## PULPECTOMY PROCEDURE IN CHILDREN

# **Single Visit Pulpectomy**

- Large carious exposure with frank involvement of radicular pulp without any periapical changes
- Haemorrhage from amputated radicular pulp stumps

- Tooth is anaesthetized and isolated
- Access cavity is prepared
- Pulp is extirpated
- Irrigation and drying of canals is done
- Canal is obturated
- Final restoration is done and stainless steel crown is placed

# 1st Appointment (Access opening)

- Tooth is anaesthetized and isolated
- Access cavity is prepared
- Pulp is extirpated
- Working length is determined
- Formocresol cotton pellet is placed in chamber following which temporary restoration is placed

# **Multiple Visit Pulpectomy**

- Abscess or chronic sinus, Non-vital
- Teeth with necrotic pulp and periapical involvement

## 2<sup>nd</sup> Appointment (Cleaning and shaping)

- Appointment should be 5-7 days apart
- Remove temporary restoration
- Biomechanical preparation and irrigation is done
- Canals are dried
- Temporary restoration is placed

# 3<sup>rd</sup>Appointment (Obturation)

- Appointment should be 5-7 days apart
- Temporary restoration is removed
- Irrigation and drying of canals is done
- Canals are obturated
- Pulp is sealed with temporary restoration
- Recall after one week if asymptomatic
- Stainless steel crown is given

### **OBTURATION TECHNIQUES**

Endodontic pressure syringe Reamer technique

Mechanical syringe Insulin syringe technique

Incremental filling technique NaviTip

Tuberculin syringe Bidirectional syringe

Jiffy tubes Past inject (Micromega)

#### MATERIALS USED FOR OBTURATION

Zinc oxide eugenol Iodoform paste

Calcium hydroxide Endoflas

Endoflas-Chlorophenol – free Calen Paste with zinc oxide

Pulpotec Aloe Vera

Zinc-Oxide Ozonated oil Lesion sterilization and Tissue