

4475 Adler Drive
Suite 103
Dallas, TX 75211

PATIENT REFERRAL FORM
DALLAS CITY ENDODONTICS

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(Practice limited to Endodontics only)

Phone: (214) 331-7275
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www.dallascityendodontics.com

★ We accept Medicaid / CHIP

★ In-Network with Most Insurance Plans

Patient Name: _____

Patient's Phone #: _____

Referred By: _____

Doctor's Phone #: _____

Tooth # or Area: _____

Criteria for Medicaid Patient:

- Age: 10 years and above
- Primary Endodontic Treatment only (No Retreatments)
- Closed Apex only (No Apexification)

ENDODONTIC CONSIDERATIONS
<input type="checkbox"/> Pain / Discomfort
<input type="checkbox"/> Periapical radiolucency
<input type="checkbox"/> Pulp exposure
<input type="checkbox"/> Endodontic treatment initiated
<input type="checkbox"/> Previously Treated
<input type="checkbox"/> Trauma
<input type="checkbox"/> Please call before initiating treatment

TREATMENT REQUIRED
<input type="checkbox"/> Evaluation only
<input type="checkbox"/> Root canal treatment
<input type="checkbox"/> Retreatment
<input type="checkbox"/> Consider surgical endodontics
<input type="checkbox"/> Place temporary restoration
<input type="checkbox"/> Permanent build up
<input type="checkbox"/> Composite
<input type="checkbox"/> Leave post space

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	
R	32	31	30	29	28	27	26	25	24	23	22	21	20	19	18	17	L

Remarks: _____

Dallas City Endodontics

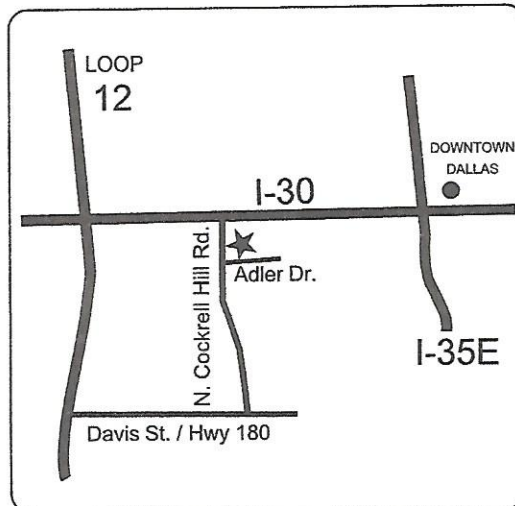
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East Bound I-30

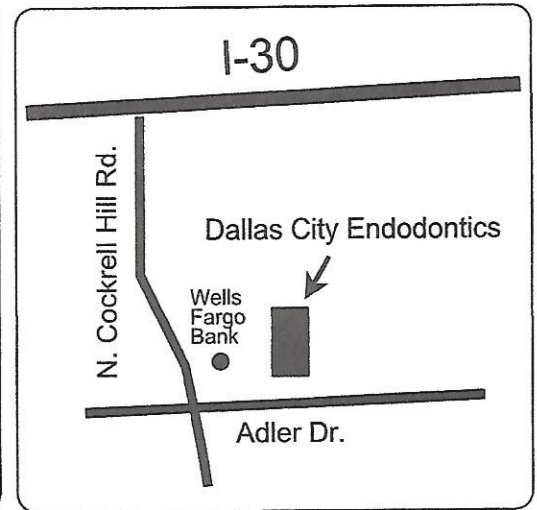
Take exit 39 toward Cockrell Hill Rd.
Stay on I-30 Frontage Rd.
Turn Right onto N. Cockrell Hill Rd.
Turn Left onto Adler Dr.
Office is on the Left behind Wells Fargo

West Bound I-30

Take exit 39 toward Cockrell Hill Rd.
Turn Left onto Cockrell Hill Rd.
Turn Left onto Adler Dr.
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AERIAL VIEW



DETAIL VIEW