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**Jonas G. Dale, DDS, MS**  
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Patient Name: \_\_\_\_\_ DOB: \_\_\_\_\_

Insurance Provider: \_\_\_\_\_ Member ID: \_\_\_\_\_

Phone: (H) \_\_\_\_\_ (C) \_\_\_\_\_ (W) \_\_\_\_\_

Referring Doctor: \_\_\_\_\_ Date: \_\_\_\_\_

|                              |          |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |    |          |
|------------------------------|----------|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----|----------|
| <b>TOOTH TO BE EVALUATED</b> | <b>R</b> | 1  | 2  | 3  | 4  | 5  | 6  | 7  | 8  | 9  | 10 | 11 | 12 | 13 | 14 | 15 | 16 | <b>L</b> |
|                              |          | 32 | 31 | 30 | 29 | 28 | 27 | 26 | 25 | 24 | 23 | 22 | 21 | 20 | 19 | 18 | 17 |          |

**REASON FOR REFERRAL**

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Carious Pulp Exposure | <input type="checkbox"/> Endodontic Treatment Required for Proper Restoration | <input type="checkbox"/> Periapical Radiolucency Present |
| <input type="checkbox"/> Sensitivity           | <input type="checkbox"/> Endodontic Retreatment                               | <input type="checkbox"/> Swelling Present                |
| <input type="checkbox"/> Spontaneous Pain      | <input type="checkbox"/> Endodontic Surgery                                   | <input type="checkbox"/> Sinus Tract Present             |

**RADIOGRAPHS**

- Emailed     Mailed     Given to Patient

**RESTORATIVE TREATMENT PLAN**

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- Place Temporary Restoration Only  
 Place Post  
 Place Final Restoration in Access Cavity

**MISCELLANEOUS**

- Please Call Me About This Case  
 Prior to Consult  
 Following Consult  
 Crown/Bridge is Cemented:  
 Temporarily  
 Permanently  
 Please Send Additional Referral Forms

**SPECIAL INSTRUCTIONS**

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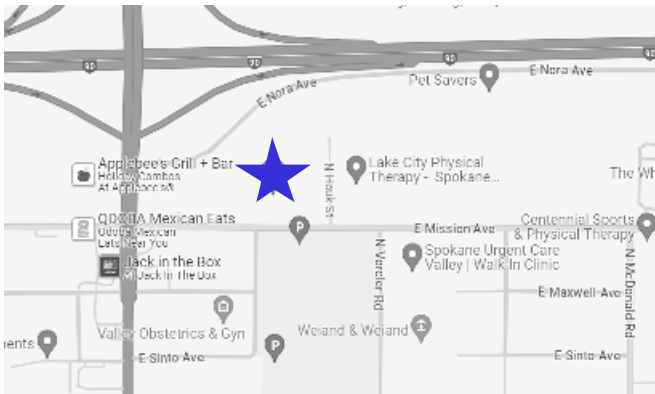
**INSTRUCTIONS FOR PATIENTS**

If you have dental insurance, please bring your insurance card to your appointment. Fees are payable at the time of treatment. All minors must be accompanied by a parent or legal guardian.

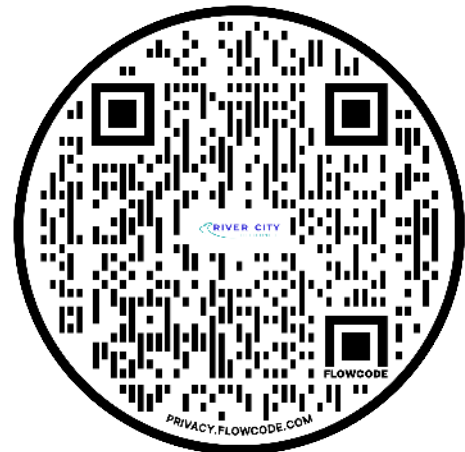


**WE LOOK FORWARD TO YOUR VISIT WITH US!**

Scan the QR code below for directions to our office.



Located across the street from Multi-Care Valley Hospital.



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