Patient Consent for Endodontic Procedures

This document briefly explains endodontic (root canal) treatment including some of the risks and benefits. Please read the following paragraphs and feel free to discuss any aspect of your treatment. Upon completion, please sign at the bottom where indicated. I agree to and understand the following:

• Root canal treatment is a procedure that allows one to keep a tooth that might otherwise have to be removed. An endodontic examination is performed to determine the specific need for root canal treatment. Root canal treatment involves making an opening in the tooth to remove damaged soft tissue that runs through the root. This space of tissue is then cleansed, disinfected, and sealed with dental filling material. Root canal treated teeth generally act and feel just like other teeth and may have an excellent chance of remaining in the mouth for as long as other teeth.

• Despite the high success rate of root canal treatment, as with any branch of medicine or dentistry, no guarantee of success can be given. On occasion, a tooth that has received root canal treatment may require additional treatment or extraction at additional fees.

• If a patient chooses not to proceed with root canal treatment, there is risk of increasing pain, infection, bone and tissue destruction, and extraction. Removal of a tooth may require other types of dental procedures at additional fees.

• Re-treating a previous root canal or treating a root canal started in other dental offices may have different outcomes. There is no guarantee of success.

• Possible complications encountered during root canal treatment include but are not limited to:
  o Curved canals, curved roots
  o Paresthesia or anesthesia of associated nerve tissue
  o Crown or root fracture (tooth cracking)
  o Calcification (narrowing) in root canal space
  o Pain during or following treatment
  o Swelling or discoloration of the soft tissue (gum tissue) or hard tissues (tooth)
  o Procedural difficulties such as instrument breakage, root perforation (artificial hole in the tooth), or overextension of the filling material beyond the confines of the tooth root

• Following treatment, tenderness in the area is common for 48-72 hours. Some cases require even more time for symptoms to subside.

• Periodic re-evaluation of the tooth is recommended following the completion of the root canal.

• After root canal treatment the new filling or crown must be placed. Failure to do so increases the risk of crown or root fracture which could result in extraction of the tooth.

• I understand that some medications, drugs, anesthetics, and prescriptions taken for this procedure may cause drowsiness and lack of awareness and coordination. I further understand that these drugs and anesthetics may cause unanticipated reactions, which might require medical treatment. I also understand that alcohol or other drugs can increase these effects. I have been advised not to operate any vehicle or machinery until I have fully recovered from the effects of these medications.

I understand that after root canal treatment I will need to return to my dentist for a new filling or crown. The root canal treatment fee does not include cost for the filling, crown, or fees for periodontal (gum) treatment.

Patient Signature __________________________________________ Date __________________