



# STEVEN G. STARR, DDS

board certified endodontic specialist

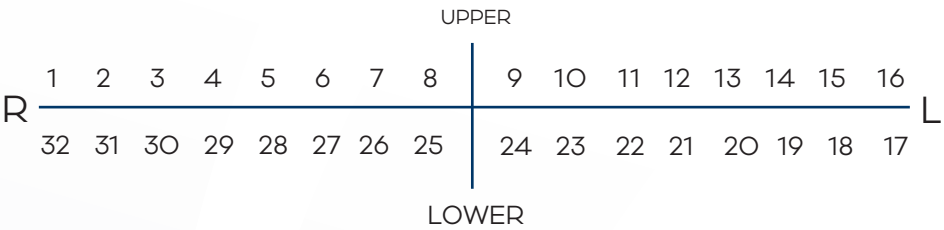
Date: \_\_\_\_\_

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

Referred by: \_\_\_\_\_

APPOINTMENT	
DATE:	_____
TIME:	_____ am/pm
Kindly give 24 hours notice when changing an appt.	

## PLEASE MARK TEETH TO BE TREATED



## TREATMENT DESIRED

- |                                         |                                                    |                                      |
|-----------------------------------------|----------------------------------------------------|--------------------------------------|
| <input type="checkbox"/> Consultation   | <input type="checkbox"/> Endodontic Treatment      | <input type="checkbox"/> Retreatment |
| <input type="checkbox"/> Apical Surgery | <input type="checkbox"/> Post Space Preparation    |                                      |
| <input type="checkbox"/> Build-up       | <input type="checkbox"/> Restore Endodontic Access |                                      |

## COMMENTS

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## Advanced Technology. Clinical Excellence.

1054 Riverside Dr., Suite 203  
St. George, Utah 84790

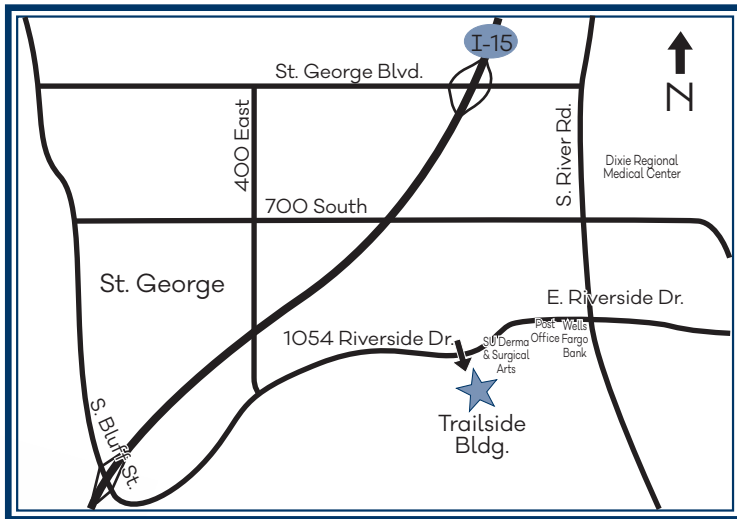
📞 435-674-ENDO (3636)

🌐 [www.starrendo.com](http://www.starrendo.com)    ✉ [office@starrendo.com](mailto:office@starrendo.com)

**Steven G. Starr DDS**  
Diplomate, American Board of Endodontics  
Board Certified Root Canal Specialist



MEMBER SPECIALIST



## IMPORTANT INFORMATION

If you have a health condition that requires pre-medication with antibiotics, please let us know.

Patients 18 or younger must have a parent or guardian present to give written consent for treatment.

Your appointment block is reserved exclusively for your treatment. If you are unable to keep your appointment, please give us the courtesy of 24-hours advanced notice. Thank you for your consideration - we look forward to serving you!

## PAYMENT OPTIONS

We accept cash, check, debit cards, Visa, Mastercard, Discover and American Express. We also offer interest-free payment plans through Care Credit (pre-approval is required, but can be obtained in minutes by phone or online). We love to help our patients find a comfortable payment option - please let us know if we can be of assistance.

## IF YOU HAVE DENTAL INSURANCE

For your convenience we will file your insurance claim with the information you provide. Please understand that coverage amounts provided by your carrier should be considered an estimate only, and not a guarantee of coverage. Unless other arrangements have been made in advance, the patient (or guardian) is responsible for payment at the time of treatment. If you have any questions or concerns about your dental insurance, please let us know.

## ABOUT DR. STARR

Dr. Starr is a Board Certified Endodontist specializing in conventional and surgical root canal therapy. He received his DDS degree and completed an endodontic residency at the University of Southern California. He has over twenty-five years experience in dentistry and has been successfully treating patients in Southern Utah since 1994. He is an active member of the American Board of Endodontists, the American Dental Association, and the Utah and California Dental Associations.