



SYNERGY ENDODONTICS  
**DAVID LI, D.M.D. • JUNG LIM, D.D.S.**  
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 PRACTICE LIMITED TO ENDODONTICS AND MICRO-SURGERY

(Today's Date) \_\_\_\_\_

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

Patient's Phone: \_\_\_\_\_

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

Doctor's Phone: \_\_\_\_\_

Appt. Date: Time: \_\_\_\_\_

**Please Note: X-rays not necessary to send.**

- Eval # \_\_\_\_\_
- RCT # \_\_\_\_\_
- Surgical RCT # \_\_\_\_\_
- Re-treatment # \_\_\_\_\_

**Please Perform**

- Post Space
- Build-up

**Proposed Restorative Treatment Plan**

\_\_\_\_\_

**Patient was prescribed:**

Antibiotics \_\_\_\_\_

Analgesics \_\_\_\_\_

**Comments:** \_\_\_\_\_

\_\_\_\_\_

**I would appreciate:**

PHONE CALL WRITTEN REPORT

- Completion of Treatment
- Restorative Recommendation
- Other: \_\_\_\_\_

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 PALMDALE, CA 93551  
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 PALMDALEENDO@GMAIL.COM



American Association  
 of Endodontics  
 Specialist Member

**MAP ON BACK**

White-Patient Yellow-File

*Patient: Please plan on arriving 15 minutes early to your first appointment for paperwork, as we all try to be on time to the best of our ability*



**★ Our Office**