



# Eastern Shore Endodontics

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PATIENT \_\_\_\_\_

ENDODONTIC TREATMENT FOR TOOTH # \_\_\_\_\_

SYMPTOMS: SENSITIVE TO:

- SINUS TRACT
- |                          |          |                          |          |
|--------------------------|----------|--------------------------|----------|
| <input type="checkbox"/> | PRESSURE | <input type="checkbox"/> | SWELLING |
| <input type="checkbox"/> | HOT      | <input type="checkbox"/> | FISTULA  |
| <input type="checkbox"/> | COLD     |                          |          |

CROWN OR BRIDGE CEMENTED:

- |                          |             |                          |             |
|--------------------------|-------------|--------------------------|-------------|
| <input type="checkbox"/> | TEMPORARILY | <input type="checkbox"/> | PERMANENTLY |
|--------------------------|-------------|--------------------------|-------------|

TOOTH WILL NEED TO BE:

- |                          |                               |
|--------------------------|-------------------------------|
| <input type="checkbox"/> | TEMPORARY RESTORATION         |
| <input type="checkbox"/> | RESTORE SIMPLE ACCESS OPENING |
| <input type="checkbox"/> | PREPARED FOR POST             |

WE HAVE PRESCRIBED \_\_\_\_\_

REMARKS \_\_\_\_\_

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