



# Quinte Endodontics

Root Canal and Microsurgery Specialists

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Dr. Gregory Soo Chan DDS, MSc, FRCD(C)

Date: \_\_\_\_\_ Appointment date & time: \_\_\_\_\_

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

Patient Home #: \_\_\_\_\_ Patient Cell #: \_\_\_\_\_

Referred by: \_\_\_\_\_

1	8	7	6	5	4	3	2	1		1	2	3	4	5	6	7	8	2
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4	8	7	6	5	4	3	2	1		1	2	3	4	5	6	7	8	3

**Referral request:**

- Consultation only
- Consultation and treatment
- Non-surgical root canal therapy
- Prophylactic root canal therapy
- Retreatment
- Apical surgery

**Post space required**

- Yes  No

**Radiographs:**

- Enclosed  Previously sent

**Patient may be interested in sedation:**

- Yes  No

**Crown/Bridge is cemented:**

- Temporarily  Permanently

**Medications prescribed:**

- Antibiotic \_\_\_\_\_
- Analgesic \_\_\_\_\_

- Please call me to discuss**

**Remarks:**

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

At Quinte Endodontics, we respect that our patients' time is valuable. For your convenience, your Patient Registration, Medical History, and Pain History can be completed online in advance of your appointment. To take advantage of this service, please contact our office to obtain your login ID and password.



[www.qendo.ca](http://www.qendo.ca)



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