



ENDODONTIC ASSOCIATES

Specialists in Endodontics and Microsurgery

☐ DR. DAYNA DUKE

☐ DR. MYRON HILTON

☐ DR. BRANDON SCHULTZ

☐ DR. ZANE DUBBERSTEIN

☐ DR. BRENT HAYNES

First Name: _____

Last Name: _____

Contact Phone: _____

Referring Dentist: _____

Tooth #: _____

Radiographs: **Please email x-rays to info@eaokc.com**

Comments: _____

Requested Restoration:

☐ Post/Build-up ☐ Core Build-up Other: _____

Appointment:

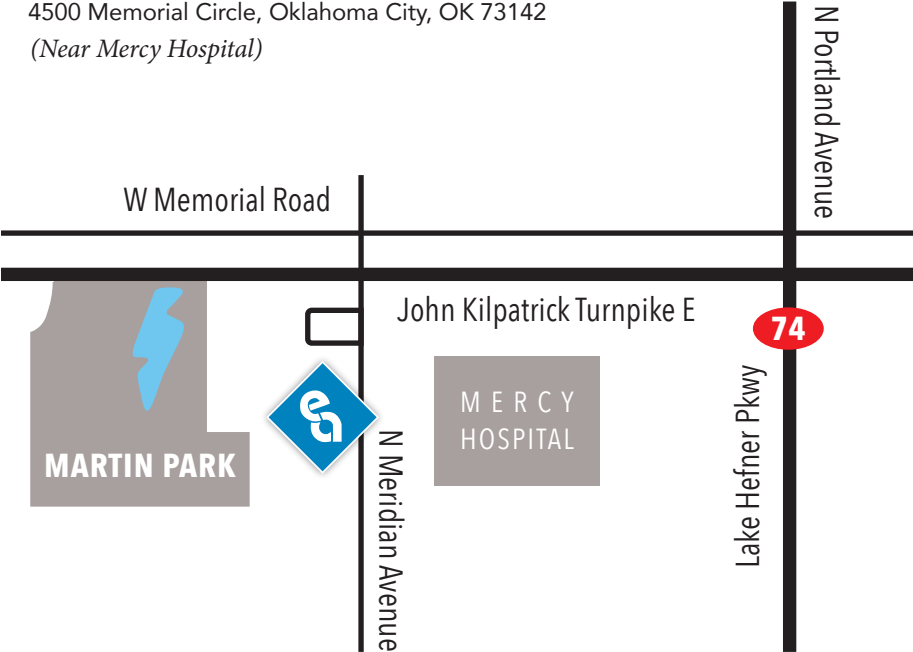
Date: _____ Time: _____

Location: ☐ **North** Oklahoma City ☐ **South** Oklahoma City

Please bring this card with you to your appointment.

North Oklahoma City

4500 Memorial Circle, Oklahoma City, OK 73142
(Near Mercy Hospital)



South Oklahoma City

8101 South Walker, Suite A, Oklahoma City, OK 73139
(Near Academy Sports and Southwest Orthopedic)

