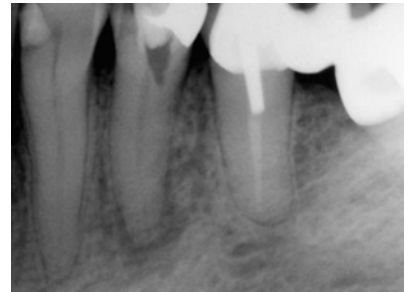
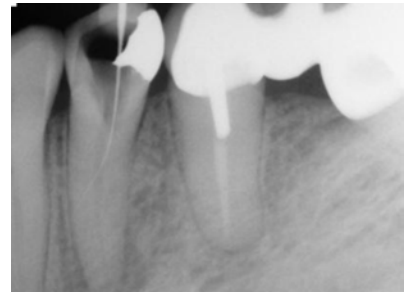


Access Perforation

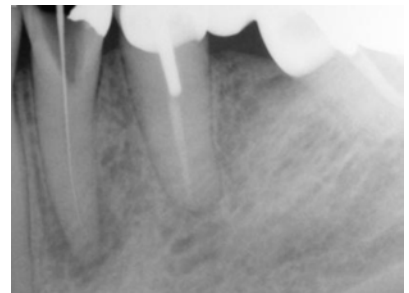
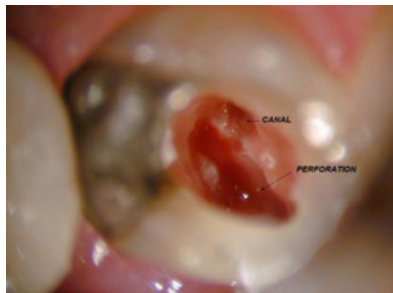
Tooth #21 had been previously accessed for RCT. Loose facial composite filling. Large perforation in the facial attached gingiva. Access was not in align with the canal. Dx: Previously initiated RCT with Symptomatic Apical Periodontitis.



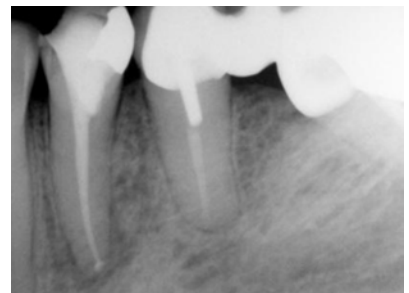
Extent of facial defect.
Radiographic confirmation of facial root perforation.



Location of the canal orifice in relation to the perforation site.
Radiographic confirmation of the root canal.

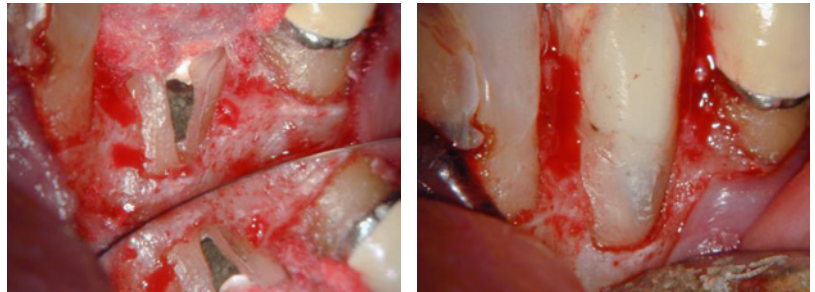


Internal repair of the perforation with MTA and root canal obturation.



Access Perforation Cont.

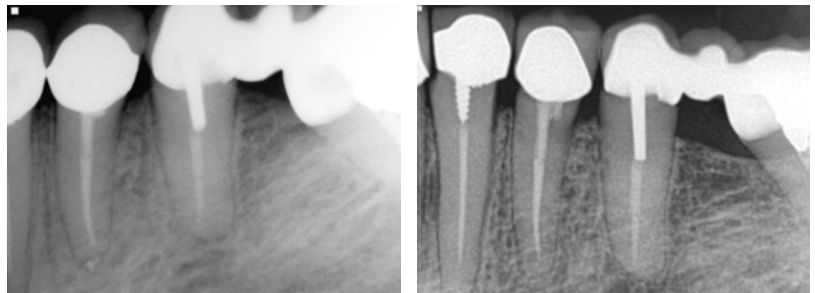
External repair of the facial defect with Geristore.



Post and core build-up with rigid parallel post and composite (Luxacore).



PA lesion has healed and the tooth remains asymptomatic and functional.



Recall 1 year

Recall 9 years