



LONDON ENDODONTICS

Dr. Anu Bhalla, D.M.D., FRCD(C), Dip. Endo.

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**849 Dundas Street,
London ON N5W 2Z8**

Tel: 519-438-0660 Fax: 519-438-0066
info@londonendo.com

Referral from Dr. _____

Contact Name: _____

Referring: _____

Phone: (H) _____ (C) _____

Email: _____

Tooth / Area of Concern

R	8	7	6	5	4	3	2	1		1	2	3	4	5	6	7	8	L
	8	7	6	5	4	3	2	1		1	2	3	4	5	6	7	8	

Referral Request:

- ☐ Consultation only ☐ Is this a Re-treatment?
- ☐ Consultation & Treatment ☐ Has RCT already been started?

If yes, When? _____

A film is being:

- ☐ Emailed
- ☐ No film

Patient has been put on:

- ☐ Antibiotics
- ☐ Pain Medication

If meds have been prescribed, please list: _____

Level of Discomfort:

- | | | |
|-----------------------------------|---|---|
| <input type="checkbox"/> None | <input type="checkbox"/> Severe | <input type="checkbox"/> Pressure sensitive |
| <input type="checkbox"/> Mild | <input type="checkbox"/> Cold sensitive | <input type="checkbox"/> Throbbing pain |
| <input type="checkbox"/> Moderate | <input type="checkbox"/> Heat sensitive | <input type="checkbox"/> Facial swelling |

Additional comments: _____



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Our office is located in the building named “**Old East Village Dental Specialists**” on the south side of Dundas Street. To enter our parking, it is best to use King Street and to either go through the Western Fair District parking lot, or use the laneway after King Street turns North.



Please allow 2 business days notice for any changes in your appointment times.
For your convenience, we accept payment via Visa, MasterCard, Debit and Cash.

Please note our office does not accept payment directly from dental insurance companies.

www.londonendo.com