

# ENDODONTICS

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Introducing: \_\_\_\_\_ Date: \_\_\_\_\_

For Endodontic Treatment on Tooth Number: \_\_\_\_\_

- |   |   |
|---|---|
| <input type="checkbox"/> Elective Endo    | <input type="checkbox"/> Caries Exposure          |
| <input type="checkbox"/> Post Space       | <input type="checkbox"/> Previous Pulpotomy       |
| <input type="checkbox"/> Retreat or Apico | <input type="checkbox"/> Eval & Treat As Required |

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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		

Comments:

Referred By: \_\_\_\_\_

**HWY 40**



**HWY 270**

**HWY K**

Mexico Rd.

Jungermann Rd.

QUEENS COURT

McClay

Harvester Rd.

**HWY 94**

Mid Rivers Mall Drive

**HWY 70**