



**East  
Hill  
Endodontics**

10920 SE 208<sup>th</sup> St  
Kent, WA 98031  
(253) 277-0898  
[info@easthillendo.com](mailto:info@easthillendo.com)



**Endodontic  
Center  
of Redmond**

15965 NE 85<sup>th</sup> St, Suite 100  
Redmond, WA 98052  
(425) 898-4604  
[info@endoredmond.com](mailto:info@endoredmond.com)

Ryan McNamara DDS

Patient Name: \_\_\_\_\_

DOB: \_\_\_\_\_

Patient Phone: \_\_\_\_\_

Call Patient:  Patient will call:

Appt. Date/Time: \_\_\_\_\_

Referring Doctor: \_\_\_\_\_

Date of Referral: \_\_\_\_\_

Special instructions: \_\_\_\_\_

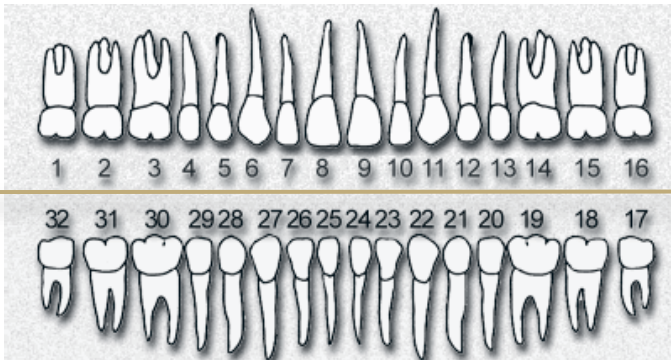
\_\_\_\_\_

CBCT (3D scan): \_\_\_\_\_

Please circle teeth for evaluation:

- Please evaluate for:
  - Diagnosis Only
  - Possible Fracture
  - Root Canal Treatment
  - Retreatment
  - Endodontic Surgery
- Patient is having:
  - Pain Swelling Sinus Tract
  - Hot/cold sensitivity
  - Chewing discomfort
- Radiograph revealed:
  - Decay Radiolucency
  - Fracture Resorption
- RCT was initiated
- RCT needed for restoration
- Prepare post space
- Place definitive restoration
- Internal Bleaching

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**Patient Information**

- Please bring this referral slip and current list of medications
- You will return to your dentist for a final restoration after completion of your endodontic treatment
- If applicable, please bring your dental insurance information
- Before arriving register online using the link and login information emailed by our office  
<https://securesite359.tdo4endo.com/PatientsLogin.aspx>
- Minor patients must be accompanied by parent or legal guardian
- Eat and take any medications as you normally would prior to your appointment

**Kent Location:**

Off of SE 208<sup>th</sup> St and Benson Hwy  
Access parking lot from SE 208<sup>th</sup> St  
Behind 24 HR fitness  
On lower level on left

**Redmond Location:**

On NE 85<sup>th</sup> St and 160<sup>th</sup> Ave NE  
Access parking lot from either street  
Across from Redmond regional library  
1<sup>st</sup> floor across from 911 Driving School