENDODONTIC SURGERY

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

PULP WAS EXPOSED

ASYMPTOMATIC

TOOTH HAS FRACTURE

LEAVE POST SPACE

PERIAPICAL RADIOLUCENCY

PREPROSTHETIC ENDODONTICS
REQUIRED

NITROUS

SBE PROPHYLAXIS REQUIRED

RCT BEGUN

COMMENTS: _____

WHEN TREATMENT IS COMPLETE:

RESTORE ACCESS OPENING AS NEEDED

PREPARE POST SPACE

PLACE TEMPORARY RESTORATION

PLACE POST/BUILDUP AS NEEDED

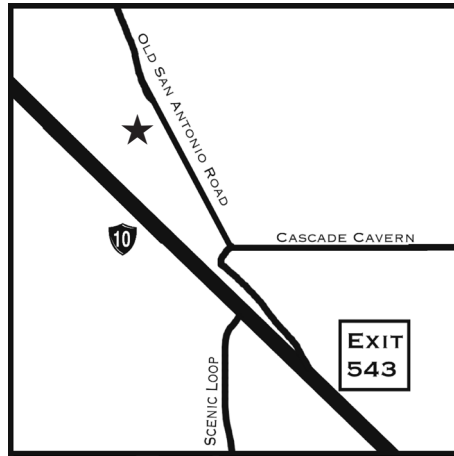
SIGNED DR. _____

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