

Limited examination	
Pt name:	
Doctor:	Blood pressure:
Subjective findings <input type="checkbox"/> UR <input type="checkbox"/> UL <input type="checkbox"/> LR <input type="checkbox"/> LL <input type="checkbox"/> Broken tooth <input type="checkbox"/> Pain ___/10 Duration:	
Objective findings # ___ # ___ # ___ # ___ Cold Percussion Palpation Tooth sleuth Probing depths	
Assessment <input type="checkbox"/> Reversible pulpitis <input type="checkbox"/> Normal periapex <input type="checkbox"/> Irreversible pulpitis <input type="checkbox"/> aSAP <input type="checkbox"/> Necrotic pulp <input type="checkbox"/> SAP	
Plan	

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Completed today: <input type="checkbox"/> Limited exam (D0140) <input type="checkbox"/> Office visit for observation (D9430) <input type="checkbox"/> Follow-up evaluation (D0170) <input type="checkbox"/> Post-operative adjustment (D0170) <input type="checkbox"/> Urgent management of pain (D9110) <input type="checkbox"/> Peripical(s): #_____ <input type="checkbox"/> Pantomograph <input type="checkbox"/> CBCT: <input type="checkbox"/> small (D0364) <input type="checkbox"/> medium (D0367)
Need to schedule: <i>indicate tooth number, surfaces, & sequencing</i> <input type="checkbox"/> ACC: <input type="checkbox"/> 1-step <input type="checkbox"/> 2-step <input type="checkbox"/> Operative: <input type="checkbox"/> RCT: <input type="checkbox"/> Follow-up evaluation (____ days)
Need to coordinate: <input type="checkbox"/> Referral: <input type="checkbox"/> Rx:

Version 1.2

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