





To Dr X – Via Email

31st May 2023

Dear Dr X,

Re: WX XX/XX/1990

Further to Stella 's email report, I have now initiated retreatment of W's UR6. She reported the tooth to have remained asymptomatic since its last flareup.

I decided that there would be little to be gained from removing the crown and it was likely to make life more difficult restoring the tooth. I was rather hoping that the internal core was a mixture of materials, but it became quickly obvious that it was cast gold and removal through the tooth was going to be a long and hard process.

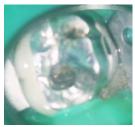
I was able to drill my way through the gold and ultrasonic out the three gold posts in the mesiobuccal, distobuccal, and palatal canal orifices. I located three mesiobuccal canals and prepared these together with the distobuccal

and palatal canals to the estimated working lengths. Enhanced disinfection and debris removal was carried out using Laser assisted









irrigation. Pulsed laser energy creates cavitation and shockwaves through the irrigants and that push them into the canal complexities. Following this, I placed an inter-appointment medicament of calcium hydroxide. Access was temporarily sealed with a cotton pledget and IRM.

I am rather hoping that firstly the amount of disturbance to the tooth does not trigger off a flareup, but also that the crown manages to stay in place for the next 4 to 6 weeks whilst the medicament further disinfects the canal system.

W will return after that time and following further preparation to an apex locator zero readings, and further laser assisted irrigation, I will obturate the canals and place a new internal post-core.

I will keep you updated with the progress.

Many thanks again for this kind referral and the opportunity to work with you.

Best Wishes,

Richard S. Kahan Specialist Endodontist

Director, Academy of Advanced Endodontics

PATIENT CLINICAL RECORD pg. 2

Treatment Grid

UR6\MB\MB

UR6\P

Ultracal

Ultracal

UR6

CANAL OBSERVATIONS

	Pulp Status	Foreign Material	
UR6\MB	Infected	GP	
UR6\MB\MB2	Infected		
UR6\MB\MB	Necrotic		
UR6\P	Infected	GP	
CANAL PREPARATION			
	FM		Worked to
UR6\MB	Removed		SX
UR6\MB\MB2			SX
UR6\MB\MB			SX
UR6\P	Removed		SX
CANAL DRESSING			
	Medicament		
UR6\MB	Ultracal		
UR6\MB\MB2	Ultracal		