

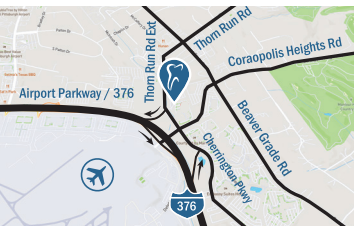


THREE RIVERS ENDODONTICS

Adam Feuer, DMD
Sumei Sharma, DDS
Morgan Palya, DMD, MS
Richard Craven, DMD
Winnie Zhang, DMD
Raquel Braga, DMD
Manasa Madoori, DMD
Rajeev Mahajan, DMD
Salil Kawatra, DMD

Welcome to Three Rivers Endodontics.

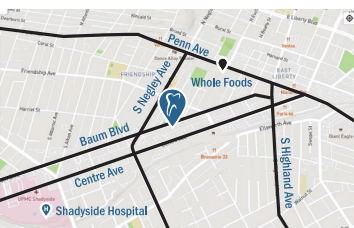
We would like to thank you for choosing our practice;
we are dedicated to providing our patients with
the highest level of care.



Moon Township Office

One Thorn Run Center
1187 Thorn Run Rd. Ext., Ste. 204
Moon Township, PA 15108
☎ 412.776.0001
☎ 412.774.2702

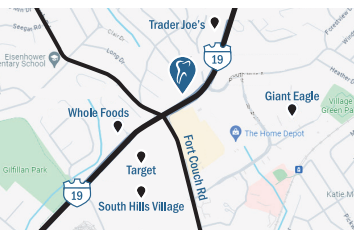
*Free Parking reserved for patients
is available near front entrance.*



Shadyside Office

5770 Baum Blvd., Ste. 150
Pittsburgh, PA 15206
☎ 412.776.0002
☎ 412.774.2702

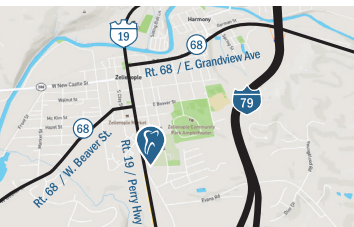
Free Parking is available onsite.



South Hills Office

Norman Centre
1720 Washington Rd., Ste. 202
Pittsburgh, PA 15241
☎ 412.776.0004
☎ 412.774.2702

Free Parking is available onsite.



Zelienople Office

508 S. Main Street, Ste. 101
Zelienople, PA 16063
☎ 412.776.0003
☎ 412.774.2702

Free Parking is available onsite.



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info@3riversendo.com

3riversendo.com

fax: 412.774.2702

Date of Referral _____ / _____ / _____

Date & Time of Appointment _____ **AM** **PM**

Patient name _____

Patient telephone (_____) _____ - _____

Patient email _____

Referring dentist _____

Name of practice _____

Office telephone (_____) _____ - _____

Tooth Number or Area

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

Evaluate only

Evaluate & complete endodontic treatment

Initial treatment

Re-treatment

Apical surgery

RCT for restorative purposes

Other _____

Prepare post space

Place final restoration

Other Comments

**Please bring this form and any other documents
from your dentist to your appointment.**