

POST TREATMENT DISEASE REQUIRING APICAL SURGERY



DIAGNOSIS: # 19

PULPAL: NECROTIC

PERIAPICAL: SYMPTOMATIC APICAL PERIODONTITIS

INSTRUMENTATION:

ORIFICE OPENING: PROTAPER SX

GLIDE PATH: 10 FILE AND PROTAPER S1

**FINAL SHAPE: PROFILE SERIES 29 (COMBINATION OF 0.04 AND 0.06 TAPER,
MASTER APICAL FILE .279)**

**IRRIGATION: 2.5% SODIUM HYPOCHLORITE WITH 17% EDTA TO REMOVE SMEAR
LAYER**

**OBTURATION: WARM VERTICAL DOWNPACK WITH THERMOPLASTIC GUTTA PERCHA
BACKFILL.**

**COMMENTS: THE NECROTIC PULP WAS REMOVED AND THE CANALS WERE SHAPED AND
SEALED TO THE ROOT ENDS WITHOUT COMPLICATION (IMAGES 1 & 2). AT THE SIX
MONTH RECALL, TOOTH # 19 WAS SLIGHTLY TENDER TO BITE PRESSURE AND A WELL
DEFINED RADIOLUCENCY WAS PRESENT AT THE MESIAL ROOT APEX (IMAGE 3). AN
APICOECTOMY WAS COMPLETED ON THE MESIAL ROOT AND AN ISTHMUS WAS SEALED
BETWEEN THE TWO CANALS WITH MTA CEMENT (IMAGE 4). ONE YEAR FOLLOW UP
EXAMINATION SHOWS COMPLETE HEALING AND TOOTH IS ASYMPTOMATIC (IMAGE 5).**