



Upper Arlington Endodontics

David G. Oser, DDS | Shelly L. Lee, DDS, MS



1570 Fishinger Road
Columbus, Ohio 43221-2114



Tel: 614-459-2000



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Web: www.uaendo.com

Patient Name: _____

Referral Courtesy of:

Referring Doctor: _____

Phone: _____

Date: _____



Referred for:

- | | |
|--|---|
| <input type="checkbox"/> Endodontic Consultation | <input type="checkbox"/> Temporary Restoration Only |
| <input type="checkbox"/> Root Canal Therapy | <input type="checkbox"/> Place Core Build-up |
| <input type="checkbox"/> Retreatment | <input type="checkbox"/> Place Post and Core |
| <input type="checkbox"/> Endodontic Surgery | <input type="checkbox"/> Post-Space Preparation |

Special Instructions: _____



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Practice Limited to Endodontics



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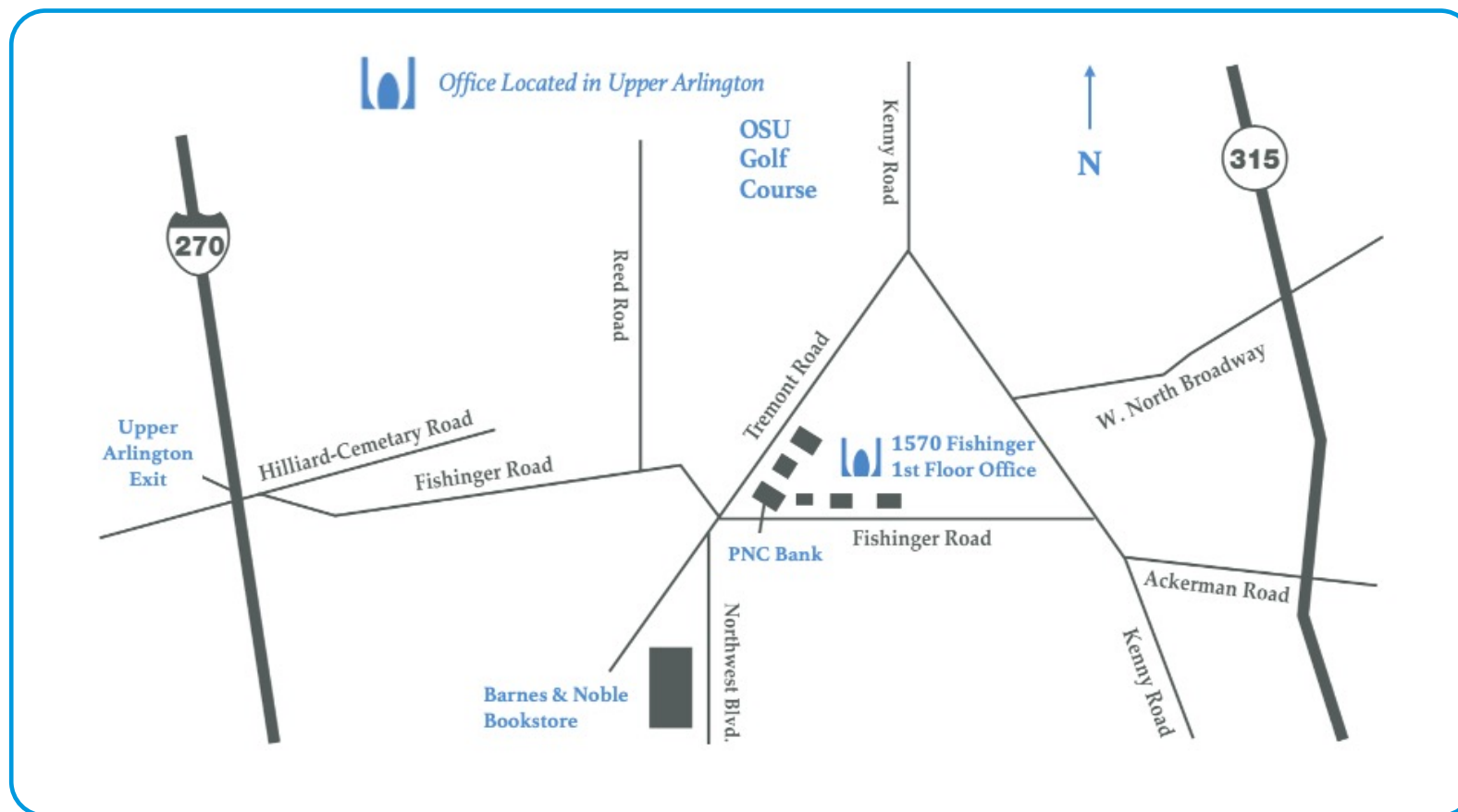
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