



Apex Endodontics

Ryan W. L. Burleson, DDS, MS, PLLC

Introducing: _____

Referring Doctor: _____

Date: _____ Tooth: _____

Check all that apply:

- | | | |
|---|---|--------------------------------------|
| <input type="checkbox"/> Consult Only | <input type="checkbox"/> Root Canal Therapy | <input type="checkbox"/> Trauma |
| <input type="checkbox"/> Tooth already opened | <input type="checkbox"/> Retreatment | <input type="checkbox"/> Apicoectomy |
| <input type="checkbox"/> Pulp exposed | <input type="checkbox"/> Create post space | |

Please return with temporary:

- | | | |
|---|---------------------------------|---------------------------------|
| <input type="checkbox"/> Nothing under it | <input type="checkbox"/> Cotton | <input type="checkbox"/> Sponge |
|---|---------------------------------|---------------------------------|

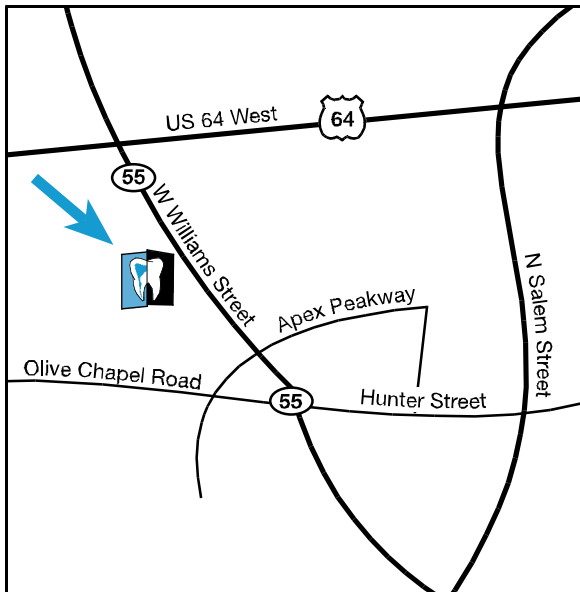
Special Instructions: _____

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**Conveniently located in Apex Medical Park between
Beaver Creek Commons and Wake Med Healthplex**