



ADVANCED  
ENDODONTICS  
CENTER



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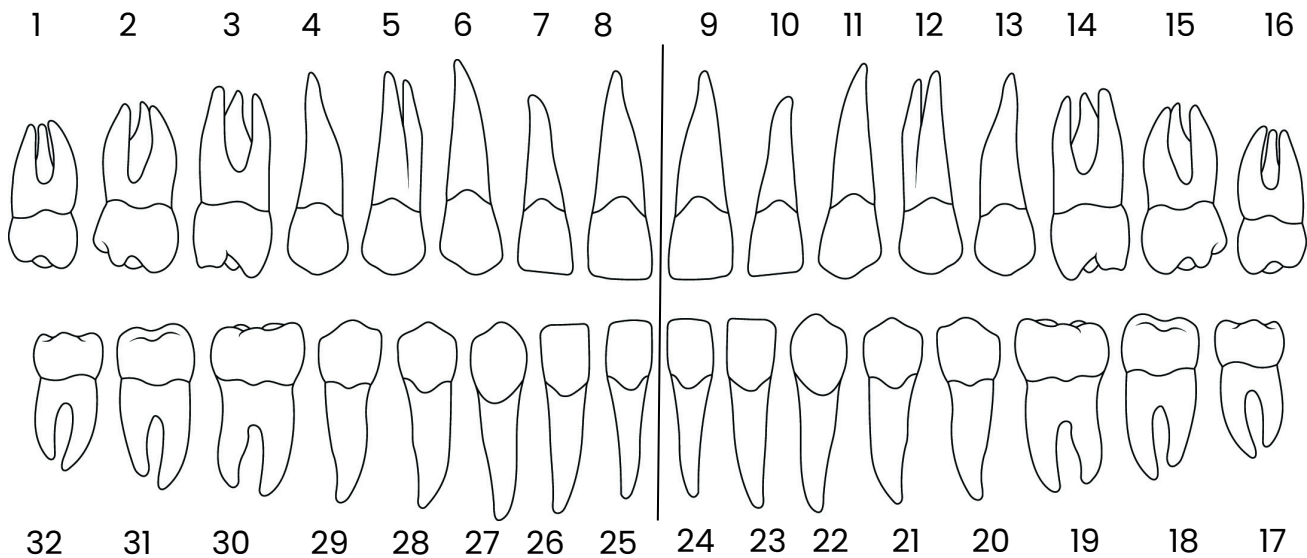
11797 Northfall Lane  
Suite 702  
Alpharetta, GA 30009

*Redefining the root canal  
experience with comfort and style*

Patient Name: \_\_\_\_\_ Date: \_\_\_\_\_

Referring Doctor: \_\_\_\_\_ Referring Practice: \_\_\_\_\_

ODONTOGRAM



REFERRING DENTIST REMARKS:

- Evaluate and treat as needed
- Please call regarding treatment
- Crack suspected, please assess
- Endodontic Retreatment
- Endodontic Surgery
- Endodontic treatment needed to restore
- Other \_\_\_\_\_

Existing Restoration

- Composite/Amalgam
- Provisional Crown
- Permanent Crown
- To be maintained? Yes  No
- Other \_\_\_\_\_

Coronal Restoration Requested

- Composite buildup
- Orifice barrier and temporary
- Post and core
- Temporary and post space
- Other \_\_\_\_\_

Notes: \_\_\_\_\_

# DOWNTOWN ALPHARETTA



S. MAIN ST

OLD MILTON PKWY

EXIT 9

WILLS PARK

HWY 9  
ALPHARETTA HWY

CLASSIC  
COLLISION

NORTHFALL  
PROFESSIONAL  
PARK

GA 400

WAFFLE HOUSE



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