



One Endodontics

Saif Kargoli, DDS | Hashim Alhassany, DDS

www.1endodontics.com

Falls Church Office

313 Park Avenue, Suite 305
Falls Church, VA 22046
info@1endodontics.com
(703) 783-2345

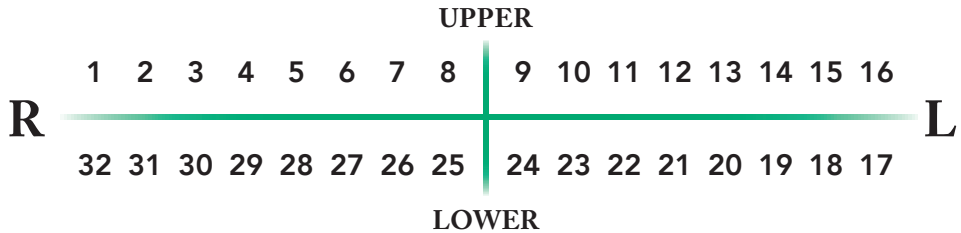
Gainesville Office

7500 Iron Bar Lane, Suite 203
Gainesville, VA 20155
gainesville@1endodontics.com
(703) 745-5698

Patient Name: _____ Date: _____

Referring Doctor: _____ Phone: _____

PLEASE CIRCLE TEETH TO BE EVALUATED



- | | |
|---|---|
| <input type="checkbox"/> Root Canal Therapy | <input type="checkbox"/> Root Canal Retreatment |
| <input type="checkbox"/> Apicoectomy Surgery | <input type="checkbox"/> Consultation |
| <input type="checkbox"/> Other Service / Special Instructions | <input type="checkbox"/> CBCT |
| <input type="checkbox"/> Same-day emergency | <input type="checkbox"/> Post Space |

Comments _____

APPOINTMENT INFORMATION

MON TUES WED THURS FRI SAT

DATE: _____ AT: _____ AM/PM

INSTRUCTIONS TO PATIENT

1. Please call to schedule your appointment.
Please refer below for phone numbers.
2. Please bring this referral form with you to your appointment.
3. Fees are payable at time of service.
4. Minors must be accompanied by parent or legal guardian.

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PARTICIPATING “DENTAL” INSURANCE PLANS:

- Aetna PPO
- Ameritas
- Anthem
- Blue Cross Blue Shield
- Careington – Discount Plan
- Cigna DPPO
- Delta PPO
- DNOA
- Dominion Choice
- Geha
- Guardian
- Humana
- Metlife PDP
- Principal
- Sun Life/DHA
- UnitedHealthcare
- Zelis

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