

Identify missing teeth with an "X"		Examination and treatment plan - List in order from tooth no. 1 through tooth no. 32 - Use charting system shown.					For administrative use only
Tooth # or Letter	Surface	Description of service (Including x-rays, prophylaxis, materials used. etc.)	Date of Service MM   DD   CCYY	Procedure number	Fee		
					<b>Total Fee</b>		
Remarks for unusual services							