



# Central Kentucky Endodontics

Anna Smothers Dressman, DMD, MS  
 1001 Monarch Street Suite 210 Lexington, KY 40513  
 (p) 859-368-7337 (f) 859-305-5099 www.ckyendo.com

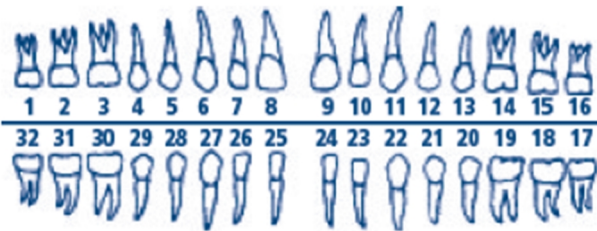
## Patient Information

Patient's Name: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Referring Dr.: \_\_\_\_\_

CIRCLE TEETH FOR ENDODONTIC CONSIDERATION



### Treatment Requested:

- Evaluate and treat as necessary
- Evaluation only
- Treatment necessary for restorability
- Prep post space
- Please call to discuss case

### History:

- X-ray revealed pathology
- Pulp exposure
- Deep filling
- Previous root canal treatment

Additional information or comments:

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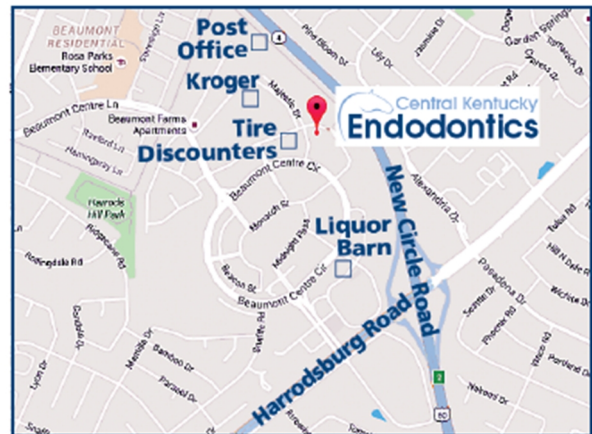
Appointment Date: \_\_\_\_\_ Time: \_\_\_\_\_

## Important Patient Instructions:

- Please bring this form to your appointment.
- We welcome you to complete your paperwork prior to your appointment by visiting our website.
- Payment is expected at the time of treatment.

## Please call our office to:

- Determine your insurance coverage and financial obligation.
- Inform us of any medical condition that may affect treatment.
- Discuss options for the management of dental anxiety.



Our office is located in Beaumont Center. 1001 Monarch faces Kroger and is across the street from the entrance of Tire Discounters.