



**Miguel A. Roque, DMD, MMSc**

Introducing: .....

Appointment: .....  
DAY DATE TIME

Referred by Dr.: .....

Referring Dr. Phone #: .....

Consultation Only

Provide Treatment

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

Possible Treatment:

Root Canal Therapy

Retreatment

Root Resection (Apico)

Root Amputation

Post Space

Internal Bleaching

Other

Restore Access With:

Temporary

Composite

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