

ANTERIOR ENDODONTIC PROCEDURE

ADEX 2022

CRITICAL ERRORS

Wrong tooth/surface treated	No	Yes
The crown of the tooth has been reduced	No	Yes
Any part of the tooth is fractured during instrumentation or obturation	No	Yes
Any part of the tooth is perforated	No	Yes
Procedure not challenged	No	Yes

ACC = Adheres to Criteria SUB = Marginally Substandard DEF = Critical Deficiency

ACCESS OPENING	
Placement	
ACC	Placement of the access opening is on the lingual surface directly over the pulp chamber and allows for pulp horns to be fully removed and complete debridement of the pulp chamber and straight-line access to the root canal system.
DEF	Placement of the access opening is NOT over the pulp chamber and/or does NOT allow complete debridement of the pulp chamber or access to the root canal system.
Size	
ACC	A. The incisal aspect of the access opening is ≥ 2.0 mm from the incisal edge which provides for a fully supported incisal edge. B. The cervical aspect of the access opening is ≥ 3.0 mm from the lingual CEJ which provides for a fully supported cingulum. C. The widest portion of the preparation mesio-distally is $\leq \frac{1}{2}$ of the lingual surface which provides for fully supported marginal ridges (approximately 1.0 mm). D. Size of the access opening allows for complete removal of pulp horns.
DEF	A. The incisal aspect of the access opening is < 2.0 mm from the incisal edge which compromises the incisal edge. B. The cervical aspect of the opening is < 3.0 mm from the lingual CEJ which compromises the cingulum. C. The preparation compromises the mesial and/or distal marginal ridge(s) (≤ 1.0 mm). D. The size of the access opening does NOT allow for removal of pulp horns.
Internal Form	
ACC	From the lingual surface to the cervical portion, the internal form tapers to the canal opening with slight ledges.
DEF	Internal form exhibits excessive gouges, which compromise the integrity of the tooth.
CANAL INSTRUMENTATION	
Cervical Portion	
ACC	Canal is shaped to a continuous taper to allow adequate debridement and obturation and the cervical portion of the canal is of appropriate location and size to allow access to the apical root canal system.
DEF	Cervical portion of the canal is grossly over-prepared affecting the integrity of the tooth structure.
Mid-Root Portion	
ACC	Mid-root portion of the canal blends smoothly with the cervical portion without ledges or shoulders.
DEF	Mid-root portion of the canal has significant instrumentation irregularities that will compromise obturation.
Apical Portion	
ACC	Apical portion of the canal is prepared to the anatomical apex of the tooth or ≤ 2.0 mm short of the anatomical apex.
DEF	A. Apical portion of the canal is over-prepared beyond the anatomical apex. B. Apical portion of the canal is transported to the extent that the apical portion of the canal is not instrumented. C. Apical portion is under-prepared > 2.0 mm short of the anatomical apex.

ROOT CANAL OBTURATION	
Overfill/Underfill	
ACC	Root canal is obturated with gutta percha at the anatomical apex or ≤ 2.0 mm short of the root apex.
DEF	Root canal is obturated with gutta percha > 2.0 mm short of the anatomical apex or beyond the anatomical apex.
Voids in Gutta Percha	
ACC	Apical third of the obturation in the root canal is dense and without voids.
DEF	A. There are significant voids throughout the obturation of the root canal. B. There is no gutta percha present in the root canal. C. A material other than gutta percha was used to obturate the canal.
Filled above/below CEJ	
ACC	A. Gutta percha in the root canal is ≤ 3.0 mm apical to the CEJ when measured from the facial or gutta percha B. Gutta percha and/or sealer is/are evident in the pulp chamber extending ≤ 2.0 mm coronal to the CEJ when measured from the facial.
DEF	A. Gutta percha in the root canal is > 3.0 mm apical to the CEJ when measured from the facial. B. Gutta percha and/or sealer is/are evident in the pulp chamber extending > 2.0 mm coronal to the CEJ when measured from the facial. C. There is restorative material present in the pulp chamber.
Separated File	
ACC	File is not separated; or, file is separated in the root canal but does not affect obturation of the root canal.
DEF	A file is separated in the root canal and either prevents the obturation or allows obturation at a critically deficient level.