

NOVA MICROENDODONTICS

PRACTICE LIMITED TO ENDODONTICS

www.novaendo.com
info@novaendo.com

LAUREN ZOLLETT, D.D.S.
H. PHILIP JOHNSON, III, D.D.S.
SLOAN G. LANCTOT, D.D.S.

We accept:
AETNA
CIGNA
DELTA DENTAL
METLIFE
UNITED CONCORDIA

Date: _____

Introducing _____

For endodontics consideration on the following tooth (teeth): _____

	Molars			Bicus Pids		Anteriors				Anteriors		Bicus Pids		Molars			
RIGHT	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	Upper
	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	LEFT
																	Lower
(Circle teeth for endodontic consideration)																	

- STATUS:
- Endodontics necessary for proper restoration
 - Pulp was exposed
 - Tooth is open for drainage
 - Patient has discomfort, please evaluate
 - Radiographic findings present
 - Crown/Bridge is cemented
 - Temporarily
 - Permanently

REMARKS: _____

Please indicate how you want canal prepared

- Core spaces for core build-up
- No post preparation
- Post Preparation
 - Space only
 - Carbon Fiber Post
 - Metal Post
 - Plastic post for casting

Dr. _____

PREMIER PLAZA
6120 Brandon Avenue, Suite 314
Springfield, VA 22150
Tel: (703) 569-0000
Fax: (703) 569-8758

SUNSET HILLS PROFESSIONAL CENTER
11359 Sunset Hills Road
Reston, VA 20190
Tel: (703) 437-6666
Fax: (703) 435-8281