

## **Consent for Endodontic Evaluation**

- Disclosing any medical conditions, surgical history, medications and side effects/drug allergies is critical for a complete evaluation.
- The Endodontist must conduct a dental examination with clinical observation and testing to arrive at a definitive Endodontic diagnosis and provide a treatment recommendation and plan.
- Conventional digital dental radiographs are required for Endodontic evaluation, diagnosis, and treatment.
- In order to utilize our practice management and radiography software, we need to capture digital images using the software and equipment in our office. This allows for accurate image measurement and manipulation.
- A 3-D CBCT scan may be indicated at an additional fee.

## I have read and understand the above. I consent to Endodontic evaluation.

Patient Name (Printed)		
	Data	
Patient/Guardian Signature	Date _	