



Jae Y. Oh DDS  
Jenna Lee DMD  
Louis Jerome DMD

Practice Limited to Endodontics  
Specialty Permit #6040 & #6629

2185 Lemoine Avenue #1M, Fort Lee, NJ 07024

Tel: 201-944-0797 Fax: 201-944-5080

bergenendo.com

PATIENT \_\_\_\_\_

REFERRING DOCTOR \_\_\_\_\_

#### TOOTH TO BE EVALUATED

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

#### TREATMENT TO BE COMPLETED

- ☐ Consultation / Diagnosis
- ☐ Elective (Prophylactic) Endodontic Therapy
- ☐ Evaluation and treat
- ☐ Endodontic surgery
- ☐ Take 3D Cone Beam CT

#### RESTORATIVE INSTRUCTIONS

- ☐ Place post and/or build up
- ☐ Leave post space

#### MISCELLANEOUS

- ☐ Call me about this case
- ☐ Crown / Bridge is cemented  
Temporarily or Permanently

#### RADIOGRAPHS

- ☐ Emailed
- ☐ Mailed

#### PLEASE CHECK PURPOSE FOR 3D CONE BEAM CT

- ☐ Dental Impaction
- ☐ Pathology
- ☐ Sinus Exam
- ☐ TMJ Exam R/L
- ☐ Dental Implants
- ☐ Jaw Fracture
- ☐ Other \_\_\_\_\_

#### COMMENTS

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

DOCTOR'S SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_



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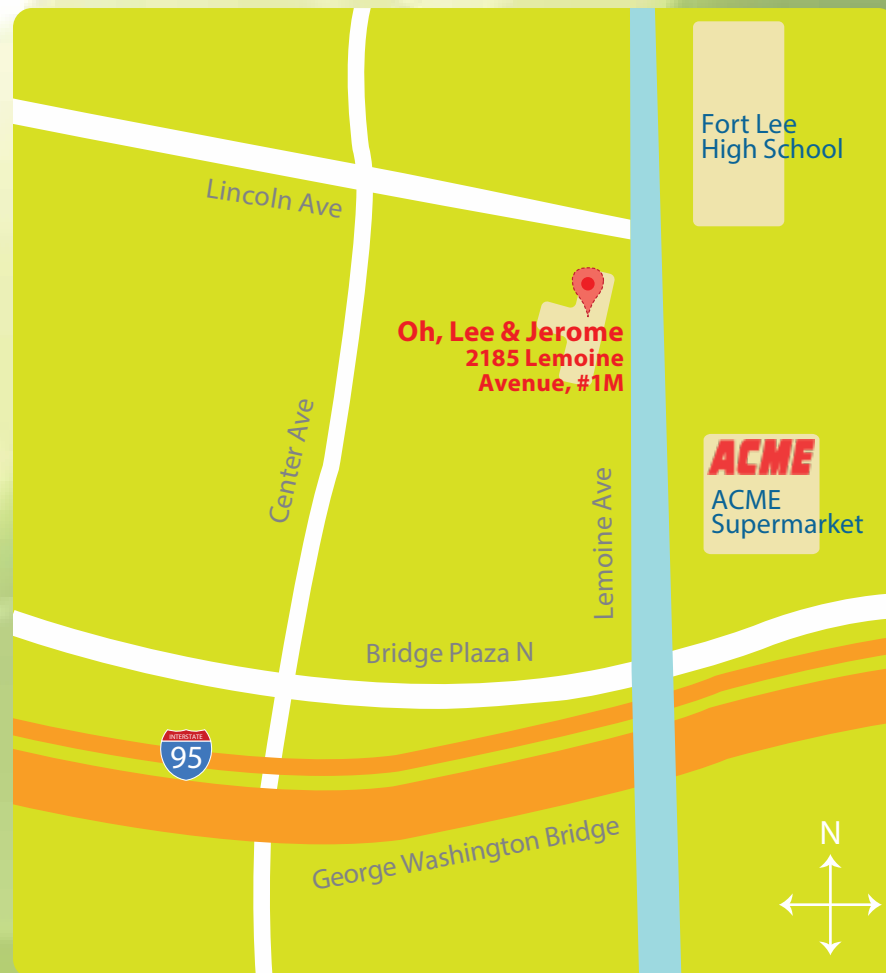
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#### DIRECTIONS



We have provided parking spaces:

**#113, #114, #115**

Please use only these spaces.