



Bay Endodontics - Oakland
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Bay Endodontics - Pleasanton
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- Phuong N. Quang, DDS, PhD*
- Yvonne Chiu, DDS, MS*
- First available appointment*

- Phuong N. Quang, DDS, PhD*
- Sahar Dadvand, DDS*
- First available appointment*

Patient name: _____

Phone: _____

Referred by Dr. _____ Date: _____

Tooth # _____ Appt date _____ Time _____

Reason for Referral:

- Consultation only
- Consult + Endodontic therapy
- Consult + Retreatment
- Consult + Apicoectomy
- RCT required for restoration

Pertinent history:

- Previous root canal
- Pain and/or swelling
- Radiographic lesion
- Pulp exposure

Radiographs:

- Sent by email/mail
- Given to patient
- Take at consult

- CBCT:**
- Tooth # _____ (focused-field)
 - Maxillary arch
 - Mandibular arch

Restorative Instructions:

- Place post and build-up
- Place build-up
- Leave post space
- Place temporary restoration

Treatment performed:

- Root canal initiated
- Recent restoration
- Antibiotics prescribed
- Pain medication prescribed

Sedation:

- Nitrous oxide
- Oral anxiolytic sedatives

- Panorograph only

Comments

Please call to discuss case

Send more referral forms

Please give 48 hours notice if you are unable to keep your appointment.

See reverse for Maps, Directions and **Free Parking** location.