

Protocol 15

Extraction^{21,30}

○ **Definition:**

It is the painless removal of the whole tooth with minimal trauma to the investing tissues, so that wound heals uneventfully with no postoperative complications.

○ **Indications:**

Primary Teeth

1. Irrestorable symptomatic teeth.
2. Root resorption (external or internal – if symptomatic).
3. Periapical pathology.
4. Furcation involvement.
5. Necrotic teeth.
6. According to the recommendation of orthodontist.
7. Irrestorable traumatized teeth.

Permanent Teeth

1. Irrestorable teeth that can't be treated by restorative procedures.
2. Teeth with periapical pathology which can't be treated by endodontic procedures (with or without apicectomy).
3. Vertical fracture extends beyond cervical margin where restoration is not possible.
4. Supernumerary teeth that causes malocclusion or malfunction (with orthodontic consultation if needed).
5. Teeth involved in bony pathology like neoplasms or involved in cyst formation.
6. According to the recommendation of orthodontist.

○ **Contraindications :**

Local Factors:

1. Acute infection with uncontrolled cellulitis.
2. Acute infections like severe gingivitis and stomatitis.
3. Acute pericoronitis.

Systemic Factors:

1. Uncontrolled diabetes mellitus.
2. Uncontrolled bleeding disorders.
3. Medically compromised or debilitating patients.

In all the above mentioned systemic contraindications, the extraction should not be done unless the patient's physician is contacted and his recommendations are followed.

Regulations for Permanent Tooth Extraction:

- 1- X- Ray should be taken (periapical or other x-rays if required).
- 2- Clinical supervisor should be consulted.

Post Extraction Instructions:

- A. Post extraction instructions should be explained to the parents.
- B. Provide the parents with the printed instructions.