

PREMIER ENDODONTIC ASSOCIATES

www.premierendoassociates.com

Hinsdale

907 N Elm St, Ste 100
Hinsdale, IL 60521
(630) 655 ENDO (3636)
Fax: (630) 655-3767

Wheaton

1749 S Naperville Rd, Ste 100
Wheaton, IL 60189
(630) 653 ENDO (3636)
Fax: (630) 653-3663

Brian S. Wardell, D.M.D.
Bruna M. Burgener, D.D.S
Patrick A. O'Hara, D.M.D., M.S.
Diplomate of the American Board of Endodontics

Patient Name: _____ Date: _____

Appointment Information

Right								Left							
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

For Endodontic Therapy

For Consultation

For Retreatment

CBCT

Comments: _____

Post Room: Yes ___ No ___

X-rays attached

X-rays emailed (info@pendoh.com)

Referred By Dr. _____ Tel. No: _____

Please have this referral slip available when
scheduling and at the time of the appointment.