Factors for Successful Crowns Study

Discontinuation

Discontinuation Date: ______/_____/____/2015

Complete this form to record study discontinuation.

Reason for patient discontinuation from the study (Check all that apply):

☐ Tooth was extracted
☐ Tooth became symptomatic or required endodontics
☐ No longer physically/mentally able to continue attending visits with a study dentist
☐ Cannot locate or contact participant
☐ Death
☐ Moved
☐ No longer willing to continue attending visits with a study dentist
☐ Other, (specify): ________________________________________________