



ReGen Endodontics

BOARD CERTIFIED IN ENDODONTICS

Introducing _____ for endodontic consideration.

Referred by Dr. _____ Date _____

Patient Phone Number _____ D.O.B _____

TOOTH CHART

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

CIRCLE TEETH FOR ENDODONTIC CONSIDERATION

TO BE FILLED OUT BY DENTIST

- ☐ Endodontic Consultation
- ☐ Endodontic Therapy
- ☐ Endodontic Retreatment
- ☐ CBCT

- ☐ Seal with:
Amalgam Resin Temporary
- ☐ Post Space
- ☐ Other

COMMENTS

PATIENT WILL BE INSTRUCTED TO RETURN TO REFERRING DENTIST FOR FINAL RESTORATION

Minors (**under 18**) must be accompanied by parent or guardian. If you are unable to keep your appointment, we require that you provide a **24-hour notice**.

Xrays can be emailed to: (Morrisville) info@regen-endo.com | (Garner) info@garner@regen-endo.com

Please see reverse side for maps.



ReGen Endodontics

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PROVIDERS

DR. ALABBAS HUSSEIN DMD, MS

Diplomate, American Board of Endodontics

DR. SARAH HUSSEIN DMD, MS

Diplomate, American Board of Endodontics

LOCATIONS



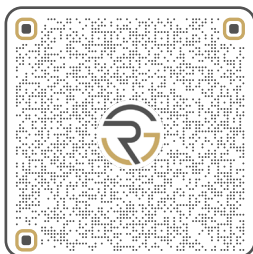
MORRISVILLE

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GARNER

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STE 120
Garner, NC 27529

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ACCEPTED INSURANCES

Aetna

Blue Cross Blue Shield

Delta

MetLife

Department of Defense

Cariengton

AlwaysCare

Humana

Guardian

Unicare

Connection

Principal

Sunlife / DHA / Assurant

United Concordia

