

**Wakad, our main clinic**

Prime City Center, A-6 & B-3, Datta Mandir Road, Shankar Kalat Nagar,
Wakad, Pune 411057

Mon to Sat: 9:30 am to 9 pm. Sun: closed

Hinjewadi

Office 102, Adora Commercial Wing, Bhumkar Chowk to Laxmi Chowk
Road, Hinjawadi, Pune 411057

Mon to Sat: 10 am to 9 pm. Sun: call to check

Consent for root canal treatment

Please read this form, ask us anything you are unsure about, and sign it at the clinic before your treatment.

Consent form Issued October 2026 Also at cdicsmiles.com/informed-consent-rct-extraction/

Draft: wording to be approved by the clinic

Patient's name

Date

Tooth number(s)

Treating doctor

About the treatment

The goal of root canal treatment is to save a tooth that might otherwise need to be extracted. Although root canal treatment has a very high success rate, as with all medical and dental procedures its result cannot be guaranteed. Root canal treatment corrects an apparent problem; occasionally an unapparent, undiagnosed or hidden problem may arise.

The treatment will not prevent future decay, tooth fracture or gum disease, and occasionally a tooth that has had root canal treatment may need re-treatment, endodontic surgery or extraction. If we feel your treatment needs skills beyond our training, we will refer you to a specialist.

Risks

Risks are unlikely, but may occur. They include, but are not limited to:

- A fine instrument separating (breaking) inside the canal
- Blocked canals that cannot be ideally completed
- Infection after treatment, needing more treatment or antibiotics
- Fracture, chipping or loosening of an existing filling or crown
- Temporary or permanent numbness
- Reactions to anaesthetics, chemicals or medicines
- A perforation (an extra opening) of the canal made by an instrument
- Incomplete healing of an infection at the root tip (periapical lesion)
- Fracture of the tooth or root, which may need extraction
- Discomfort after treatment
- A change in the bite, or jaw joint difficulty (TMJ problems or TMD)

Other treatment choices

These other options may be possible:

- No treatment at all.
- Waiting to see whether the symptoms develop further or become more severe.
- Extraction: removing the tooth, and replacing it with nothing, a denture, a bridge or an implant.

After the treatment

After the root canal treatment is completed, the tooth needs a permanent restoration (a filling, crown, onlay or inlay). Not having the tooth properly restored in good time (within 15 days) significantly increases the chance of the root canal treatment failing or the tooth fracturing. Regular check-ups every six months are needed to check the health of the treated tooth and the teeth beside it.

Consent

I have had the opportunity to ask my treating doctor questions, and I am satisfied with the answers I have received. I understand that medical problems may occur if I do not have the root canal treatment completed. I agree to pay the fees for the procedure during or after the treatment. I consent to the procedure.

Patient's signature

Parent or guardian, if the patient is under 18

Doctor's signature

Date

For the clinic's records

Tooth number

Probable prognosis

Canal	B	P	MB	ML	DB	DL
Working length						
Preparation						
Master cone						
Post						