



College of Dentistry and Dental Clinics

Department of Endodontics

Endodontic Clinic

305 Dental Science Building West
Iowa City, IA 52242-1001
319-335-7469
Fax: 319-335-8788

FACULTY PRACTICE

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Carolina Cucco, DDS, MS, PhD

Manuel R. Gomez, DDS
Fabricio Teixeira, DDS, MS, PhD

Anne E. Williamson, DDS, MS

Date: _____

Patient legal name: _____ Date of birth: _____ Gender: _____

Patient address: _____

Patient phone: _____ Cell phone: _____

Name of dental insurance: _____ E-mail: _____

Diagnosis (Please be specific): _____

Requested consultation/treatment:

- Emergency treatment
Examination and evaluation
Non-surgical root canal treatment
Surgical root canal treatment

Existing crown on tooth? Yes No Retreatment? Yes No

Other (specify) _____

Follow-up care for this patient:

- Refer for restoration to UI College of Dentistry & Dental Clinics
Return to referring dentist
Refer for comprehensive care to UI College of Dentistry & Dental Clinics

Please contact the Endodontics Clinic to set up an appointment.

Level of care requested:

- Pre-doctoral students
Residents
Faculty

Radiographs preferred on film or compact disc:

- Enclosed None provided

To transfer patient records and radiographs electronically, please use our HIPAA compliant and secure website. Call Central Records at 319-335-7429 for instructions. Include your office name/phone number, patient name/date of birth, and date radiographs made.

Referring dentist: _____

Address: _____

Telephone: _____ E-mail: _____