

HANNAHAN ENDODONTIC GROUP, P.C. ROOT CANAL INFORMED CONSENT

This disclosure is meant to make me better informed.

1. The purpose of root canal therapy is to retain teeth that otherwise would have to be extracted (pulled).
2. Treatment will require a series of x-rays and may require multiple visits. It is important that you keep your scheduled appointments; or infections may reoccur.
3. In most cases, there is only mild discomfort after treatment. This usually lasts 2-4 days and is usually controlled by ibuprofen, Tylenol or a prescribed medication.
4. Endodontic therapy has a high rate of success (approximately 90 - 95%). However, as with any medical or dental treatment, there is no guarantee of success for any length of time for a particular tooth.
5. During treatment, complications may be discovered which make treatment impossible, or which may require dental surgery. These complications may include: blocked canals due to filling or prior treatment, natural calcifications, separated instruments, curved roots, periodontal (gum) disease, splits or fractures of the teeth,
6. The most common complications include but are not limited to:
 - a. Continued infection requiring endodontic surgery or extraction at an additional cost.
 - b. Calcified canals or canals blocked by separated instruments requiring endodontic surgery or tooth extraction at an additional cost.
 - c. Pain requiring use of medication.
 - d. Fracture (breaking) of the root or crown of the tooth during and after treatment (It is recommended that teeth be crowned (capped) following root canal treatment. If tooth already has a crown, it may have to be replaced due to decay or loss of structural support. Porcelain crowns are subject to breakage and may also have to be replaced).
 - e. Side effects and possible reactions to medication.
 - f. Tenderness of the tooth following treatment, gum disease, physical stress from chewing, or poor healing of your body.
 - g. Occasionally a tooth which has had root canal therapy may require retreatment, surgery or even extraction.
7. The restoration of your tooth (filling, crown, etc.) will be performed by your general dentist (Our fee **does not** include these services).
8. Other treatment choices include: no treatment, waiting for more definite development of symptoms, tooth extraction.

*****Risks involved in these choices may include pain, infection, swelling, loss of teeth and possible spread of infection to other areas.

I have read the above information and understand the possible risks involved and agree to proceed with the recommended root canal therapy, after having had a full explanation of the proposed treatment.

Signature: _____

Date: _____