

# Pla & Watts Endodontics



- LOUBNA PLA DDS MSD
- KRISTOPHER WATTS DMD

Date: .....  Please call Patient  
Referring Doctor: .....  Patient will call You  
Patient Name: .....  
Patient Phone: .....  
Appointment: .....

|    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |
|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|
| 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 |

### REFERRAL REQUEST:

- Endodontic Consult and Treat As Necessary
- Endodontic Retreatment
- Please Call After Consult/ Prior to Tx
- Endodontic Surgery

### EXISTING RESTORATION:

- Permanent Crown
- Permanent Crown with Temporary Cement
- Temporary
- Permanent Crown to be Placed/ Date:

### REQUESTED RESTORATION:

- Temporary
- Composite Buildup
- Amalgam Buildup
- Post Space
- Other: .....

**Comments:** .....  
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