

**EVERGREEN FAMILY DENTISTRY, P.C.**

**TROY A. FOX, D.D.S.**

3720 Evergreen Parkway - P.O. Box 3958 - Evergreen, CO 80437-3958

Phone: 303. 674.3591 Fax: 303. 674.9650

**INFORMATION AND CONSENT FOR ROOT CANAL TREATMENT TOOTH # \_\_\_\_\_**

Root canal therapy is a procedure to retain a tooth that is abscessed. It is also a method for saving a tooth whose nerve is damaged by decay, a large filling or a minor crack. Without root canal therapy the tooth may otherwise require extraction.

All teeth cannot be saved by root canal therapy, but our rate of success has been shown to be well over 90%. Root canal therapy is a biological procedure, so it cannot be guaranteed. Occasionally a tooth which has had root canal therapy may require re-treatment, surgery or even extraction. A successful treatment should produce a tooth that is healthy and comfortable indefinitely, although still subject to cavities and gum disease. Because treated teeth are more brittle than untreated teeth, it is advisable to have a protective restoration (full crown) to guard against breaking and splitting a tooth used in heavy biting pressure. The crown is done after the root canal is completed and is not part of the root canal procedure or fee.

Root canal treatment involves the removal of infected or inflamed tissue from within the tooth so as a healthy condition may be regained. The root canals are cleansed, disinfected and filled to eliminate any spaces where infection or inflammation might occur again. Occasionally two or three visits are required to complete the treatment. Following each appointment it is normal for the tooth to be tender or sore for a period of a few days. Usually over the counter pain medication such as, Aspirin, Ibuprofen or Aleve taken as prescribed by the dentist will be sufficient to relieve any discomfort, but if more severe problems arise, please call my office. Occasionally a narcotic pain medication and/or antibiotic may be prescribed.

**TREATMENT RISKS:** Performance of root canal therapy carries certain inherent risks, including, but not limited to:

The metal instruments used to locate and file the canals can separate (break) off in the canal and necessitate the need for referral to an Endodontist to have the root canal finished. This rarely occurs but in most instances when it does the tooth can be treated successfully.

A calcified or crooked canal could create a need for a specialist to complete the treatment of the tooth.

Decay from within the tooth or infection from outside the tooth in the furca region of the roots (where the roots join) could cause a perforation and necessitate the need for an extraction of the tooth.

**POST OPERATIVE INSTURCTIONS:** The tooth should be given rest. Avoid chewing on that side if at all possible until treatment is completed. Do brush your teeth normally, however, including the tooth under treatment. You may eat or drink anything you like during this period, excluding alcohol if you are on a prescribed narcotic pain medication.

**RESTORATION:** On most teeth, especially those with large parts of the tooth missing and those heavily involved in chewing, we advise a post into the root area to help support the filling and eventual crown. Again, the post buildup or final filling is done after the root canal is completed and is not part of the root canal procedure or fee. A porcelain or gold crown is the final restoration of choice for teeth treated with root canal therapy.

I hereby understand the risks of root canal treatment as described above, and that the risks are not limited to this discussion. I accept these risks and give permission to Dr. Fox to perform the root canal.

Signature: \_\_\_\_\_  
(patient, or parent/guardian if minor)

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

Doctor: \_\_\_\_\_

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