

# ENDODONTIC SURGERY

## MEDICAL ALERT

Date: \_\_\_\_\_ Tooth: # \_\_\_\_\_

S: CC " \_\_\_\_\_ "

O: HQR dated: \_\_\_\_\_  WNL Findings: \_\_\_\_\_  
 Time Out  Meds Reconciled/ Reviewed

Pain Scale: \_\_\_\_\_ / 10 BP: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_ Temp (°F) : \_\_\_\_\_ Resp: \_\_\_\_\_

History of Present Condition: \_\_\_\_\_

Informed Consents signed:  I&D  Extraction  Endodontic Surgery  Clinical Photos Grafts:  Bone  Membrane

P: Premedication:  N/A  \_\_\_\_\_ mg x \_\_\_\_\_ tabs  Oral Rinse \_\_\_\_\_  
 Other: \_\_\_\_\_

Anesthetic:  \_\_\_\_\_ mg Lidocaine \_\_\_\_\_ mg Epi  \_\_\_\_\_ mg \_\_\_\_\_ mg \_\_\_\_\_

\_\_\_\_\_ mg Marcaine \_\_\_\_\_ mg Epi  \_\_\_\_\_ mg \_\_\_\_\_ mg \_\_\_\_\_

Flap Design: \_\_\_\_\_ reflected from tooth # \_\_\_\_\_ to tooth # \_\_\_\_\_

Releasing incision(s) at tooth # \_\_\_\_\_ and tooth # \_\_\_\_\_

Ostectomy: Surgical handpiece under sterile saline irrigation. \_\_\_\_\_ mm root end resection of \_\_\_\_\_ root (s)

Removal of soft tissue lesion:  Biopsy submitted  None (see reverse for explanation)  No tissue recovered

Hemostasis of surgical site:  Not required  Direct pressure  \_\_\_\_\_ pellets, # placed: \_\_\_\_\_ # removed: \_\_\_\_\_  Collagen  
 Anesthetic soaked cotton pellets x \_\_\_\_\_  Other \_\_\_\_\_

Root End Preparation:  Not required  \_\_\_\_\_ mm deep using ultrasonic handpiece and sterile saline irrigation

Root End Filling:  Not required  Super EBA  white MTA  gray MTA  Other: \_\_\_\_\_

Final high volume lavage of surgical site with \_\_\_\_\_ ml of sterile saline (0.9% sodium chloride) solution

Bone Graft:  None  DFDBA  FDBA  Resorbable membrane:  Collagen  Other: \_\_\_\_\_

Flap Reapproximation: \_\_\_\_\_ minutes of pressure applied to promote adaptation and aid in hemostasis

Sutures:  None  Non absorbable (size/type): \_\_\_\_\_  
 Absorbable (size/type): \_\_\_\_\_

Drain:  None  Yes (type) \_\_\_\_\_ held in place with \_\_\_\_\_  absorbable sutures  
 non-absorbable sutures

Post-operative: BP: \_\_\_\_\_ / \_\_\_\_\_ Pulse: \_\_\_\_\_ Temp (°F): \_\_\_\_\_ Resp: \_\_\_\_\_

Post-op instructions reviewed with patient / escort and written copy provided to patient.  Ice Pack

SIQ until \_\_\_\_\_ at \_\_\_\_\_ hours  Light duty until \_\_\_\_\_ at \_\_\_\_\_ hours

Rx:  \_\_\_\_\_ mg. Disp \_\_\_\_\_ tabs. Take \_\_\_\_\_ tabs po q \_\_\_\_\_ h.

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Additional Notes (See Reverse):

Patient released with:  Escort  No Escort  Alert and oriented x3 to person, place and time at \_\_\_\_\_ hours. Dental Class:

Patient / Guardian informed of treatment provided and treatment planned.

Follow-up appointment on \_\_\_\_\_ at \_\_\_\_\_ hours Signature/Stamp: \_\_\_\_\_

Patient's Last Name:	First Name:	MI:	FMP / SSN:	Date of Birth:

