

(Medical Transcription Sample Report)

MM/DD/YYYXYZ, S.RE: ABCDear Dr. XYZOn your kind referral, I had the pleasure of meeting and consulting with ABC on MM/DD/YYYY for evaluation regarding extraction of his mandibular left second molar tooth #18. This previously root-canaled tooth, now failed, is scheduled for removal. As per your request, I agree that placement of an implant in the #20 and #19 positions would allow for immediate functional replacement of the bridge which has recently been lost in this area. I have given Mr. ABC an estimate for the surgical aspects of this case and suggested he combine this with your prosthetic or restorative fees in order to have a full understanding of the costs involved with this process.

We will plan to place two Straumann implants as per our normal protocol, one each in the #19 and 20 positions, with the #19 implant being a wide-neck, larger diameter implant. I will plan on providing the prosthetic abutments, the lab analogue, and temporary healing cap at the end of the four-month integration period. If you have any additional suggestions or concerns, please give me a call.Best regards,