Our Program

- Endodontic diagnosis
- Case selection & treatment planning
- Analgesia and anesthesia
- Managing endodontic emergencies& flare-ups
- Isolation, access and locating canals
- Hand and rotary instrumentation
- Working length troubleshooting
- Irrigation protocol and strategies
- Obturation
- Post endodontic restorations
- Managing endodontic mishaps
- Decoding the Mb2 enigma
- CBCT endodontic applications
- Efficiency, productivity & scheduling

THE FACULTY

Rajiv G. Patel BDS, DDS Suman Bathina BDS Richard B. Finley DMD Shreyas Oza BDS,DDS, MSD Amruta Mahajan BDS

COURSE LOCATION:

Endodontic Excellence facility located 15 mins from DFW airport.

A comprehensive practical approach to root canal treatment for beginners & a refresher for the seasoned clinicians.

Endodontic Excellence 4421 Long Prairie Road, Suite 400, Flower Mound, TX 75028







Endodontic

Success for the

General Dentist

Comprehensive Hands-On Course

\$1695 14 CE credits AGD subject codes: 070,200,340

limited participants with interactive hands-on education & access to online community

Course objectives

The course is designed to provide the participant with an evidence based understanding of the following:

- Systematic diagnostic protocol
- Smart case selection and treatment planning
- Pain management with discussion of anesthesia, specific to hot tooth management.
- Analgesics and Antibiotics
- Managing endodontic emergencies and preventing flare-ups and mishaps
- Importance of isolation, tips, tricks and armamentarium
- Access preparation and locating canals.
- Understanding endodontic anatomy
- Working length determination and troubleshooting
- Predictable instrumentation with hand and rotary instruments
- Irrigation protocol and strategies
- Obturation and troubleshooting
- Post endodontic restorations, post placement when and how?
- Endodontic applications of cone beam computed tomography.
- Practice management aspects to improve efficiency and productivity

Registration details

Venmo @endosucces or

Check in favor of "Share Study Club LLC"

Cancellation fees assessed

Supplies & lunches are included.

Participants are encouraged to bring their magnification loupes.

Participants are required to bring unmounted extracted teeth for the hands-on participation.







Share Study Club
Nationally Approved PACE Program
Provider for FAGD/MAGD credit.
Approval does not imply acceptance by
any regulatory authority or AGD endorsement.
9/1/2022 to 8/31/2025
Provider ID# 371656

How to register:

sign up via email and join us!
Limited space - reserve your seat today!
visit www.endoxl.com
email us at endoxlsuccess@gmail.com
call us at (323)899-2195

Vitals- BP, Review of Update Medical Pulse, RR, systems, ASA Bleeding Chronic pain conditions history Temperature, class problems Medical history Analgesics / Ethnicity -Rx, OTC, Pre-medication Hair color? narcotics prior to family history Allergies Herbals, drug required appointment <u>interactions</u> Dental Anxiety History of Hyperacttive Descriptors for character of "pain" Silent stress reduction difficult Chief complaint pulsating, throbbing, lancinating, gag reflex Trauma anesthesia protocol sharp, shooting, burning Dental History - h/o CC, Where? When? How? What? Recent dental Tx, H/o Priors - historical Location: Where starts and Don't assume Open -ended trauma, orthodontic tx, information (radiographs, travels? Duration? Intensity? tooth problem, questions bleaching,recent treatment experience) Frequency? Initiating /Relieving prove it! restorative factors Alleviating Changes Can patient Associated **Signs** and with drugs Superficial or **Symptoms** localize site of VAS 0-10 factors relieving NSAIDS, deep pain pain- Ask to point numbness, past & present Tylenol factors tearing etc EO Exam - Symmetry, swelling, color Pain with changes, sinus tracts, scars, LN's check for h/o postural Recap -tender/enlarged, thyroid gland, salivary Sinusitis changes glands, extent of jaw opening, TMJ, MOM's - tenderness/triggers Soft tissue- swelling: IO Exam - palpation, Oral cancer screening Occlusion fluctuant/indurated, sinus percussion, periodontal probings, : especially ventral &/or tracts (trace them) trauma. mobility, swelling, tori, sinus tracts, scars lateral tongue surfaces Hard tissue - Bone lintererences, lack (EO/IO) (B/L) and floor of mouth -expansion, tori, & Teeth of (restorations, caries, cracks) Staining Teeth -caries. fractures Periodontal restorations, cracks, status Bite -tests -Vitality vs **Sensibility** chipped / wear facets disease, recession, Tooth Slooth/ testing - Thermal (para-function signs), Transillumination abscess, bone Q-tips (cold/hot), Electric pulp atypical anatomy, loss, mobility, test (EPT) supernumerary, fremitus grooves, open contacts Magnification. Illumination Subjective checklist Level on VAS (0-10) Pain Well localized Diffuse Elicited (cold, hot, chewing) Radiographs Normal Anatomy -**Spontaneous CBCT** Bone/ & Teeth Constant Fluctuant Intermittent **Dull ache Sharp shooting Throbbing** Atypical Anatomy (recent, long duration) Onset Progression (F/I/D) **Aggravating factors** Re-produce Relieving factors (what drugs, cold water) **Chief Complaint Associated factors** Establish Diagnosis Watchful Don't forget the Cause and Differential waiting! Zebras! Effect Diagnosis Tx Modifications -Treatment Patient Desires/ sedation, **Prognosis** plan - present Expectations medications, tests and future (missing teeth) Informed consent /decision - RBA ENDO DONTIC SUCCESS

SEMINARS

Normal anatomical Radiographic features - overlapping interpretation or critical structures Digital Periapical Trauma -Request Tracing sinus Suspected radiograph - Straight Bite-wings Adjacent teeth additional radiographs tracts - gp tooth angulated/occlusal/soft direction or angulated tissue Pulp chamber - location/height Type and Quality of Resorption Caries previous pulp caps, pulp Internal/External restorations, occlusal or coronal stones/calcification of pulp tissue, proximity to pulp resorption interproximal position of pulp horns /radicular Well circumscribed Periodonal ligament Lamina dura periodontal bone /diffuse apical Bone marrow lateral/furcal space- uniform or (continuous) spaces/ loss - alveolar radiolucency or Radiolucency intact / disrupted widened trabecular pattern crest levels radiopacity Roots - number, Maturity status Canal -Crown/ root Crown/root configuration, Fast -break Crown/root ratio degree of of Apex fracture perforation curvature, width -closed/open location, calcification Prior root canal -Approximate dimensions Symmetry of SLOB Rule Type and quality of obturation in mm. for Radiolucency / obturation: length, Root length density, materials, posts **CBCT** applications Treatment Surgical and planning non-surgical Apical periodontitis-Radiolucency -Sinus related Vertical root increased association with teeth pathology fractures? sensitivity or separate, undiagnosed pathosis Trauma - fractures: Resorption -Coronal/ Apical alveolar, root Perforations External resorption (horizontal, oblique) /internal

Proximity to critical

structures - IAN,

,Maxillary sinus,

Healing /outcome

assessment



Pre-operative

Intra-operative

Anatomical

assessment -

missed canals, calcified canals